

Newborns to Be Separated From Parents for COVID-19 Testing

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STORY AT-A-GLANCE

- In an April 30, 2020, GatesNotes post, Bill Gates states he suspects “the COVID-19 vaccine will become part of the routine newborn immunization schedule”
- The U.S. Centers for Disease Control and Prevention is recommending newborns be tested for COVID-19 twice within the first 48 hours, and separated from mothers with confirmed or suspected SARS-CoV-2 infection
- Only three pediatric deaths from alleged COVID-19 illness have been reported in the U.S. as of April 2, 2020
- Early separation has been proven to cause emotional and neurobiological problems well into adulthood
- Phase 1 human trials have begun for a few different COVID-19 vaccines. In the Moderna trial, one of the subjects developed a fever “of more than 103 degrees” Fahrenheit, fainted, and reported feeling “more sick than he ever has before” after his second dose

The Bill & Melinda Gates Foundation is the biggest funder of vaccines in the entire world and, according to Gates, its COVID-19 vaccination effort “dwarfs anything we’ve ever worked

on before.”¹ Indeed, Gates push for mandatory COVID-19 vaccination – and investment in those vaccines – is historically unprecedented.

In an April 30, 2020, GatesNotes post,^{2,3} Gates even states he “suspect[s] the COVID-19 vaccine will become part of the routine newborn immunization schedule.” In other words, a novel vaccine that alters your DNA and RNA – turning your body into an antigen-producing factory – will be given to newborns, if Gates has his way.

What could possibly go wrong? If history tells us anything, we know that just about anything could or will go wrong if the CDC mandates the COVID-19 mRNA vaccine on the newborn vaccine schedule.

Considering the vast majority of COVID-19 deaths occur in the elderly, why would babies, who are the absolutely lowest at-risk age group, need mandatory vaccination against COVID-19 in the first place? There’s absolutely no evidence to suggest vaccinating babies would prevent them from spreading the virus if infected, or develop lifelong immunity.

Newborns To Be Tested and Separated From Infected Mothers

In related, beyond ludicrous news,⁴ the U.S. Centers for Disease Control and Prevention is now recommending⁵ newborns be [tested for COVID-19](#) – not just once, but twice – and separated from mothers with confirmed or suspected SARS-CoV-2 infection. As reported by CBSN Pittsburgh May 26, 2020:⁶

“‘The recommendation is the baby be tested sometime around 24 hours after birth. And if the test is negative, they’re recommending a second test at 48 hours,’ says Dr. Paul Weinbaum, an obstetrician at the Allegheny Health

Network. And these babies must be kept apart.

‘The baby should not only be separated from other babies but perhaps separated from the mother if that’s feasible,’ he said ... If the baby’s tests are negative, the separation is over. But what happens if a baby tests positive? ‘They don’t recommend keeping these babies in the hospital,’ says Dr. Weinbaum.”

Early Separation Can Have Lasting Psychological Effects

If you ask me, separating newborns from their mothers due to SARS-CoV-2 infection (especially if it’s only “suspected”) appears not only unnecessary at best but foolhardy and cruel at worst – especially in light of the fact that only three pediatric deaths from alleged COVID-19 illness have been reported⁷ in the U.S., and the fact that such separation has been proven to cause emotional and neurobiological problems well into adulthood. As stated in a 2018 article in *Psychological Science*:⁸

“The attachment bond between a mother and her child is first formed in the womb, where fetuses have been found to develop preferential responses to maternal scents and sounds that persist after birth ...

These rapid early-learning processes continue during the newborn stage of development, in which children begin to recognize their mothers’ faces and voices.

From this point on, early maternal separation can result in a series of traumatic emotional reactions during which the child engages in an anxious period of calling and active search behavior followed by a period of declining behavioral responsiveness.

In a study of infant rats, [Sackler Institute for Developmental Psychology director Myron] Hofer found that this behavior was largely a response to the loss of warmth a child receives through bodily contact, nutrients, and other physiological interactions with its mother ...

The research suggests that withdrawing maternal support early in a child's life can have a number of physiological and behavioral consequences that may contribute to a complex, changing pattern of vulnerability over the life span ..."

Such findings are not entirely new. According to a 2011 study⁹ published in Biological Psychiatry, evidence shows "separating infants from their mother is stressful to the baby." As reported by Science Daily:¹⁰

"Researchers measured heart rate variability in 2-day-old sleeping babies for one hour each during skin-to-skin contact with mother and alone in a cot next to mother's bed. Neonatal autonomic activity was 176% higher and quiet sleep 86% lower during maternal separation compared to skin-to-skin contact.

Dr. John Krystal, Editor of Biological Psychiatry, commented on the study's findings: 'This paper highlights the profound impact of maternal separation on the infant. We knew that this was stressful, but the current study suggests that this is major physiologic stressor for the infant.'"

While that 2011 study claimed to be one of the first providing evidence that separation causes undue stress, other studies have been published since then, showing the same thing.

Examples include another 2011 study,¹¹ which found "mother-child separation of a week or longer within the first two years of life was related to higher levels of child negativity

(at age 3) and aggression (at ages 3 and 5),” and that “the effects of separation on children’s aggressive behavior are early and persistent.”

Similarly, a 2012 study that looked at “physical and emotional closeness between the preterm infant and parent in the neonatal intensive care unit” found physical and emotional closeness are “crucial to the physical, emotional and social well-being of both the infant and the parent,” and that such closeness is an important part of healthy infant brain development.

Based on the historical failures to defend against coronaviruses with a vaccine, this could become one of the biggest public health disasters in the history of the world.**COVID-19 Vaccine Likely To Be Riskier Than Most** The COVID-19 vaccine is the most fast-tracked vaccine ever created in history, and some companies are skipping previously required safety testing steps, such as animal testing.^{12,13}

Phase 1 human trials have already begun for a few different COVID-19 vaccines within weeks of the infection hitting the U.S. In the Moderna trial of an experimental coronavirus vaccine,¹⁴ one of the subjects developed a fever “of more than 103 degrees” Fahrenheit, fainted, and reported feeling “more sick than he ever has before” after his second dose.¹⁵

Moderna and several other competitor vaccine manufacturers are using messenger RNA (mRNA) technology to make their vaccines rather than live or attenuated (inactivated) viruses grown in animal cells.¹⁶ (The GlaxoSmithKline and Sanofi COVID-19 vaccines, on the other hand, will be produced in insect cells with the dangerous squalene oil adjuvant.¹⁷) As explained by The New York Times:¹⁸

“... messenger RNA ... carries the instructions for cells to make proteins. By injecting a specially designed messenger RNA

into the body, the vaccine could potentially tell cells how to make the spike protein of the coronavirus without actually making a person sick.

Because the virus typically uses this protein as a key to unlock and take over lung cells, the vaccine could train a healthy immune system to produce antibodies to fight off an infection ... But no vaccine made with this technology for other viruses has ever reached the global market.”

So, not only are we dealing with a novel virus, the mechanics of which are still under debate (some experts are now saying it appears to be a [genetically engineered virus](#) that [attacks the blood](#)¹⁹ more so than the lungs, for example), they’re also fast-tracking experimental RNA-based vaccines that have never been licensed or used in humans before.

As explained in “[Fast-Track COVID-19 Vaccine – What Could Go Wrong?](#)” previous attempts to create coronavirus vaccines have failed due to coronaviruses triggering production of two different types of antibodies: one that fights disease, and one that triggers paradoxical immune enhancement that often results in very serious disease and/or death when the patient is exposed to the wild virus.

Based on the historical failures to defend against coronaviruses with a vaccine, this could become one of the biggest public health disasters in the history of the world. And, not one of those involved would face any repercussions. Instead, they will all profit from it.

COVID-19 Vaccine Will Alter Your RNA and DNA

I recently [interviewed Barbara Loe Fisher](#), co-founder and president of the nonprofit National Vaccine Information Center (NVIC), about these fast-tracked vaccines and the simultaneous push to make them mandatory for travel, if not for work and

social life in general.

As noted by Fisher, the mRNA vaccines being developed against COVID-19 will alter your RNA and DNA, which is of tremendous concern. As mentioned, the idea behind them is to turn your body into an antigen-manufacturing plant, and if your immune system is hypersensitive, it could overreact, causing severe problems. Considering how many people have autoimmune diseases and allergies, these vaccines could have devastating effects for many.

“When you try to stimulate strong inflammatory responses in the body ... what is this going to do to people who don’t resolve inflammation in the body and become chronically inflamed and chronically ill and disabled?” Fisher said.

“This is what vaccines do. They stimulate inflammation in the body. They have to in order to provoke an antibody response, but this is atypical. When you’re trying to do this in the body, this is not a normal way that the body mounts an inflammatory response to a microbe.

They’ve turned everything upside down and we are just accepting it. Why are we not thinking critically? Why do people think that they shouldn’t really do the research and look at the science and look at what’s being done before they take a pharmaceutical product or a vaccine? This is what I don’t understand. We’ve totally given up our critical thinking ability ...

I think ... you need to get educated, you need to get the accurate facts. Mercola.com and nvic.org, we do our research. We reference all of our information because we want you to have accurate information, and you need to share that information with your family, friends, community leaders and legislators, because the only way that we’re going to be able

to change government is by electing people who are going to reflect our values and beliefs."

Does the State Own Your Baby?

As reported in "[Children Taken From Parents Who Refuse Vitamin K Shots](#)," an increasing number of parents question the routine practice of injecting their newborns with vitamin K1, and some hospitals have started harassing and even removing newborns from their parents, calling parents' refusal of the shot "medical neglect."²⁰

While vitamin K1 is necessary for newborns, the painful (and potentially toxic) injection is not. You can safely and noninvasively normalize your baby's vitamin K1 level with oral drops.

In his 1999 paper, "Babies Don't Feel Pain: A Century of Denial in Medicine," David B. Chamberlain, Ph.D., a psychologist and co-founder of the Association of Pre-and Perinatal Psychology and Health, wrote:²¹

"The earlier an infant is subjected to pain, the greater the potential for harm ... We must alert the medical community to the psychological hazards of early pain and call for the removal of all man-made pain surrounding birth."

A 2004 study²² found that very early pain or stress experiences have long-lasting adverse consequences for newborns, including changes in the central nervous system and changes in responsiveness of the neuroendocrine and immune systems at maturity. Similar findings were also published in 2008.²³

In 2019, several Illinois families who experienced harassment and investigation by the Division of Children and Families Services over refusal of the vitamin K shot have filed a class action lawsuit against local hospitals (Silver Cross Hospital,

Advocate Christ Medical Center and the University of Chicago Medical Center), the American Academy of Pediatrics, DCFS and several pediatricians.²⁴

The fact that doctors, nurses, DCFS workers and state health officials are trying to circumvent parents' rights to make medical decisions for their children is disturbing in the extreme.

Chances are, the fight over who really has control over your children is likely to heat up once again if or when a COVID-19 vaccine becomes available and is added to the federally recommended childhood vaccination schedule, which is being turned into state law in most states. Before the time comes when a COVID-19 vaccine is mandated not only for all children but for all adults, too, I hope you all join us in the fight for freedom of choice.

To prepare, I urge you to sign up for the National Vaccine Information Center's online Advocacy Portal, a tool you can use to communicate with your elected representatives. This free service monitors vaccine-related state legislation throughout the U.S. and alerts you when proposed bills are moving in your state.

NVIC also provides you with fact-based talking points you can share with your legislators to educate them about the need to protect the legal right to make voluntary decisions about vaccination for yourself and your children.

[Sign Up for NVIC Advocacy Portal](#)