

It's so (deliberately) complicated:

What do the **Pandemic Agreement and
IHR **Amendments** Really Mean?**

and what else should I know?

Meryl Nass, MD

March 15, 2023

DoorToFreedom.org

The WHO's pandemic treaty and proposed International Health Regulations are Unconstitutional



Free speech will be gone: nations must surveil, censor and propagandize their citizens with the WHO's narratives (Art. 44 IHR and PT).
1ST AMENDMENT VIOLATION



Obtaining the medications or vitamins you want or refusing the vaccines you don't want may become impossible (Arts. 18 IHR and 43 PT). 14TH AMENDMENT VIOLATION



Travel restrictions, border closures, contact tracing, quarantines, forced examinations, vaccines and treatments can be imposed. (Art.18 IHR)



Loss of Privacy: your medical records and specimens taken from you, animals and your environment. Your social media content screened and restricted. 4TH AMENDMENT VIOLATION



"Potential pandemic pathogens" are to be sought and shared with the WHO and globally, virtually guaranteeing more pandemics (IHR and PT). 1972 BIOLOGIC WEAPONS CONVENTION VIOLATION



WHO gets a blank check to do what it wants and spend what it wants, because the deciding 'Conference of Parties' has not yet been established (PT)



"One Health" extends the range of things the WHO can control to include the entire planet (humans, animals, plants, ecosystems) (PT). 10TH AMENDMENT VIOLATION

The 2 WHO documents to be voted on in May 2024

International Health Regulation (IHR) Amendments

- Needs over a **50% vote** to pass
- **Every member** of the WHO and IHR (196 countries) **must obey** it if passed, unless the nation issues a formal revocation or reservation
- Goes into effect 12 months from a vote or a 'consensus' (if WHO avoids a vote)
- **Nations have 10 months to revoke or reserve after it passes.** No option exists to get out of the new IHR after that.
- This is an **OPT-OUT** process
- In force during a declared pandemic or potential pandemic

Pandemic Treaty, also called Accord, Agreement, Instrument, etc.

- Needs at least **2/3 vote** to pass
- If passed, nations must then formally sign or ratify to become a party
- Goes into effect for all signatories one month after the 40th signature
- Nations may not ask to withdraw from the treaty until two years after it enters into force, and then it will take an additional 12 months to get out
- This is an **OPT-IN** process, with an unusually short time-frame before entering into force
- The treaty will always be in force

**These rules
already exist in
the IHRs, but
when the new
amendments
are in force
they will be
binding =
obligatory**

Article 18 Recommendations with respect to persons, baggage, cargo, containers, conveyances, goods and postal parcels

Recommendations issued by WHO to States Parties with respect to persons may include the following advice:

- *require medical examinations;*
- *review proof of vaccination or other prophylaxis;*
- *require vaccination or other prophylaxis;*
- *place suspect persons under public health observation;*
- *implement quarantine or other health measures for suspect persons;*
- *implement isolation and treatment* *where necessary of affected persons;*
- *implement tracing of contacts of suspect or affected persons;*
- *refuse entry of suspect and affected persons;*
- *refuse entry of unaffected persons* *to affected areas; and*
- *implement exit screening and/or restrictions on persons from affected areas.*

Expanding the WHO's Authority:

- * Currently, the IHR are limited to responding to public health risks.
- * Amended, the WHO will be able to respond to **all risks** that have the **potential to affect public health**
- * This could include non-medical risks like food choices, biodiversity or climate change.

Article 2 Scope and purpose

The purpose and scope of these Regulations are to prevent, protect against, **prepare**, control and provide a public health response to the international spread of diseases **including through health systems readiness and resilience** in ways that are commensurate with and restricted to public health risk **all risks with a potential to impact public health** and which avoid unnecessary interference with international traffic and trade, **livelihoods, human rights, and equitable access to health products and health care technologies and know how.**

Article 43 "Additional health measures" is where the plan to restrict medications during future pandemics is hidden, using coded language

Article 43 Additional health measures

4. After assessing information and public health rationale provided pursuant to paragraph 3, 3bis and 5 of this Article and other relevant information within two weeks, WHO **shall** make recommendations to the State Party concerned to modify or rescind the application of the additional health measures in case of finding such measures as disproportionate or excessive.

The Director General shall convene an Emergency Committee for the purposes of this paragraph.

https://apps.who.int/gb/wgihr/pdf_files/wgihr2/A_WGIHR2_7-en.pdf

Censorship was quietly slipped into Article 44 ("Collaboration and Assistance") -- the WHO will promptly assist states in surveilling and censoring their citizens

Article 44 Collaboration and assistance

2. WHO **shall** collaborate with and promptly assist States Parties, in particular developing countries upon request, ~~to the extent possible~~, in:

(e) (New) countering the dissemination of false and unreliable information about public health events, preventive and anti-epidemic measures and activities in the media, social networks and other ways of disseminating such information;

The WHO wants us think the "health coverage" they promise is health care—but it is actually **health insurance** they repeatedly mention

- Here is what the Treaty draft says about **health coverage**:

Article 1. Use of terms

For the purposes of the WHO Pandemic Agreement:

(k) “universal health coverage” means that all people have access to the full range of quality health services they need, when and where they need them, without financial hardship. It covers the full continuum of essential health services, from health promotion to prevention, treatment, rehabilitation and palliative care;

- Here is how the US government defines **health coverage**:

<https://www.healthcare.gov/glossary/health-coverage/>

Health coverage

Legal entitlement to payment or reimbursement for your health care costs, generally under a contract with a health insurance company, a group health plan offered in connection with employment, or a government program like Medicare, Medicaid, or the Children’s Health Insurance Program (CHIP).

What is One Health?

"One Health is an **integrated, unifying** approach that aims to **sustainably balance** and optimize the health of people, animals and ecosystems. It recognizes the health of humans, domestic and wild animals, plants, and the wider environment (including ecosystems) are closely linked and inter-dependent.

The approach mobilizes multiple sectors, disciplines and communities at varying levels of society to work together to foster well-being and **tackle threats to health and ecosystems**, while addressing the collective need for clean water, energy and air, safe and nutritious food, **taking action on climate changes and contributing to sustainable development.**"

https://www.onehealthcommission.org/en/why_one_health/what_is_one_health/.

The One Health High Level Expert Panel created this definition



One Health: a call for ecological equity

The Lancet

Published: January 21, 2023 • DOI: [https://doi.org/10.1016/S0140-6736\(23\)00090-9](https://doi.org/10.1016/S0140-6736(23)00090-9)

Conclusion:

"The reality is that One Health will be delivered in countries, not by concordats between multilateral organizations, but by **taking a fundamentally different approach to the natural world, one in which we are as concerned about the welfare of non-human animals and the environment as we are about humans.** In its truest sense, One Health is a call for ecological, not merely health, equity."

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(23\)00090-9/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(23)00090-9/fulltext)

Tedros, with no medical degree, would become the world's doctor during a pandemic or potential pandemic

The New York Times

GLOBAL HEALTH

Candidate to Lead the W.H.O. Accused of Covering Up Epidemics

Share full article



Tedros Adhanom Ghebreyesus in 2016. He has been accused of covering up cholera outbreaks by an associate of a rival for World Health Organization director general. Fabrice Coffrini/Agence France-Presse — Getty Images

By **Donald G. McNeil Jr.**

May 13, 2017

"[As a] candidate to head the World Health Organization Tedros was accused this week of **covering up three cholera epidemics in his home country, Ethiopia**, when he was **health minister**."

"**He was Ethiopia's foreign minister** from 2012 to 2016... Human Rights Watch and even [the State Department](#) have [accused Ethiopia's ruling party](#) of displacing thousands of citizens, gunning down hundreds of protesters and jailing or torturing political opponents and journalists."

July 19, 2023



United Nations

UN News

Global perspective Human stories

Lies about pandemic accord endangering future generations: WHO chief



Tedros Misleads

“I need to put this plainly: those who peddle lies about this historic agreement are endangering the health and safety of future generations.”

“WHO will not be a party,” he said

That is because the WHO IS a party to the International Health Regulations, and the amendments now being negotiated require countries to obey the WHO Director-General's directives, including censorship of everything except the WHO's public health messaging, vaccine and mask mandates, vaccine passports, quarantines, and withholding certain medicines during a pandemic.

WHO: Sexual Misconduct and Exploitation by Staff Remains Problematic--VOA

October 24, 2023 [Lisa Schlein](#)

AP

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Israel-Hamas war Elections 2023 Trump civil fraud trial Tyson chicken rec

'An absurdity': Experts slam WHO excusal of sex misconduct

'Loophole' excuses WHO officials accused of misconduct

GENEVA — The World Health Organization reported Monday that progress was being made in efforts to prevent and respond to cases of sexual misconduct but acknowledged that **abuse by WHO staff remained problematic.**

...Over the past 12 months, the WHO Office of Internal Oversight Services, or IOS, reports it has investigated 287 allegations of sexual misconduct in all WHO regions.

<https://www.voanews.com/a/who-sexual-misconduct-and-exploitation-by-staff-remains-problematic-/7323906.html>

CONTRIBUTORS

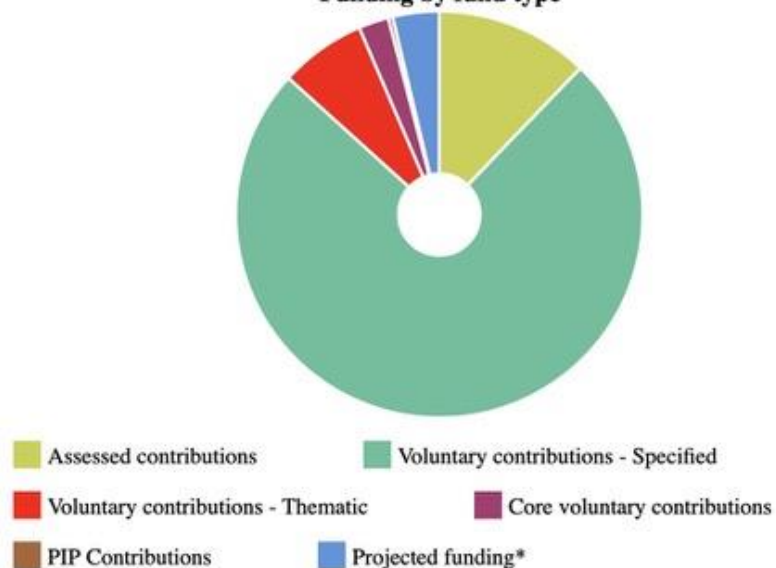
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Funding by fund type



Funding by contributor

UPDATED UNTIL 02-2023

- All Contributors

Assessed contributions	956,900K
Voluntary contributions - Specified	5,842,365K
Voluntary contributions - Thematic	537,294K
Core voluntary contributions	187,703K
PIP Contributions	27,963K
Projected funding*	289,661K
Total	7,841,885K

* Projected can be either core voluntary or voluntary thematic/specified

EU GLOBAL HEALTH STRATEGY

Better Health For All in a Changing World



"As we shift the focus on what to do, an equally fundamental shift must occur on how to do it. **A new global health order is emerging** —and the EU must contribute to shaping it through a more strategic and effective engagement."

"Global governance will require a new focus to maintain a strong and responsive multilateral system, **with a World Health Organization (WHO) at its core** which is as sustainably financed as it is accountable and effective. Consensus should be built through deepened cooperation through G7, G20, and other global, regional and bilateral partners. The EU should drive the essential process of filling the existing gaps in global governance, avoiding duplication and ensuring coherence of action. This will need **close cooperation with the private sector, philanthropic organisations, civil society and other stakeholders** to support this strategy's objectives."



D. Multilateral Institutions for the 21st Century

Reinvigorating Multilateralism

"The need for revitalized multilateralism to adequately address contemporary global challenges of the 21st Century, and to **make global governance more representative, effective, transparent and accountable**, has been voiced at multiple fora. In this context, a more inclusive and **reinvigorated multilateralism and reform aimed at implementing the 2030 agenda** is essential."

https://www.g20.org/content/dam/gtwenty/gtwenty_new/document/G20-New-Delhi-Leaders-Declaration.pdf

Financial Intermediary Fund for Pandemic Prevention, Preparedness and Response

Governance Framework

"COVID-19 has highlighted the urgent need for collective action to augment the existing **global health security financing system** and to mobilize additional, **dedicated resources** to build health systems and **strengthen capacity for pandemic prevention, preparedness, and response (PPR)**. **Avoiding future pandemics requires investing substantially more in PPR**; these investments will help avert the **much larger costs** that the world would incur if we were to be caught unprepared for the **next global health crisis**. Countries must **step up domestic investments** in the core pandemic PPR capacities needed to **strengthen health preparedness and prevent and contain future pandemics, in accordance with the International Health Regulations...**"

World Bank *Governing Board, September 8, 2022*

The UN proposed its own vague power grab

"We are living in a period of great uncertainty, yet we know that the risks we face are growing and becoming more complex. Enhanced international cooperation is the only way we can adequately respond to these shocks, and the United Nations is the only organization with the reach and legitimacy to convene at the highest level and galvanize global action."

According to the Secretary General, "I propose that the General Assembly provide the Secretary-General and the United Nations system with a standing authority to convene and operationalize automatically an Emergency Platform in the event of a future complex global shock of sufficient scale, severity and reach."

Our Common Agenda
Policy Brief 2

Strengthening the International Response to Complex Global Shocks – An Emergency Platform

MARCH 2023



**United
Nations**



\$20 Billion a year to HHS for **biodefense**
in Biden's proposed 2024 HHS budget



[Administration](#) [Priorities](#) [The](#)

OCTOBER 18, 2022

FACT SHEET: Biden-Harris Administration Releases Strategy to Strengthen Health Security and Prepare for Biothreats

 [BRIEFING ROOM](#) [STATEMENTS AND RELEASES](#)

Summary of What the WHO is seeking

1. No sovereignty is ceded to the WHO? — yet the WHO will give binding orders to nations and require them to pass laws to carry out the orders, **a clear transfer of sovereignty** (*IHR Article 1*)
2. "Regulatory strengthening" is actually **regulatory weakening** (*Treaty Article 14*)
3. "Managing liability" is actually **removing liability** for warp speed vaccines (*Treaty Article 15*)
4. The WHO promises "**universal health coverage**" (insurance policies to be purchased) and hopes we misinterpret it as medical *care* (*Treaty Article 1*)
5. The WHO promises unfettered access to information, then **demands nations censor "infodemics" and "misinformation"** (*Treaty Articles 9, 18*), (*IHR Article 44*)
6. Pandemics are much more likely to come from the labs the WHO demands every nation construct to study PPPs and from the **sharing of PPPs** (*Treaty Article 12 and the Select Agent yearly reports*)
7. "**One Health**" is a Trojan horse designed to place everything in the world under the WHO's authority (*Treaty Article 6*)
8. **Human rights, dignity and freedom of persons have been discarded** (*IHR Articles 2 and 3*)
9. The **WHO can withhold medications** it deems "disproportionate or excessive" (*IHR Article 43*)

Why is the Global Bio-Security Agenda so important to the international power elites?

The suggested IHR Amendments and Pandemic Treaty give them the following:

- 1. A reason for nations to borrow many billions of dollars, spend it on products that profit them, and also earn huge commissions**
- 2. The justification to conduct bio-surveillance, and to collect and decode the genomes of the world's population for potential profit and potential control**
- 3. A reason to require digital vaccine passports/IDs to be followed by digital money, yielding extraordinary profits and total control**
- 4. A reason to interfere with agricultural activities, fishing and food processing in the name of environmentalism and One Health**
- 5. The ability to move populations in order to 'protect' biodiversity and ecosystems**
- 6. The right to impose massive digital surveillance, censorship and the enforcement of a single WHO public health narrative worldwide—yielding ultimate control of information**