How the WHO Plans to Take Over the World

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The World Health Organization (WHO) is set to convene the <u>77th</u> World Health Assembly (WHA) meeting for May 27 — June 1, 2024 at the plush InterContinental Hotel in Geneva, Switzerland.

This in-person meeting of the WHA, the decision-making body of WHO, will bring together senior representatives from governments, multilateral organizations, and the private sector to discuss two international legal instruments intended to increase WHO's authority in identifying and managing health emergencies.

The two documents, (1) <u>Amendments</u> to the 2005 International Health Regulations (IHR), and (2) <u>A Pandemic Treaty</u>, termed 'ÇA+' by the WHO, when viewed together in the context of the globalist pandemic preparedness agenda represent an ambitious attempt towards monopoly power in global health governance.

These two instruments, the Pandemic Treaty and the IHR Amendments, are designed to operate in concert and consolidate the influence of the WHO as the world's "global health authority." If adopted and approved by member states these proposals would bring about significant changes in how the WHO operates.

The draft IHR amendments would lay out new powers for the WHO during health emergencies, and broaden the context within which they can be used. The draft CA+ ('treaty') if

implemented would support the bureaucracy, financing and governance that underpins the expanded IHR amendments.

Under the guise of a "One Health" approach these proposals and amendments would grant the WHO sweeping powers, under its Director General, in the arena of health management and broaden the WHO's reach into areas of governance on food economies, the environment and issues surrounding allocation of national resources.

If implemented, the IHR Amendments and the Pandemic Treaty working in tandem would grant administrative authority to unelected and unaccountable bureaucrats at the WHO.

These unilateral, wide-ranging decisions would assuredly benefit those who work for the various <u>public-private</u> <u>partnerships</u> that control the financial and political machinery of the WHO.

While there are countless reasons this latest hijacking of power by the WHO must be opposed, the list below highlights some of the primary concerns and consequences entailed in the IHR amendments and Pandemic Treaty:

- Changes the existing IHR provisions from non-binding "advice" to legally binding regulations;
- Allows the WHO to declare a Public Health Emergency of International Concern (PHEIC) which can oblige national governments to "undertake" border closures, lockdown of individuals, mandated medical examinations and vaccination;
- Expands the WHO Director General's (DG) authority to unilaterally declare a Public Health Emergency of International Concern (PHEIC);
- Empowers Regional Directors to declare regional public health emergencies;

- Expands the definitions of what constitutes pandemics and health emergencies;
- Maintain a perpetually operative pandemic preparedness bureaucracy through the development of a "framework convention" that would establish a new \$30 billion per year international health authority. This new global health bureaucracy would choreograph the WHO's role in developing global "allocation plans for health products" (including vaccines);
- Require member States to support censorship and suppression of information that diverges or dissents from WHO opinions and directives;
- Sets up wide-ranging health surveillance systems in all member States, which WHO will monitor regularly through administrative mechanisms;
- Gives WHO control over some measure of country resources, including requirements for financial contributions to fund "capacity building and "technical assistance" structures by requiring a percentage of national health budgets be devoted to health emergencies as defined by the WHO;
- Removal of a clause that required regulations must be in accordance "with full respect for the dignity, human rights and fundamental freedoms of persons", and replacing it with a new clause that reads regulations shall be "based on the principles of equity, inclusivity, coherence and in accordance with their common but differentiated responsibilities of the States Parties, taking into consideration their social and economic development";
- Expands WHO's scope by emphasizing a 'One Health' agenda which includes a broad range of health, economic, social and political life which impact health, and therefore

fall under the dictates of a declared international health emergency.

In addition to creating a multi-billion dollar self-perpetuating pandemic-preparedness industry, which will fund itself by looting the world's taxpayers, this latest power grab by the WHO and its globalist sponsors represents a fundamental threat to national, medical and bodily autonomy and is a clear and present danger to the citizens of the world.

This entire process under which unelected delegates negotiate terms and conditions which would place people at the mercy of medical officers, public health bureaucrats and health enforcement gendarmes, who will be immune to any penalty for any acts carried out in the name of "public good," stands in direct opposition to, and are in direct violation of informed consent and stands in direct opposition to multiple long-standing national and international principles of medical ethics such as:

The <u>Nuremberg Code</u> of 1947: 'The consent of the human subject is absolutely essential. The International Covenant on Civil and Political Rights resumed this ban against unintentional experimentation, in its 1966 text, which states: no one may be subjected without his consent to medical or scientific experiment."

The <u>Geneva statement</u> for doctors from 1948: "I will respect the autonomy and dignity of my patient. I will not use my medical knowledge to infringe human rights and civil liberties, even under force. I will keep absolute respect for human life, from conception. I will consider my patient's health as my first concern."

The <u>Declaration of Geneva</u> of the World Medical Association that binds the physician with the words, "The health of my patient will be my first consideration," and the International

Code of Medical Ethics declares that, "A physician shall act only in the patient's interest when providing medical care which might have the effect of weakening the physical and mental condition of the patient."

The <u>Belmont Report</u> on voluntariness which asserts, "[the] element of informed consent requires conditions free of coercion and undue influence. Coercion occurs when an overt threat of harm is intentionally presented by one person to another in order to obtain compliance. Undue influence, by contrast, occurs through an offer of an excessive, unwarranted, inappropriate or improper reward or other overture in order to obtain compliance.

Unjustifiable pressures usually occur when persons in positions of authority or commanding influence — especially where possible sanctions are involved — urge a course of action for a subject."

UNESCO's <u>Universal Declaration on Bioethics and Human Rights in 2005</u>: "to provide a universal framework of principles and procedures to guide States in the formulation of their legislation, policies or other instruments in the field of bioethics [and to] promote respect for human dignity and protect human rights, by ensuring respect for the life of human beings, and fundamental freedoms, consistent with international human rights law."

The World Health Organization, a UN agency with no national legal oversight and no legal accountability at all, seeks to establish itself as global health dictator by demanding member States respond to perceived threats through autocratic decrees formulated and given by the WHO which are certain to accrue profits and power to its corporate sponsors.

Make no mistake, whatever bylines and selling points the WHO offers, be it called "treaty," "agreement" or "accord," the practical intent and desired effect of this latest autocratic

assault on our rights is to create the legal and financial basis for an internationally coordinated bio-surveillance regime that will significantly strengthen the authority of the World Health Organisation.

The historical precedence of coercive and oppressive actions seen throughout the Covid-19 crisis provides a clear warning to all and demonstrates that the WHO will assuredly attempt to leverage the Pandemic Treaty and IHR Amendments to gain monopoly power through a global health governance pact that will inevitably result in global health despotism.

The WHO Pandemic Treaty which creates a world of "declared pandemics" and rolling "perpetual lockdowns" that will take away people's inalienable human rights and bodily autonomy must be rebuked by all citizens of the world and formally rejected by all local, state, regional and national governments of the world.

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