

# Hell No to the WHO Pandemic Treaty

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*No doubt, as president, one of Donald Trump's more bold steps that thoroughly outraged the medical industrial complex was to withdraw the US from the World Health Organization (WHO). One of Trump's reasons was due to his disgust with the WHO's lack of competence in its handling of the Covid-19 pandemic. The intention to remove itself from the WHO was filed in July 2020; however WHO rules require a year for a nation's withdrawal to become effective. Sadly, under Joe Biden, the US remains party to and a leader funder of the undemocratically elected global organization.*

Earlier in 2022, the proposal for a WHO international Pandemic Treaty has raised alarms over the organization's usurping the individual sovereignty of nations. The Treaty, which is scheduled to be finalized by May 2024, is largely a result of the WHO's numerous inconsistencies, inadequacies and failures during the Covid-19 pandemic. If we call a spade a spade, the WHO has proven itself inept in handling any pandemic. Therefore, for the hardened globalists such **Bill Gates** and the leaders of the US and EU who wholly support the WHO, it makes perfect sense that the bumbling bureaucracy should be given more authority and control over global health.

The Pandemic Treaty would authorize the WHO complete control over both governments' and civil societies' internal preparedness over actions and policies to tackle future pandemics. During the Ukraine crisis, we frequently hear Western leaders speak about a "rules based order" in international relations. However, such rules are defined by and primarily serve the interests of those nations at the top of the food chain (i.e. the US, UK and EU). What the Treaty offers is a new rules based order completely determined by an international organization with a horrible track record of conflicts of interests with the pharmaceutical industry and hegemonic governments and billionaires.

Image is from Dr. Rath Health Foundation



**The Treaty would hold every WHO member nation accountable for following the organization's dictates.** On a global scale, all power over dictating the rules for pandemic preparedness would be centralized in the organization. If a nation fails to do so, it can face potential sanctions. The WHO would also be the final arbiter and judge over medical related misinformation that it solely believes undermines public health. As we have witnessed during the Covid-19 pandemic, the WHO was repeatedly wrong about the benefits of face masks and lockdowns, the benefit-risk ratio of the mRNA vaccines — which are now causing more injuries and deaths than the virus — and safe and effective treatments.

No doubt with Bill Gates' assistance and the US's and its allies' intelligence apparatus, the WHO will be responsible for countermeasures against social media critics. In other words, the organization will be responsible for censorship. It would also have the authority to regulate both domestic and international travel, coordinate vaccination passports, and oversee the digitalization of populations' health forms and documentation. In brief, the WHO Pandemic Treaty is the harbinger of a medical dictatorship.

A uniform approach to prevention and treatment of diseases, especially a pandemic, is unquestionably attractive and desirable. This was the original intention of the emergence of "evidence based medicine" (EBM) in the mid 1990s. However, EBM has yet to be proven to be a practical goal. Worse, the rhetoric of EBM has turned into a politicalized weapon to silence alternative medical views that challenge the medical authorities that control the narrative. Consequently during the past decade the EBM theory has come under increasing criticism. Empowering the WHO to be the architect of a single, uniform global structure for administering pandemic responses is a deeply disturbing proposition. There are simply too many glaring reasons and examples for not trusting the WHO to have any control over our lives. On this account, Donald Trump was precisely correct to remove the US's membership.

The WHO has become the ultimate international authority for infectious diseases. Due to its widespread acceptance by the world's national governments, it has assumed the helm to monitor regional and global infectious diseases and dictate medical intervention policies to international health agencies. The organization has become the final word to rule whether the spread of a serious pathogen is a pandemic or not. For the majority of the medical community, the media and the average person, the WHO is the front line command post for medical prevention (i.e., vaccination) and treatment. Consequently its rulings are often regarded as the gold standard. On matters of global health, the WHO holds dominance.

Image is from Children's Health Defense



Prior to mass vaccination campaigns, the WHO propagated the belief that the first line of defense for curtailing the COVID-19 pandemic was lockdowns, self-isolation and distancing. Although it approved Ivermectin as a cost-effective treatment against SARS-CoV-2 infections, it disapproved hydroxychloroquine in favor of Gilead Bioscience's and the National Institute of Allergy and Infectious Disease's (NIAID) **Anthony Fauci's** novel and costly drug Remdesivir. Seemingly, much of its funding efforts had been reserved for promoting the new generation of experimental vaccines. Throughout the pandemic, the WHO was deeply allied with the US's and UK's national health systems, and the Bill and Melinda Gates Foundation and his Global Alliance for Vaccines and Immunization (GAVI) initiative.

Most people assume wrongly that the WHO acts independently from national and private commercial interests for the welfare of the world's population. However, its real mission is dubious. The organization has frequently been accused of conflicts of interests with private pharmaceutical companies and mega-philanthropic organizations such as the Gates' Foundation. It is riddled with political alliances, ideologies, and profiteering motives. Despite the WHO's infrequent public ridicule of the pharmaceutical industry's corruption, it is at the same time fully immersed if not actually controlled by those same forces of corruption. For example, the WHO has stated:

“Corruption in the pharmaceutical sector occurs throughout all stages of the medicine chain, from research and development to dispensing and promotion.... A lack of transparency and accountability within the medicines chain can also contribute to unethical practices and corruption.”

However, these are similar charges that have been leveled against the WHO. [An article](#) in the *National Review* called the WHO “scandal plagued” with “wasteful spending, utter disregard for transparency, pervasive incompetence, and failure to adhere to even basic democratic standards.” In his book, *Immunization: How Vaccines Became Controversial*, University of Amsterdam professor emeritus Dr. Stuart Blume raises the serious problem of the WHO's most influential advisors on emergency health conditions, such as the current Covid-19 pandemic and earlier the 2009 H1N1 swine flu scare that never was, serve as consultants for the vaccine industry. During times of global emergencies and crises, the WHO confers with a separate group of advisors outside its formal sitting Strategic Advisory Group of Experts or SAGE; the names of this group's members are [not made public](#).

The WHO's level of incompetence has resulted in serious misinformation about pandemics, medical risks of vaccines and other health-threatening chemicals. [For example](#), during the early stage of the COVID-19 outbreak in Wuhan, the organization reported it could not find any evidence of human transmission. However, the WHO also repeatedly kowtowed to China's demands and unscrupulously accepted whatever statistics and statements the Chinese Communist Party health ministry provided. Responding to a petition signed by over

700,000 signatories demanding the resignation of the current WHO Director General Tedros Adhanom, Japan's Deputy Prime Minister Taro Aso [told the Japanese parliament](#) that the organization "should be renamed the Chinese Health Organization" for favoring China's policy to stall and obstruct international investigations and for lauding unsubstantiated praise on the country's transparency and handling of the pandemic.

Writing for *The Hill*, University of Texas at San Antonio professor Bradley Thayer [wrote](#), "Tedros apparently turned a blind eye to what happened in Wuhan and the rest of China and... has helped play down the severity, prevalence and scope of the Covid-19 outbreak."

Thayer concludes, "Tedros is not fit to lead the WHO."

He has no formal medical training as a physician or any international management experience in global health. Many others have voiced similar criticisms pointing out Tedros's unsuitable background. Moreover, the Director General's conflicts of interest with China abound. Immediately before and after his tenure as the Health Minister for Ethiopia's ruling Communist party, the Tigray People's Liberation Front, China [had donated](#) an estimated \$60 million to the terrorist government and its social programs. In 2017, the *Washington Post* noted the [fundamental problem](#):

"[China] worked tirelessly behind the scenes to help Tedros defeat the United Kingdom candidate for the WHO job, David Nabarro. Tedros's victory was also a victory for Beijing, whose leader Xi Jinping has made public his goal of flexing China's muscle in the world."

Upon assuming his new position at the WHO, Tedros left Ethiopia's healthcare system in ruin. As one young healthcare worker [reported](#), there was no "bare necessities of a health care office.... Sterile gloves, paper exam gowns and covers, cotton swabs, gauze, tongue depressors, alcohol prep pads, chemical test strips, suturing equipment, syringes, stethoscopes... were non-existent. This is a fact in most health care centers in Ethiopia."

During the more [recent re-investigation](#) of SARS-2 origins, the Chinese authorities refused to provide raw case data and created repressive conditions to curtail reliable analysis and disclosure. The WHO's final report concluded that the virus had an animal origin and did not escape Wuhan's high security pathogen laboratory. But there are viable reasons to discredit the report as untrustworthy at best and perhaps intentionally deceptive.

First, the entire agenda of the investigation was staged theater rather than a deep investigation to uncover empirical evidence. The team simply inspected seafood and open-air markets. Consequently, the WHO team returned empty handed and without laboratory records for a proper forensic examination. To call the entire WHO effort gross incompetence is an understatement. Based upon the evidence, a large number of professional medical voices called the entire investigation a farce.

Most problematic is the appointment of Peter Daszak on the WHO's group to carry out the investigation. Daszak is the founding president of the shadowy non-profit organization EcoHealth Alliance. With the intention to divert attention away from an escaped laboratory virus, Daszak [stated](#) on a *Going Viral* podcast there was no evidential reason to visit and inspect the Wuhan laboratory. [According to Independent Science News](#), despite Daszak's denial of a lab origin, "EcoHealth Alliance funded bat coronavirus research, including virus collection, at the Wuhan Institute of Virology and thus could themselves be directly

implicated in the outbreak.” The research at the Wuhan lab included ‘gain of function’ efforts on coronaviruses, and received funds directly approved by Anthony Fauci. *Newsweek* reported the NIH had given a total of \$7.4 million to the Chinese lab for the research. The organization has received over \$100 million from a variety of sources, including the Department of Defense, Homeland Security, the NIH and undisclosed amounts from the Chinese government. Daszak himself has [authored 25 studies](#) funded by the Chinese Academy of Medical Sciences, think tanks, universities, military institutions, and ministries directly connected with the Chinese Communist Party.

## Vaccine Promotional Misconduct

For many years the WHO’s recommendations for certain vaccines were kept secret. Writing in a 2006 issue of the *Journal of American Physicians and Surgeons*, **Dr. Marc Girard** [uncovered](#) “scientific incompetence, misconduct or even criminal malfeasance” over the intentional inflation of vaccines’ benefits while undermining toxicity and adverse effects. Dr. Girard testified as a medical expert before a French court in a criminal trial against the WHO after French health officials obliged the organization to launch its universal Hepatitis B vaccine campaign. The campaign resulted in the deaths of French children. Girard gained access to confidential WHO documents. He noted that the WHO’s “French figures about chronic liver diseases were simply extrapolated from the U.S. reports.” He further accused the WHO serving “merely as a screen for commercial promotion, in particular via the Viral Hepatitis Prevention Board (VHPB), which was created, sponsored, and infiltrated by the manufacturers.”

Now during the Covid-19 pandemic, as early as July 2020, the WHO approved of China’s first vaccine for emergency use, long before it had undergone proper clinical trials and much earlier than Moderna’s and Pfizer’s mRNA vaccines’ approval.

## Orchestration of Pandemic Panics

Before the current COVID-19 pandemic, there was the H1N1 swine flu scare in 2009. The WHO’s declaration of a pandemic was solely based more on fear mongering than empirical evidence. The fabrications are believed to have originated from the [WHO’s senior consultant](#) on viral outbreaks who happens to carry the reputation of being one of the world’s leading pandemic alarmists: Dr. Albert Osterhaus, nicknamed “Dr. Flu.” At the time, Osterhaus was head of the Department of Virology at Erasmus University in the Netherlands. When the swine flu scare appeared, he was also the president of the European Scientific Working Group on Influenza (ESWI), an organization funded by the major vaccine manufacturers including Baxter, MedImmune, Glaxo, Sanofi Pasteur and others. Osterhaus was responsible for transforming an otherwise potentially bad flu season into a global pandemic. The *British Medical Journal* [reported](#) that the WHO failed to report conflicts of interests within its H1N1 advisory group. The journal’s Editor-in-Chief Fiona Godlee [wrote](#), “WHO must act now to restore its credibility, and Europe should legislate.” The former head of the prestigious Cochrane Database Collaboration’s vaccine studies, Dr. Tom Jefferson, [told](#) a *Der Spiegel* interviewer, “the WHO and public health officials, virologists and the pharmaceutical companies... built this machine around the impending [H1N1] pandemic. And there’s a lot of money involved, and influence and careers, and entire institutions.” According to a [financial forecast](#) published by JP Morgan, the collaboration between the WHO and Osterhaus’s ESWI to orchestrate the pandemic would have profited the pharmaceutical industry up to \$10 billion.

In 2010, the EU's Parliamentary Assembly of the Council of Europe launched [an investigation](#) into the evidence that the WHO had created "a fake pandemic" in order to financially benefit the pharmaceutical giants' vaccine market and to strengthen the influence private drug interests have over the health organization. The Assembly's chairperson Dr. Wolfgang Wodarg charged the WHO's fake pandemic as "one of the greatest medical scandals of the century that resulted in "millions being needlessly vaccinated."

## **Epidemic of Conflict of Interests**

[According to](#) former World Bank geopolitical analyst Peter Koenig, about half of the WHO's budget is derived from private sources — primarily pharmaceutical companies but also other corporate sectors including the telecommunication and agro-chemical industries. It also receives large donations from large philanthropic organizations such as the Bill and Melinda Gates Foundation and GAVI. Twelve years ago, Gates had committed \$10 billion to the WHO; after the US, his Foundation is its [second largest donor](#) providing 10 percent of its funding. His [financial commitment](#) aligned with his global ambition to "make this the decade of vaccines." Koenig also believes that Tedros's appointment was due to Gates' influence. In fact, Tedros is a former Chair of GAVI's Vaccine Alliance.

## **Vaccine Adverse Effects Monitoring System Needs Overhaul**

The WHO's Global Advisory Committee on Vaccine Safety is responsible for administering vaccine programs in poorer, developing countries. It is also responsible for gathering data on incidents of vaccine injuries. Any deaths following vaccination campaigns are ignored and ruled as coincidental. This policy is based on an [erroneous assumption](#) that if no one died during a vaccine's clinical trials, then the vaccine should be regarded as automatically safe and unrelated to any deaths that might occur later. Consequently, the WHO's monitoring system is seriously flawed and requires a major overhaul.

One of the more controversial incidences was the WHO's collaboration with the Bill Gates' GAVI campaign to launch the Pentavalent vaccine (diphtheria, pertussis, tetanus, HIP and Hepatitis B) in Africa and later in South and Southeast Asia. In India, health officials recorded upwards to 8,190 additional infant deaths annually following GAVI's Pentavalent campaign. The WHO's response was to reclassify its adverse event reporting system to disregard "infant" deaths altogether. Dr. Jacob Puliyel, a member of India's National Technical Advisory Group on Immunization [concluded](#),

"deaths and other serious adverse events following vaccination in the third world, that use WHO-AEFI classification are not recorded in any database for pharmaco-vigilance. It is as if the deaths of children in low (and middle) income countries are of no consequence."

## **WHO's Double Standards of Vaccine Safety**

During the WHO's Global Vaccine Safety Summit convened in December 2019, a scandal erupted. Days before the summit, one of the WHO's medical directors for vaccination, Dr. Soumya Swaminathan, who is now its chief science officer, appeared in a public advertisement touting the unquestionable safety of vaccines and ridiculing parents who speak out against vaccination. She assured viewers that the WHO was in control of matters and monitored any potential adverse risks carefully. However, [during the Summit](#), Dr. Swaminathan acknowledged vaccine health risks and stated, "We really don't have very

good safety monitoring systems.” Another Summit participant, Dr. Heidi Larson stated,

“We have a very wobbly ‘health professional frontline’ that is starting to question vaccines and the safety of vaccines. When the frontline professionals are starting to question or they don’t feel like they have enough confidence about the safety to stand up to the person asking the questions. I mean most medical school curriculums, even nursing curriculums, I mean in medical school you are lucky if you have half a day on vaccines.”

Later in September 2021, the Indian Bar Association sued Dr. Swaminathan for misleading the Indian government about Ivermectin to treat SARS-2 infections. The Association accused her of leading a [disinformation campaign](#) that resulted in “mass murder.” Covid-19 deaths exploded ten-fold due to Swaminathan’s claims that the drug was ineffective.

## **WHO’s Depopulation Efforts with Vaccines**

Without doubt, the most nefarious activity conducted by the WHO is its alleged support and distribution of vaccines to poorer developing countries that may have been intentionally designed to decrease population rates. Back in 1989, the WHO sponsored a symposium at its Geneva headquarters on “Antifertility Vaccines and Contraceptive Vaccines.” The symposium presented proposals for vaccines that were later discovered to have been laced with the sterilizing hormones HCG and estradiol; the former prevents pregnancy and triggers spontaneous abortions and miscarriages, and the latter can turn men infertile.

[In 2015](#), the Kenyan Conference of Catholic Bishops reported its discovery of a polio vaccine laced with estradiol that was manufactured in India and distributed by the WHO. A year earlier, Dr. Wahome Ngare from the Kenyan Catholic Doctors Association uncovered a tetanus vaccine specifically being administered to women, also distributed by the WHO, that contained the HCG hormone. All of the polio vaccine samples [tested](#) contained HCG, estrogen-related compounds, follicle stimulating and luteinizing hormones, which will damage sperm formation in the testes. Even more disturbing, this vaccine was going to be administered to children under five years of age.

This was not the first time the WHO made efforts to use vaccination campaigns for depopulation. [A decade earlier](#), in 2004, the WHO, UNICIF and CDC launched a vaccination campaign to immunize 74 million African children during a polio outbreak. The initiative encountered a serious obstacle. In Nigeria, laboratory tests on the WHO’s vaccine samples resulted in the presence of estrogen and other female hormones. And in the mid-1990s, a tetanus vaccine being administered to Nicaraguan and Filipino girls and women in their child-bearing years was discovered to contain HCG, which accounted for a large number of spontaneous abortions that were reported by Catholic health workers.

## **Illegal Vaccine Experiments**

In 2014, *The Economic Times of India* published [a report](#) that provided details of a joint venture between the WHO and the Gates Foundation to test an experimental Human Papilloma Virus (HPV) vaccine on approximately 16,000 tribal girls between the ages of 9 and 15 unwittingly. The experiment was conducted in 2008; many of the girls, the report states, became ill and some died. This was Merck’s Gardasil vaccine.

The [following year](#) the WHO and Gates Foundation conducted a similar experiment on

14,000 girls with Glaxo’s HPV vaccine Cervarix. Again “scores of teenage girls were hospitalized.” Investigations led by Indian health officials uncovered gross violations in India’s laws regarding medical safety. In numerous cases there was no consent and the children had no idea what they were being vaccinated for. The Indian Supreme Court has taken up a case against the duo for criminal charges.

Over the years the WHO has been engaged in many other questionable and nefarious activities. The above examples argue the case that, at least within the upper echelons of the WHO, global health does not stand in high priority. The organization employs over 7,000 people around the world and most are dedicated to improving the lives of populations in poor and developing nations. On the other hand, the WHO’s leaders exist solely to benefit the powers of Washington, London, Bill Gates and the pharmaceutical industry by advancing their agendas.

Corruption is systemic throughout global health and national health agencies. In [a 2021 article](#) appearing in *The Lancet*, Dr. Patricia Garcia wrote,

“Corruption is embedded in health systems. Throughout my life—as a researcher, public health worker, and a Minister of Health—I have been able to see entrenched dishonesty and fraud. But despite being one of the most important barriers to implementing universal health coverage around the world, corruption is rarely openly discussed.”

Bear in mind, the WHO, along with Bill Gates and his Foundation, and Anthony Fauci at the NIAID, led the effort to get the COVID-19 vaccine administered as quickly as possible. Gates Foundation [has given](#) \$1.75 billion for developing and distributing these vaccines. Can we trust the WHO’s judgment and intentions to serve global health and the well-being of the world’s citizens.

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