

All Eyes Are on the WHO as They try to Take Over the World

Analysis by [Tessa Lena](#)

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STORY AT-A-GLANCE

- › In May 2022, the World Health Organization adopted Amendments to International Health Regulations, time for individual countries to turn around and reject them is running out
- › A whole new set of potentially dangerous Amendments is in the works, the latest draft is not available to the public, the available drafts are nefarious
- › On September 20, 2023, the UN plans to adopt a “Political Declaration of the United Nations General Assembly High-level Meeting on Pandemic Prevention, Preparedness and Response” promoting the need to spend an additional 30 billion every year on “global health emergency preparedness”
- › In May 2024, the 300+ new amendments and the WHO CA+ Framework Convention (formerly known as “Pandemic Treaty”) are scheduled to be adopted
- › Time to let our opinions heard and say no to neofeudalism is now

All Eyes on the WHO

The World Health Organization circa 2023 is a villain. They are an excuse for money laundering and subjugating innocent people for the benefit and the convenience of the biggest oligarchs.

They glorify themselves – but words are cheap, and we may be hurting – but we are not lobotomized. We have not forgotten what their “guidance” has done to us in the past

three years. We are sicker, we have less freedom, less dignity, and somebody is constantly trying to stick a needle or ten into our arms. What delight.

On my end, I still remember how only three years ago, the rumor about this video by the WHO was whispered and passed around as an impossible, unthinkable conspiracy theory. Oh, how time flies.

Here is a great introduction to the topic by Dr. Meryl Nass from May 2023 that she delivered at the International Covid Summit III:

Four Treacherous Tracks

Right now, the efforts by the WHO to scam the people of the world and to make our lives worse are happening on four different tracks, as documented by James Roguski and Dr. Meryl Nass on their respective Substacks ([here](#) and [here](#)) and on the new dedicated website, [Door to Freedom](#). Here are the four tracks that are important to pay attention to right now, per [James Roguski](#):

- The Political Declaration of the United Nations General Assembly High-level Meeting on Pandemic Prevention, Preparedness and Response
- The Amendments to the International Health Regulations adopted in May 2022 that needs to be rejected by the end of November of this year
- The new set of Amendments to the International Health Regulations that are currently being worked on, expected to be officially submitted for consideration as a draft in January 2024 and adopted in May 2024
- The WHO CA+ Framework Convention (formerly known as “Pandemic Treaty”)

#StopTheNegotiations



StopTheGlobalAgenda.com

Image source: jamesroguski.substack.com/p/stop-the-global-agenda

James [points out](#) four quickly approaching deadlines:

- **September 20, 2023** – The United Nations plans to adopt a “Political Declaration of the United Nations General Assembly High-level Meeting on Pandemic Prevention, Preparedness and Response.”
- **December 1, 2023** – Deadline to REJECT the amendments to the International Health Regulations that were adopted on May 27, 2022.
- **Mid-January, 2024** – Deadline for input to the 300+ amendments to the International Health Regulations that are currently being negotiated in secret.
- **May 2024** – Scheduled date for adoption of the 300+ amendments and the WHO CA+ Framework Convention (AKA: “Pandemic Treaty”).

Exit the WHO

One way to solve all the WHO woes is to exit the WHO.

James provides a [very detailed information about what you can do](#). Sounds like a good plan!



Now let's go back to the four individual tracks that the WHO is pursuing in order to give a veneer of respectability to the classic enrichment scheme wrapped in a narrative about "our health."

United Nations "Political Declaration"

The "Political Declaration of the United Nations General Assembly High-level Meeting on Pandemic Prevention, Preparedness and Response"¹ is a non-binding United Nations declaration scheduled to be adopted in September 2023. While it is non-binding, it adopted, it will give steam to adjacent nefarious agendas and provide an additional way of supporting the efforts happening on other tracks.

The declaration, uhm, declares a pressing need for 30 billion dollars to be spent on "health." "Health" is an Orwellian euphemism referring to a lucrative digital surveillance infrastructure and pushing more "vaccines" into the arms of every man, woman, and child (and probably, if they can get away with it, also into the innocent bodies on every dog and cat). The Declaration includes the following language:

PP29 (page 5):

“Welcome the launch of the Pandemic Fund in November 2022, to strengthen national health emergency preparedness, response and resilience in low-income and middle-income countries and recall that financing effective national, regional and global health emergency preparedness will require approximately US\$ 30 billion per year, outside current Official Development Assistance levels;”

OP2 (page 6):

“Ensure the timely, sustainable and equitable access to pandemic-related products, including vaccines, diagnostics, therapeutics and call on the World Health Organization to coordinate this with relevant partners, ensuring coherence with the ongoing discussions of the Intergovernmental Negotiating Body and the Working Group on Amendments to the International Health Regulations (2005) in Geneva;”

OP32 (page 11):

“Take measures to address the negative impact of misinformation and disinformation on public health measures as well as people’s physical and mental health, and to counter mis and dis-information, especially on social media platforms, in the context of pandemic prevention, preparedness and response and to foster trust in health systems and vaccine confidence, while recognizing that the effective engagement of stakeholders requires access to timely and accurate information;”

OP38 (page 12):

“Call also for the improvement of routine immunization, vaccination and outreach capacities, including by providing evidence-based information on countering vaccine hesitancy, and expand vaccine coverage to prevent outbreaks as well as the spread and re-emergence of communicable diseases,

including for vaccine-preventable diseases already eliminated as well as for ongoing eradication efforts, such as for poliomyelitis;”

OP39 (page 12):

“Mobilize domestic public resources as the main source of financing for pandemic prevention preparedness and response, through political leadership, consistent with national capacities, and expand pooling of resources allocated to health, identify new sources of revenue and improve the efficiency of public financial management;”

OP44 (page 13):

“Call also for the conclusion in 2024 of the negotiations of the Intergovernmental Negotiating Body in Geneva, of an ambitious and legally binding convention, agreement, or other international instrument on pandemic prevention, preparedness and response, with a view to adoption under Article 19 of the Constitution of the World Health Organization, or under other provisions of the Constitution of the World Health Organization as may be deemed appropriate by the Intergovernmental Negotiating Body, to strengthen the pandemic prevention, preparedness and response spectrum and inviting all other initiatives to support this central endeavor, and for the conclusion in 2024 of the negotiations of the Working Group on International Health Regulations Amendments (2005), to provide support to all the health and health-related measures necessary to prevent, protect against, control and provide a public health response to the international spread of disease.”

The Declaration has been analyzed in great detail (including action items) by James Roguski [here](#).

Amendments to International Health Regulations

International Health Regulations² were originally adopted in 1969. As described on the [Door to Freedom](#), the World Health Organization members adopted a set of principles

termed the **International Health Regulations (IHR) in 1969** to guide the conduct of nations during health emergencies affecting more than one country, especially malaria and smallpox. The IHR was **amended in 2005**. The WHO **states**:

“The International Health Regulations (2005) (IHR) provide an overarching legal framework that defines countries’ rights and obligations in handling public health events and emergencies that have the potential to cross borders.”

There are two sets of **IHR Amendments** that we need to pay attention to. One set was adopted in **May 2022** at the **Seventy-Fifth World Health Assembly** (pages 59-62 of the PDF). The deadline for the United States to reject them is December 1, 2023.

Another set of Amendments was submitted by 94 countries around September 2022. The last publicly available draft was published in **February 2022**, we are kept in the dark as to what the real latest draft looks like. That final draft of those Amendments has to be formally submitted by an internal committee around January 2024 to be adopted in May 2024 (or so they hope).

Let’s look at the convoluted Amendments plot in more detail. International Health Regulations are legally binding but originally, the language of the Regulations didn’t ask for too much. The member states are now required to monitor their epidemiological situation and report qualifying developments to the WHO. If done honestly and without overreach, one could argue that it’s a sensible thing.

Like it is with everything in life though, the devil is in the detail. Let us use a metaphor. Membership in the WHO and being legally bound by their regulation are like a marriage. One could say that marriage is a good thing. Yes, it could be – but what if your spouse is abusive? Then it’s obviously a bad thing. Same with the WHO.

It is lovely to have a honest international body helping with various matters of public health. Yes, it is lovely if that is actually what’s going on. But if instead of being an honest organization, they are a mob that is running endless money laundering schemes for various wealthy folks and constantly trying to stick needles into people’s arms while

knowing that the products they are trying to inject may be causing harm, then the story far from lovely. It is then not lovely at all.

So, we've been humming along, and then in January 2022, the United States submitted a number of nefarious Amendments to thirteen IHR Articles that, upon some display of discontent and noise raised by the African and some other member states ended up "disappearing" and **going nowhere**.

Instead, in May 2022, more innocuous amendments (to five Articles) were adopted.³ The Amendments that ended up being adopted in May 2022 were submitted just a couple of days before they were adopted, despite the requirement to submit them at least four months in advance. Here is how it all went down:

James Roguski wrote an excellent analysis of the Amendments adopted in May 2022:

Executive Summary:

- *Australia, Bosnia and Herzegovina, Colombia, European Union and its Member States, Japan, Monaco, Republic of Korea, United Kingdom of Great Britain and Northern Ireland and United States of America (illegitimately?) proposed and adopted (without a quorum?) a set of amendments to five Articles (55, 59, 61, 62, 63) of the International Health Regulations.*
- *It must be understood that 194 unelected, unaccountable and largely unknown delegates have somehow obtained the unusual authority to change international law by simply agreeing to do so. Once they have quietly adopted any proposed amendments, no signatures by any President or Prime Minister and no approval by any Parliamentary body, Congress or Senate is needed.*

An 18 month period of unawareness, ignorance and silence is all that is needed for the amendments to enter into force.

- ***Under Article 61 of the IHR each and every member nation has the authority to REJECT any or all of the amendments but they must do so before late November 2023 [the formal deadline seems to be December 1, 2023].***

- *Unless rejected before late November, 2023, the amendments to Article 59 will reduce the time period for rejection from 18 to 10 months and the time period for enactment into force will be reduced from 24 to 12 months.*
- *The amendments to Article 62 clarify the details by which reservations can be made to future amendments.*

“Since the adoption of the amendments on May 27, 2022 (during the 75th World Health Assembly), no signatures by any Presidents or Prime Ministers have been obtained and no approval by the Senate, Congress or any Parliament has been obtained in order to “ratify” the amendments to the International Health Regulations. Such approval is NOT needed.”

In James’ opinion, the fact that legally binding amendments were adopted without any mainstream publicity or national legal oversight is a disastrous situation. Many of us agree.

Another Set of IHR Amendments Set To Be Adopted in 2024

A brand new collection of amendments is set to be adopted in May 2024. [Door to Freedom](#):

“A total of 307 amendments were proposed during 2022 by 94 member nations [around September 2022]. The [proposed amendments](#) were first made publicly available in mid-December, 2022 and were [republished](#) on February 6, 2023.

The proposed Amendments would allow the W.H.O. Director-General to assume the authority to direct healthcare around the world whenever he declared a Public Health Emergency of International Concern. He has already declared 3 (for Ebola, COVID-19 and monkeypox) during his six years in office. Among the new provisions in the proposed IHR amendments are the following:

- *Vaccine passports.*

- *The guarantee of human rights has been struck out, removing the words “with full respect for the dignity, human rights and fundamental freedoms of persons,” which are present in the current version of the IHRs.*
- *The potential to enforce certain medical treatments and ban others.*
- *A requirement for biological surveillance (such as PCR tests) to be performed on humans and animals in search of pandemic pathogens.*
- *The requirement to monitor social media and allow only the W.H.O.’s narrative on public health to be transmitted.*
- *The ability to commandeer medical supplies within one country for use by another.*
- *The requirement to share genetic sequences of pathogens, even though this could result in proliferation of biological weapons, which is banned by existing treaties such as Resolution 1540 (2004) of the UN Security Council and the Biological Weapons Convention (1972).*

Furthermore, the current draft IHRs include no specific criteria for the Director-General of W.H.O. to declare a public health emergency of international concern (PHEIC). A declaration could even be made without the consent of the involved nations. And there are no provisions that make W.H.O. officials accountable for their actions.

Equally concerning, a PHEIC declaration can be issued for merely the potential for a public health emergency, and the emergency powers can be extended beyond the end of the emergency.

The proposed IHR amendments raise the possibility of a global health dictatorship, called at the whim of the W.H.O. leadership or the whim of the W.H.O.’s major funders. Why the W.H.O. should take on these powers, when its performance during COVID-19 was far from stellar, is an important question.

The proposed amendments will be considered for adoption at the 77th World Health Assembly during the last week of May, 2024.”

Dr. Nass recently **wrote** that “the WHO’s proposed amendments will increase man-made pandemics.”

And here is an overview of the 307 proposed amendments to the International Health Regulations that are currently being negotiated by the Working Group for amendments to the International Health Regulations by **James Roguski**:

- At least 94 member nations have submitted 307 amendments to the International Health Regulations to 33 of the 66 Articles, along with 6 new Articles as well as proposing amendments to 6 of the 9 Annexes and one new Annex. Do not forget that 100 member nations did NOT submit any proposed amendments, which would imply that they did not feel any changes were needed.
- Many of the people who have reviewed the amendments have failed to focus on the original submissions from each nation, so they jump to a conclusion that “the amendments” are a unified set of changes, instead of realizing that the amendments were submitted by many different nations and that there are still many disagreements on how to proceed.
- Each of the many nations, and groups of nations, are attempting to bend the WHO to their will in order to gain advantages for themselves.
- Neither the WHO nor the Director-General submitted any proposed amendments.
- Details within the International Health Regulations Review Committee's Final Report are clearly critical of many of the 307 amendments that were proposed by the 94 member nations. Excerpts from the IHRRRC Final Report are included in the text below.

The problem is that we don’t know what is contained in the current draft. If adopted, the new Amendments have the potential to formally erode the already wobbly national sovereignty and enable the richest people of the world to legally use the WHO as a front for their cruel money scams that play with people’s lives like it’s good ol’ feudal times all over again. Am I even slightly excited about neufeudalism? No.

“Pandemic Treaty”

The fourth track is the WHO CA+ Framework Convention. This track (formerly known as “Pandemic Treaty”) was initiated [in December 2021](#). It has to do with creating a new international legal framework that would theoretically coordinate the activities of different member states but in practice, would likely coordinate more money laundering schemes at our expense. James Roguski writes on [Door to Freedom](#):

“In response to what is essentially an international trade dispute, a special session of the World Health Assembly decided on December 1, 2021 to create an Intergovernmental Negotiating Body (INB) to launch a process to develop an historic global accord under the Constitution of the World Health Organization to strengthen pandemic prevention, preparedness and response.”

“Article 19 of the WHO Constitution provides the World Health Assembly with the authority to adopt conventions or agreements on any matter within WHO’s competence. The INB will submit its outcome for consideration by the 77th World Health Assembly in May 2024. The sole instrument established under Article 19 to date is the WHO Framework Convention on Tobacco Control.”⁴

“In early April 2022, a total of 33,884 public comments were received by the WHO. Over 99% of the comments voiced opposition to the idea of a “Pandemic Treaty.”⁵

In September 2022, several hundred video submissions were received by the WHO. The majority of the videos submitted by individuals voiced opposition to the idea of a “Pandemic Treaty.”⁶

The INB has held 5 official meetings and has published a Working Draft,⁷ a Conceptual Zero Draft,⁸ a Zero Draft⁹ and a Bureau’s Text.¹⁰ The controversial “compilation text,” which is purported to include approximately 200 pages of text proposed by the member nations, has not been made available to the public.”

The existing drafts go about same old, same old: surveillance, infrastructure, tackling “misinformation,” and vaccines.

We are looking at a multi-prong, very tragic, and extremely corrupt military-grade campaign to chain and subjugate the people of the world in a new way (in addition to the old way). The novel feature is the use of digital technology to tag us, to surveil us, to limit our movement and our access to “old normal” foods and medicines that work while forcing various procedures on us that can maim. Shame on them. Shame on them.

The “Swine Flu” Precedent and Long-Term Planning

I [wrote](#) about the planning strategies around the time when the information about the “Pandemic Treaty” was first coming out:

“Thing is, the WHO already tried to pull off a huge vaccine-selling health crisis more than ten years ago but it didn’t quite work. The vaccine-selling part did work very well because they managed to activate the purchasing agreements – but the “scaring the public” part kind of “flopped” that time around.

All that happened was that the pandemic was solemnly declared, the agreement-participating countries purchased relatively large batches of subpar vaccines (see [“narcolepsy fiasco”](#)), and then the entire thing went away.

Here is a [2010 Forbes article](#) that says: “From the beginning the World Health Organization’s actions have ranged from the dubious to the flagrantly incompetent.” And here is the [report](#) by the Council of Europe’s Parliamentary Assembly, titled, “The handling of the H1N1 pandemic: more transparency needed”:

“The rapporteur considers that some of the outcomes of the pandemic, as illustrated in this report, have been dramatic: distortion of priorities of public health services all over Europe, waste of huge sums of public money, provocation of unjustified fear amongst Europeans, creation of health risks through vaccines and medications which might not have been sufficiently

tested before being authorised in fast-track procedures, are all examples of these outcomes.”

From the [British Medical Journal](#):

“WHO for years had defined pandemics as outbreaks causing “enormous numbers of deaths and illness” but in early May 2009 it removed this phrase – describing a measure of severity – from the definition.”

Key scientists advising the World Health Organization on planning for an influenza pandemic had done paid work for pharmaceutical firms that stood to gain from the guidance they were preparing. These conflicts of interest have never been publicly disclosed by WHO, and WHO has dismissed inquiries into its handling of the A/H1N1 pandemic as “conspiracy theories.”

“A joint investigation by the BMJ and the Bureau of Investigative Journalism has uncovered evidence that raises troubling questions about how WHO managed conflicts of interest among the scientists who advised its pandemic planning, and about the transparency of the science underlying its advice to governments.

Was it appropriate for WHO to take advice from experts who had declarable financial and research ties with pharmaceutical companies producing antivirals and influenza vaccines?”

And here is a 2019 lecture by Marc Van Ranst, Belgian Flu Commissioner, at the ESWI/Chatham House Influenza Pandemic Preparedness Stakeholders Conference. At around 13 minutes in, he brags about how he “misused the fact that that the top, top football ... soccer clubs in Belgium inappropriately and against all agreements vaccinated ... they made their soccer players priority people.” The audience laughs.”

And speaking of long-term planning, the U.S. “health response” of 2020 was made possible in part thanks to the [“pandemic preparedness” plans developed during Bush,](#)

when no one sane was even considering the possibility of such things. They do plan in advance!

WHO Is Deeply Corrupt

Here is a very brief [look](#) at just how corrupt the World Health Organization is:

Rather than putting public health first, such as pushing for safety studies into vaccination, WHO's history clearly illustrates its allegiance to Big Pharma and other industries. WHO, for instance, has downplayed the health effects caused by the 1986 Chernobyl nuclear disaster, stating that only 50 deaths were directly caused by the incident and "a total of up to 4,000 people could eventually die of radiation exposure" from the disaster.¹¹

WHO signed an agreement with the International Atomic Energy Agency (IAEA), which is "promoting peaceful use of atomic energy," in 1959, making it subordinate to the agency in relation to ionizing radiation.

WHO's response to the Fukushima radiation disaster in 2011 was also criticized, with evidence of a high-level coverup.¹²

WHO once again downplayed the risks, stating "the predicted risks are low and no observable increases in cancer rates above baseline rates are anticipated."¹³

WHO also received more than \$1.6 million from opioid giant Purdue from 1999 to 2010 and used industry-supported opioid data to incorporate into its official pro-opioid guidelines. According to the Alliance of Human Research Protection, WHO's collaboration with Purdue led to expanded opioid use and global addiction.¹⁴

Due to its acceptance of private money, a review in the Journal of Integrative Medicine & Therapy went so far as to say the corruption of WHO is the "biggest threat to the world's public health of our time," particularly as it relates to WHO's drug

*recommendations – including its “list of essential medicines” – which it believes is biased and not reliable.*¹⁵

There is a great documentary called, “[TrustWHO](#).” If you haven’t seen it, it’s well worth checking out.

Conclusion

It is really shameful what they are trying to do. They are bullying us, trying to force our lips to move in agreement with their raping methodologies, they are trying to make us say that we want it, that we love them, that we submit to them, and that we accept their new, ever-changing, and upside-down definitions of our sacred words. They are trying to murder the soul.

They are bullies. They are trying to equip their digital raping stations with shiny language about equity and human rights. They are turning some people into zombies, and they are weaponizing the new zombies against the people who refuse to be zombified.

They are trying to turn the people into silhouettes whose feet aren’t touching the ground and whose heads are disconnected from their necks, like this this COVID vaccine ad:

Don’t let them do that to you. Don’t let anyone do that to you. Don’t let anyone, under any circumstance, disconnect you from your soul.

About the Author

To find more of Tessa Lena's work, be sure to check out her bio, [Tessa Fights Robots](#).

Sources and References

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