

100 Reasons

THE TOP 100 REASONS TO #StopTheTreaty, #StopTheAmendments, and #ExitTheWHO. The World Health Organization's attempted POWER GRAB must be stopped. Please help spread the word.

JAN 5, 2023

 535

 92

 18

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Top 100 Reasons To:

#StopTheTreaty

#StopTheAmendments

#ExitTheWHO

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**We, the people of the world,
do NOT recognize the World Health Organization
as being anything other than an advisory body,
with no power whatsoever to enforce
the recommendations that they make.**

**In all matters,
we the people make up the whole-of-society and
we are the masters of the whole-of-government.**

**We claim our right to personal,
individual sovereignty in all matters,
and cede that authority
only to God, our Creator.**

**We the people of the world
are responsible for our own health, and
WE ARE NOT ANSWERABLE TO THE WHO.**

PLEASE NOTE:

The information regarding the proposed WHO CA+ ("Pandemic Treaty") that is available on this page is in reference to the "Zero Draft" that was made available on February 1, 2022.

Updated information regarding the newer "Bureau's Text" version of the proposed "Pandemic Treaty" that was published on June 2, 2023 is available [HERE](#) and [HERE](#).



Bureau's Text Of The Framework Convention
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A GUIDE TO THE WORLD HEALTH ORGANIZATION'S PROPOSED AGREEMENTS:

The amendments to Articles 55, 59, 61, 62 and 63 of the International Health Regulations that were adopted by the 75th World Health Assembly on May 27, 2022.

The proposed amendments to the International Health Regulations.

The Zero Draft of the proposed WHO CA+ which is commonly referred to as the "Pandemic Treaty" or "Pandemic Accord."

The European Union's March 28, 2023 addendum to the proposed "Pandemic Treaty."

[CLICK HERE to watch a recommendation for something very much like the booklet below...](#)



A Guide To The Who's Proposed Agreements
1.44MB · PDF file

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Below you will find the source documents for the proposed "Pandemic Treaty" and the proposed amendments to the International Health Regulations.

SOURCES:

[CLICK HERE](#) to download the November 25, 2022 "Conceptual Zero Draft" of the proposed "Pandemic Treaty." (This is now out-of-date.)

[CLICK HERE](#) to download the February 1, 2023 "Zero Draft" of the proposed "Pandemic Treaty."

[CLICK HERE](#) to download the March 28, 2023 additions to the Zero draft that were submitted by the European Union.

[CLICK HERE](#) to download the June 2, 2023 "Bureau's Text" of the WHO CA+

[CLICK HERE](#) to download the proposed amendments to the IHR December 14, 2022 (46 pages)

[CLICK HERE](#) to download the WGIHR version of the proposed amendments to the IHR February 6, 2023 (51 pages)

[CLICK HERE](#) to download the proposed amendments to the IHR December 14, 2022 (original nations' submissions - 197 pages)

[CLICK HERE](#) to download the existing International Health Regulations (2005) (84 pages)

[CLICK HERE](#) to download the existing International Health Regulations (1995) PDF page 24

[CLICK HERE](#) to download the 1981 version of the IHR (79 pages)

[CLICK HERE](#) to download the 1969 version of the IHR (page 37)

[CLICK HERE](#) to download the IHRRC final report (97 pages)

[CLICK HERE](#) to download the combined amendment compilation and IHRRC final report (105 pages)

[CLICK HERE](#) to download the National Defense Authorization Act (NDAA) (pages 950-967)

I know that this article is long. Here is the short version:

The World Health Organization is attempting a GLOBAL POWER GRAB by seeking to have the 194 member nations of the World Health Assembly a completely new international agreement commonly referred to as the proposed “Pandemic Treaty” in addition to seeking to adopt proposed amendments to the International Health Regulations.

The proposed “Pandemic Treaty” would give the WHO control over “pathogens with pandemic potential” as well as control over the means of production within the Pharmaceutical, Hospital, Emergency Industrial Complex. It is an absolute abomination that must be stopped.

*The proposed amendments to the International Health Regulations would make the WHO’s proclamations legally-binding rather than just advisory recommendations. The proposed amendments seek to institute global digital health certificates, dramatically increase the billions of dollars available to the WHO and enable nations to implement the regulations **WITHOUT respect for the dignity, human rights and fundamental freedoms of people.***

Agreement by a simple majority of the 194 member nations is all that is needed to adopt the amendments because, as amendments to an existing agreement, neither the advice and consent of the United States Senate, nor the signature of the President would be required.

These proposed amendments are being negotiated in secret without any opportunity for comment by people from around the world.

Please watch the videos below...

TREATY:

WHO CA+ (THE PANDEMIC TREATY)



AMENDMENTS:

STOP THE WHO

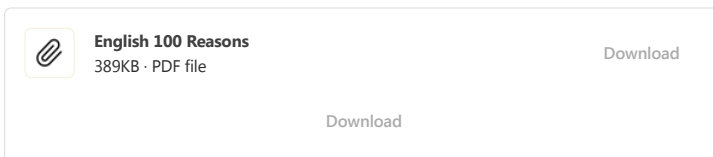


THE COMPLETE OVERVIEW:



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This article is an in-depth, very serious analysis of both the proposed "Pandemic Treaty" and the proposed amendments to the International Health Regulations.

Please share this article with everyone you possibly can.

THE TOP TEN REASONS TO OPPOSE THE AMENDMENTS TO THE INTERNATIONAL HEALTH REGULATIONS

- 1. CHANGE FROM ADVISORY TO MANDATORY:** Change the overall nature of the World Health Organization from an advisory organization that merely makes recommendations to a governing body whose proclamations would be legally-binding. (Article 1 and Article 42)
- 2. POTENTIAL RATHER THAN ACTUAL EMERGENCIES:** Greatly expand the scope of the International Health Regulations to include scenarios that merely have a "potential to impact public health." (Article 2)
- 3. DISREGARD FOR DIGNITY, HUMAN RIGHTS AND FREEDOMS:** Seek to remove "respect for dignity, human rights and fundamental freedoms of people." (Article 3)
- 4. ALLOCATION PLAN:** Give the Director General of the WHO control over the means of production through an "allocation plan for health products" to require developed states parties to supply pandemic response products as directed. (Article 13A)
- 5. MANDATORY MEDICAL TREATMENTS:** Give the WHO the authority to require medical examinations, proof of prophylaxis, proof of vaccine and to implement contact tracing, quarantine and TREATMENT. (Article 18)
- 6. GLOBAL HEALTH CERTIFICATES:** Institute a system of global health certificates in digital or paper format, including test certificates, vaccine certificates, prophylaxis certificates, recovery certificates, passenger locator forms and a traveller's health declaration. (Articles 18, 23, 24, 27, 28, 31, 35, 36 and 44 and Annexes 6 and 8)
- 7. LOSS OF SOVEREIGNTY:** Would empower the Emergency Committee to override decisions made by sovereign nations regarding health measures and would make the Emergency Committee's decisions final. (Article 43)
- 8. UNSPECIFIED, POTENTIALLY ENORMOUS FINANCIAL COSTS:** Redirect unspecified billions of dollars to the Pharmaceutical Hospital Emergency Industrial Complex with no accountability. (Article 44A)
- 9. CENSORSHIP:** Greatly expand the World Health Organization's capacity to censor what they consider to be mis-information and dis-information. (Annex 1, page 36)
- 10. OBLIGATIONS OF DUTY TO COOPERATE:** Creates an obligation to build, provide and maintain IHR infrastructure at points of entry. (Annex 10)

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Please read the article below to see how the International Health Regulations Review Committee basically agreed with me.



James Roguski

The Final Report of the International Health Regulations Review Committee

For well over a month, I have been stating my concerns regarding the following aspects of the proposed amendments to the International Health Regulations...

[Read more](#)

a year ago · 28 likes · 11 comments · James Roguski

A debate in the United Kingdom in response to a petition regarding the proposed "Pandemic Treaty" will be held on 17 April 2023.

CHECK THEIR BEHAVIOR: Demand that they debate the FACTS about the proposed "Pandemic Treaty" that are listed on this flyer.

**YouTube.com/UKParliament
UK.StopTheWHO.com**

**ExitTheWHO.org
StopTheWHO.com
ScrewTheWHO.com
PreventGenocide2030.org
RejectDigitalEnslavement.com**

15 REASONS TO OPPOSE THE "PANDEMIC TREATY":

1. Blatant ignorance of public commentary in opposition to any treaty.

From 12-13 April 2022, the Intergovernmental Negotiating Body (INB) solicited public comments with less than one week notice. On 1 June 2022, the INB cancelled a scheduled second public comment period because the vast majority (99+%) of the 33,884 comments were very much opposed to the "Pandemic Treaty."

From 9-16 September 2022, the Intergovernmental Negotiating Body (INB) solicited public comments in the form of 90 second videos with only two days notice. Hundreds of public comment videos opposing the treaty were submitted to the World Health Organization and published on September 29-30, 2022.

2. Secrecy

There has been a severe lack of transparency in the negotiating process. The proposals made by the individual nations have been kept secret from the public. The negotiations being held by the Intergovernmental Negotiating Body have been conducted in secret. Recordings of six of the ten sessions held from February 27 to March 3, 2023 have not been made available to the public.

3. The definition of the term pandemic is too vague. (Article 1)

The definition of a pandemic is so vague that it can be interpreted to mean almost anything.

"(b) 'pandemic' means the global spread of a pathogen or variant that infects human populations with limited or no immunity through sustained and high transmissibility from person to person, overwhelming health systems with severe morbidity and high mortality, and causing social and economic disruptions, all of which require effective national and global collaboration and coordination for its control;" (page 9)

4. Common but differentiated responsibilities (Article 4)

Although each nation would receive only one vote, regardless of population, and all nations would be legally bound by the obligations of the WHO CA+, some nations would be required to do and provide more than others in unspecified ways.

"States that hold more resources relevant to pandemics, including pandemic-related products and manufacturing capacity, should bear, where appropriate, a commensurate degree of differentiated responsibility with regard to global pandemic prevention, preparedness, response and recovery." (page 11)

5. The WHO Global Pandemic Supply Chain and Logistics Network. (Article 6)

The WHO would be empowered to determine, control and direct the global supply of pharmaceutical products and all nations would be legally obligated to obey their dictates.

"The Parties, working through the Governing Body for the WHO CA+, shall take all appropriate measures to establish and start functioning of the Network no later than XX. The commitment to facilitate such access is understood to be legally binding and to apply in all circumstances, consistent with humanitarian principles." (page 14)

6. Increase the speed of regulatory approval of drugs. (Article 8)

Nations would be obligated to decrease the time required to approve new drugs, regardless of issues regarding safety and effectiveness.

"Each Party SHALL... in the event of a pandemic, accelerate the process of approving and licensing pandemic-related products for emergency use in a timely manner, including the sharing of regulatory dossiers with other institutions." (page 15)

7. Support for gain-of-function research. (Article 9)

Nations would be encouraged to engage in "innovative research and development for addressing novel pathogens" while ensuring that regulatory standards "do NOT create any unnecessary administrative hurdles for research."

"Each Party SHALL, as applicable, implement and apply international standards for, oversight of and reporting on laboratories and research facilities that carry out work to genetically alter organisms to increase their pathogenicity and transmissibility... while ensuring that these measures do not create any unnecessary administrative hurdles for research." (page 16)

8. Pathogen Access and Benefits Sharing (PABS) System. (Article 10)

The WHO wants to be in control of "all pathogens with pandemic potential, including their genomic sequences, as well as access to benefits arising therefrom."

"Such options SHALL include, but not be limited to: (i) real-time access by WHO to 20% of the production of safe, efficacious and effective pandemic-related products, including diagnostics, vaccines, personal protective equipment and therapeutics, to enable equitable distribution, in particular to developing countries, according to public health risk and need and national plans that identify priority populations." (page 18)

"The pandemic-related products SHALL be provided to WHO on the following basis: 10% as a donation and 10% at affordable prices to WHO; (ii) commitments by the countries where manufacturing facilities are located that they WILL facilitate the shipment to WHO of these pandemic-related products by the manufacturers within their jurisdiction, according to schedules to be agreed between WHO and manufacturers." (page 18)

9. Require nations to allow access to their sovereign territory. (Article 15)

Nations should be able to decide whether or not to allow "rapid response and expert teams" to enter their sovereign territory.

"The Parties... shall: (f) facilitate WHO with rapid access to outbreak areas within the Party's jurisdiction or control, including through the deployment of rapid response and expert teams, to assess and support the response to emerging outbreaks." (page 22)

10. Censorship (Article 17)

The WHO wants to increase funding to "tackle false, misleading, misinformation or disinformation," by "managing infodemics through... social media" in order "to counteract misinformation, disinformation and false news."

"conduct regular social listening and analysis to identify the prevalence and profiles of misinformation, which contribute to design communications and messaging strategies for the public to counteract misinformation, disinformation and false news." (page 23)

11. One Health (Article 18)

The WHO CA+ makes the unsubstantiated claim that "the majority of emerging infectious diseases and pandemics are caused by zoonotic pathogens" in an attempt to garner control over nearly every aspect of life by stretching the truth in order to take attention away from the abject failure of their advice to adequately treat peoples' dis-ease.

"Each Party shall: (e) take the One Health approach into account at national, subnational and facility levels." (page 25)

12. Unspecified and potentially enormous costs. (Article 19)

The WHO CA+ would require tens of billions of dollars to be spent during inter-pandemic times on products that would provide dubious health benefits but consistent profits for the Pharmaceutical Hospital Emergency Industrial Complex.

"Each Party SHALL: (c) commit to prioritize and increase or maintain, including through greater collaboration between the health, finance and private sectors, as appropriate, domestic funding by allocating in its annual budgets not lower than 5% of its current health expenditure to pandemic prevention, preparedness, response and health systems recovery, notably for improving and sustaining relevant capacities and working to achieve universal health coverage;" (page 25)

"The Parties recognize the important role that financial resources play in achieving the objective of the WHO CA+ and the primary financial responsibility of national governments in protecting and promoting the health of their populations. In that regard, each Party SHALL: (d) commit to allocate, in accordance with its respective capacities, XX% of its gross domestic product for international cooperation and assistance on pandemic prevention, preparedness, response and health systems recovery, particularly for developing countries, including through international organizations and existing and new mechanisms." (page 25)

13. Additional bureaucracy (Article 20)

The Conference of the Parties (COP) would create yet another enormous bureaucracy to be ruled over by two Presidents and 4 Vice-Presidents.

"The Officers of the Parties, as the administrative organ of the Governing Body, shall be composed of two Presidents, four Vice-Presidents and two rapporteurs, serving in their individual capacity and elected by the COP for XX years." (page 27)

14. Provisional Application (Article 35)

The proposed treaty may be applied provisionally, with just a simple signature, even before formal ratification has occurred.

"The WHO CA+ may be applied provisionally, in whole or in part, by a signatory and/or Party that consents to its provisional application by so notifying the Depositary in writing at the time of signature of the instrument, or signature or deposit of its instrument of ratification, acceptance, approval, formal confirmation or accession. Such provisional application shall become effective from the date of receipt of the notification by the Secretary-General of the United Nations." (page 31)

15. The Provisions of the Treaty may apply to every member of the WHO. (Article 35)

The provisions of the proposed treaty could be given effect as recommendations to all member nations of the WHO? WTF? If amendments to the IHR make recommendations legally-binding, this Article could have very far-reaching effects!

Provisions of the WHO CA+ may be given effect as recommendations for all Member States of the World Health Organization under Article 23 of the WHO Constitution.

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THE TOP TEN REASONS TO OPPOSE THE "PANDEMIC TREATY"

1. THE WHO WANTS CONTROL: Three separate times the WHO attempts to assert its desire to gain additional authority by usurping the sovereignty of the member nations. (Pages 4, 12 and 22)

2. COMMON BUT DIFFERENTIATED RESPONSIBILITIES: Each nation would receive only one vote, and all nations would be legally bound by the obligations of the WHO CA+, but some nations would be required to do and provide more than others in unspecified ways. (Page 11)

3. WHO GLOBAL PANDEMIC SUPPLY CHAIN AND LOGISTICS NETWORK: The WHO would be empowered to determine, control and direct the global supply of pharmaceutical products and all nations would be legally obligated to obey their dictates. (Page 13)

4. SPEED UP REGULATORY APPROVAL OF DRUGS: Nations would be obligated to decrease the time required to approve new drugs, regardless of issues regarding safety and effectiveness. (Page 15)

5. SUPPORT FOR GAIN OF FUNCTION: Nations would be encouraged to engage in *"innovative research and development for addressing novel pathogens"* while ensuring that regulatory standards *"do NOT create any unnecessary administrative hurdles for research."* (Page 16)

6. PATHOGEN ACCESS AND BENEFITS-SHARING SYSTEM: The WHO wants to be in control of *"all pathogens with pandemic potential, including their genomic sequences, as well as access to benefits arising therefrom."* The WHO also wants to receive *"real-time access to 20% of the production of... pandemic-related products."* (Pages 17-18)

7. ATTEMPTS TO JUSTIFY RESTRICTIONS OF UNALIENABLE HUMAN RIGHTS: The WHO is attempting to rebrand isolation, restrictions and quarantines as *"Protection of Human Rights."* (Page 21)

8. CENSORSHIP: The WHO wants to increase funding to *"tackle false, misleading, misinformation or disinformation," "managing infodemics through... social media"* and *"to counteract misinformation, disinformation and false news."* (Page 23)

9. ENORMOUS, UNSPECIFIED COSTS: The WHO CA+ would require tens of billions of dollars to be spent during inter-pandemic times on products that would provide dubious health benefits but consistent profits for the Pharmaceutical Hospital Emergency Industrial Complex. (Pages 25-26)

10. ADDITIONAL BUREAUCRACY: The Conference of the Parties (COP) would create yet another enormous bureaucracy to be ruled over by two Presidents and 4 Vice-Presidents. (Pages 26-27)

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THE TOP TEN REASONS WHY THE MEMBER NATIONS SHOULD LEAVE THE WORLD HEALTH ORGANIZATION

1. CONFLICTS OF INTEREST AND CORRUPTION: The WHO is infiltrated by Big Pharma, Big Money, and Big Foundations and has been corrupted by financial donations from corporations and non-governmental organizations which influence WHO policy in ways that benefit the corporations and the organizations through a money-laundering and influence-peddling scheme of massive proportions. The WHO follows the dictates of its so-called "relevant stakeholders" while ignoring the needs and desires of "We the People."

2. MISGUIDED FOCUS ON VACCINES: Influenced by vaccine manufacturers and vaccine pushers such as GAVI and Bill Gates, the WHO has lost sight of its core purpose of promoting health and has overemphasized the use of "vaccines" which have not improved health, but have actually degraded the overall health of billions of people around the world. Best practices designed to improve health are ignored in favor of actions ultimately designed to profit Big Pharma.

3. BUREAUCRACY AND WASTE: The WHO is dominated by bureaucrats and technocrats that are beholden to big Pharma, not knowledgeable health professionals that are dedicated to caring for patients and helping them maintain and improve their health. The WHO wastes enormous amounts of money on salaries for their bloated staff and travel expenses to such a degree that actual health related programs are chronically underfunded.

4. FEAR-MONGERING: The WHO has sounded the alarm and wasted time, effort and money by declaring FAKE Public Health Emergencies of International Concern (PHEICs) such as Moneypox and Swine flu (H1N1) while failing to act swiftly or effectively to address Ebola and COVID-19.

5. DANGEROUS RECOMMENDATIONS: The WHO has made horrible and corrupt recommendations in support of the expanded use of pharmaceutical drugs such as opiates that have been responsible for untold millions of unnecessary deaths.

6. FALSE MODEL OF HEALTH: The WHO is overly dependent upon the petro-chemical based pharmaceutical, medical, hospital industrial complex which practices allopathic medicine that is designed to alter and mask symptoms rather than actually improve health. The WHO does not offer a forum for clinical and scientific discussion or debate and clearly marginalizes natural healing modalities

7. POWER GRAB: The WHO is blatantly seeking to increase its power by pursuing a legally-binding proposed "Pandemic Treaty" and proposed amendments to the International Health Regulations.

8. MISTAKES: The WHO has repeatedly demonstrated that it is absolutely unwilling and incapable of learning from its mistakes of the past and is destined to continue wasting money while providing horrible advice based on the corruptive influence of Big Pharma and Bill Gates.

9. OUT-OF-TOUCH: The delegates to the World Health Assembly are unelected, unaccountable, unknown to the people they purport to represent and completely out of touch with the needs and desires of the people of their respective nations.

10. SECRECY: The WHO operates in secrecy and lacks transparency. Far too much of what is done by the WHO remains hidden. What we know is horrible. What we don't know may be monstrous!

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UNALIENABLE RIGHTS

1. THE IMPORTANCE OF INDIVIDUAL HEALTH OVER PUBLIC HEALTH: The good of any people is the sum total of the benefits enjoyed by each and every individual. The unalienable human rights of each individual, their personal sovereignty and their bodily autonomy, supersede the privileges of any and all international organizations, nations, states, provinces, cities or other groups that derive their existence from We, The People Of The World.

2. RIGHT TO PRIVACY: All people have an absolute, unalienable right to privacy in their personal information, including health related data. Every individual human being has the unalienable right to be free from any requirement to have or present any "vaccine passport," "digital-ID," or "health certificate" of any kind, whether in printed, digital or any other form.

3. RIGHT TO EXPRESS ONE'S OPINION: Every individual human being must always be free to fully express their own personal opinion free from any threat of retribution. Only the free debate of different and competing opinions can provide an environment of informed decision-making by each country, state, county, community, family and individual. Each individual has the right to publicly express their own opinion regarding the effectiveness, or lack thereof, of any health related policy or treatment in spoken and/or written form. Every person's experience is a valuable scientific observation and must NOT be censored. As more free debate and free expression of ideas, facts and data occur, each level of society will be able to decide for itself the best interventions to recommend for the control and management of any disease of concern. Any form of suppression of free public debate is strictly forbidden. Promotion of the public debate of competing points of view and access of the population to that debate, plus the personal dialogue between patients and doctors, will ensure each individual and family to be sufficiently informed to make their own choices and decisions regarding their health, under the principle of informed dissent. No uniform behavior of all the society will be required and the autonomy and will of each individual as citizen and patient are protected.

4. RIGHT TO PROVIDE INFORMATION ON PREVENTION AND HEALING: Every individual human being has the right to provide information that is directed by their experience and wisdom, free from executive mandate, bureaucratic dictate, pressure or coercion. All people have an unalienable right to choose to ignore or to take action upon the information they receive, free from any form of censorship or coercion.

5. RIGHT TO CHOOSE TREATMENT: Every individual human being must always be free to use any preventive and/or therapeutic treatment interventions that they consider to be the best choice for them. This may include strategies such as lifestyle changes, food as medicine, vitamins, minerals, natural supplements and repurposed essential medications that were previously approved for other diseases and have a long safety record. Withholding any of those optional strategies is a violation of an individual's unalienable right. Health care decisions must ultimately be made based on the individual's choice, not by bureaucratic dictate by government, academics, hospitals, clinics, medical practitioners or "public health experts."

6. RIGHT TO REFUSE TREATMENT: Every individual human being will always retain the unalienable right to refuse any intervention recommended by any institution, the World Health Organization, governments at all levels, medical associations, hospitals or health care providers. Each individual must be in control of the ultimate decision to utilize any and all health- related treatments, medications, and nutrition, as they deem necessary to improve and/or maintain their health. Decentralized clinical rationale by health care advisors and the right to informed dissent by patients will always be placed above any political interests or centralized decision by any government or health agency.

7. RIGHT TO TRAVEL FREELY UPON THE EARTH: Every individual human being has the unalienable right to move about the planet and this right may not be made dependent upon health, testing, or treatment based requirements. Each individual has the right to travel, free from any lockdowns, quarantines, vaccine requirements, vaccine passports, digital-IDs, mask mandates, social distancing or any other attempts to impede their freedom of assembly or movement.

8. THE RIGHTS OF CHILDREN MUST BE PROTECTED BY THEIR PARENTS: Every parent has the unalienable right and the solemn obligation to ensure that all the unalienable rights of their minor aged children are defended. No government or any other organization has the right to prevent any parent from defending the unalienable rights of their minor aged children.

9. RIGHT TO BE WITH FRIENDS AND FAMILY: Every individual human being has the right to visit with family and friends, who may be suffering through an illness, in order to provide them with love and emotional support at any setting including, but not limited to, home, clinic or hospital.

10. RIGHT TO FREEDOM FROM DISCRIMINATION: Each individual human being has the right to be free from discrimination based upon any demand upon any person to undergo any form of medical procedure, including testing. Discrimination based on personal health choices is unacceptable in employment or education matters, when accessing public and private institutions, organizations, private businesses or other locations or in regards to any other issue. Discrimination based on medical status is wrong and must not be permitted in any form whatsoever.

NO DEROGATION OF RIGHTS DURING EMERGENCY: Every government, every corporation, every organization and every individual human being must respect and honor everyone's unalienable rights despite any declaration of a "state of emergency" by anyone. Governments do NOT have the authority to suspend human rights because of so-called "emergencies." The declaration of an "emergency" does not give anyone the right to infringe upon anyone else's unalienable human rights. Every individual human being has the right to withhold their consent and refuse treatment or intervention of any kind, at any time, regardless of whether there is a declared "emergency" or not. Regardless of the scope and/or severity of any disease outbreak or real pandemic, human rights remain unalienable and may not be abridged.

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Activist Toolbox



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TRANSCRIPT:

I encourage absolutely everyone to copy this recording (and article) and re-upload it on the platform of your choice. Spread it far and wide so that everyone you know has the opportunity to become aware of what the WHO is attempting to do.

If you have the ability to translate this into other languages, or to subtitle it, that effort would be very much appreciated.

What follows are 100 of the many reasons why we must stop the proposed “Pandemic Treaty”, we must stop the proposed amendments to the International Health Regulations every nation on earth must #ExitTheWHO.

EVERYONE ON EARTH must be made aware that the World Health Organization is attempting a global coup. PLEASE share this article with everyone you know and feel free to contact me directly at any time if you have any questions or would like to help in a more substantial way. My name is James Roguski and you can reach me at 310-619-3055 via phone, text, Signal, WhatsApp or Telegram.

The WHO is currently overseeing negotiations that are designed to convince its 194 member nations to adopt amendments to the International Health Regulations as well as to adopt a legally-binding “Pandemic Treaty.”

The people behind these negotiations are hell-bent on creating a totalitarian dictatorship designed to enslave every human being within a digital prison that is lined with health

certificates and continuous surveillance.

These agreements, if adopted, would surrender health related sovereignty over to the WHO, who would then, in their own words, be able to implement the regulations WITHOUT respect for human dignity, human rights and fundamental freedoms.

You all better wake up, and you better wake up right now. We need to work together to

[**#StopTheTreaty**](#)

[**#StopTheAmendments**](#)

[**#ExitTheWHO**](#)

I am going to break these 100 reasons down into seven categories:

PART I: Ten things that everyone needs to know about the World Health Organization's proposed "Pandemic Treaty." (1-10)

PART II: The proposed amendments would seek to remove 3 very important aspects of the existing regulations. (11-13)

PART III: The proposed amendments would implement a great number of changes that everyone should absolutely disagree with. (14-50)

PART IV: There are glaring contradictions and flaws in the proposed amendments to the International Health Regulations. (51-60)

PART V: The proposed amendments are absolutely ignoring many of the things that really do need to be addressed. (61-80)

PART VI: The proposed amendments would trample our rights and restrict our freedoms. (81-90)

PART VII: The Ten Main Reasons why every nation on earth should #ExitTheWHO (91-100)

The first and most important point that I would like to make is that I am about to discuss two very different things. First, I will talk briefly about the proposed "Pandemic Treaty." More people seem to be aware of the so-called "Pandemic Treaty," but, while I see it as being an important issue, I believe that it is also functioning as a decoy that is designed to distract people from the much larger and more immediate threat to our rights and freedoms, which are the proposed amendments to the International Health Regulations.

[**#StopTheTreaty**](#)

PART I: Ten things everyone needs to know about the World Health Organization's proposed "Pandemic Treaty."

1. Dramatically Expand the Role of the WHO

The proposed "Pandemic Treaty" is the World Health Organization's attempt to convince the 194 member nations to agree to hand over their national sovereignty to the WHO via a legally binding framework convention that would hand over enormous additional, legally-binding authority to the WHO.

The WHO has published a 32 page document that they refer to as the "Conceptual Zero Draft" and on pages 10, 13 and 22 the WHO makes it very clear that the purpose of the document is to

recognize the central role of the WHO in the prevention, preparedness, response and recovery from future pandemics. They want to be the directing and coordinating authority on global health and global governance over all health systems.

Clearly, the actions of the WHO point to the fact that they are not focused upon the health of people. Instead, they are focused on funneling billions of dollars into building health systems. Their true purpose is to help finance and build the Pharmaceutical, Hospital, Emergency Industrial Complex (PHEIC) by redirecting funds via crony capitalism to corporations that profit from the declarations of Public Health Emergencies of International Concern and the fear-mongering that naturally follows such emergency declarations.

2. Creating an Entirely New Bureaucracy (COP)

In order to facilitate the growth of the Pharmaceutical Hospital Emergency Industrial Complex (PHEIC), the WHO would create an entirely new bureaucracy as defined in Article 19 of the Conceptual Zero Draft of the proposed “Pandemic Treaty.” It would create a governing body that is made up of a Conference of the Parties (COP), much like the system that has governed the discussion over climate change. Only nations that sign and adopt the treaty would become members of the Conference of the Parties. They would be directed by the Officers of the Parties which would include two presidents and four vice-presidents. There would also be an Enlarged Conference of the Parties (E-COP) that would include “relevant stakeholders” such as the Bill and Melinda Gates Foundations and others, so long as they were approved by a 2/3 majority of the Conference of the Parties.

3. The WHO Is Seeking Tens of Billions of Dollars

This already enormous bureaucracy seeks to have a yearly budget that is many times as big as the current entire budget of the WHO. While the Conference of the Parties associated with the proposed “Pandemic Treaty” would be connected to the WHO, it would also act independently from it.

Article 18 of the Conceptual Zero Draft of the proposed “Pandemic Treaty” discusses the desire for sustainable and predictable financing. They seek collaboration between the health, finance and private sectors and they also want to establish new international mechanisms in order to ensure a stable source of financing on global, regional and national levels.

One of the things that is absolutely lacking in the proposed “Pandemic Treaty” is any discussion whatsoever of the means by which decisions would be made regarding how all of these billions of dollars would be spent. It would essentially set up an enormous candy store through which the bureaucrats of the WHO would control the means of production in the Pharmaceutical, Hospital Emergency Industrial Complex.

4. Expanding Censorship

Article 16 of the Conceptual Zero Draft would essentially set up a Ministry of Truth that would give the WHO the power to study the behavioural barriers and drivers of adherence to public health measures. The WHO would be empowered to analyze social media to identify misinformation and disinformation in order to counter it with their own propaganda. They want billions of dollars to enable them to clamp down on free speech, freedom of the press and freedom of expression because they know that their recommendations and guidelines cannot stand the true test of scientific inquiry and they do not want any of their dictates to be criticized by public comment.

5. Speeding Up the Approval for Drugs and Injections

In Article 7(2)(b) it is very clear that they want regulatory bodies in nations around the world to accelerate the speed at which new drugs and injectables are authorized and approved. As if the disaster caused by the rapid authorization of the COVID-19 injections was not bad enough, they seek to dramatically speed up the process by which products are authorized and brought to the market.

6. Support for Gain-Of-Function Research

Rather than outlaw what may very well be the greatest threat to the survival of mankind on planet Earth, Article 8 of the Conceptual Zero Draft actually seeks to ensure that none of the measures put forth would create any unnecessary administrative hurdles for gain-of-function research. We need to completely and totally ban gain-of-function research immediately, not protect it from “unnecessary administrative hurdles.”

7. More and More Tabletop Exercises (Simulations)

Article 12 of the Conceptual Zero Draft calls for an increase in funding for what are known as tabletop exercises or simulations, much like Agenda 201 or the more recent simulation that can be found on CatastrophicContagion.com. The WHO wants nations around the world to spend billions of dollars on biological war games rather than spend that money in ways that would actually improve the health of the general population.

8. Seeking to Implement the Concept of One-Health

Article 17 of the Conceptual Zero Draft would implement a complex system known as One-Health in which control over human health, pet health, domesticated animal, farm animal and wild animal health and agricultural plant health and the overall health of the natural environment would be strictly controlled. In short, they want to have control over every aspect of everyone's life.

9. Whole-Of-Government, Whole-Of-Society Approach

The whole-of-government and whole-of-society approach would give authority to every agency of government and every non-governmental organization to be involved in the control of every single aspect of everyone's life. Their long term goal is complete totalitarian dictatorial control over every aspect of life on the planet.

10. Global Review System to Oversee Health Systems

In Article 12 and in Article 20 of the Conceptual Zero Draft of the proposed “Pandemic Treaty” they call for a Global Review Mechanism whereby the WHO would actively stick its nose into the manner in which individual sovereign nations support and structure their public health care systems. The oversight mechanisms in Article 20 fail to clearly define the metrics and other criteria by which any compliance review would be based. These details would be left to be decided at the first meeting of the Conference of the Parties which would occur long after the proposed “Pandemic Treaty” had already been adopted, ratified and entered into force. This would include the ability to monitor the nation's progress in complying with the treaty and would require the submission of periodic reports and reviews to suggest remedies and actions as well as advice and assistance. While it does not specifically mention economic sanctions, it also does not rule them out.

The above are just ten reasons why We, the People of the World, must #StopTheTreaty.

Now I will discuss the proposed amendments to the International Health Regulations. Although the proposed “Pandemic Treaty” is very concerning and very important to pay attention to, I honestly feel that the amendments to the International Health Regulations are a much more immediate and direct threat to the sovereignty of every nation and the rights and freedoms of every person on earth.

#StopTheAmendments

PART II: The proposed amendments would seek to remove some very important aspects of the existing regulations.

11. Removing respect for dignity, human rights and fundamental freedoms.

The most egregious, blatant and disgusting proposed amendment is to the first paragraph of Article 3 in the existing Regulations which describes the core principles of the International Health Regulations. The current version of the IHR does defend the unalienable rights of We the People. It currently states that the regulations must be implemented ~~[with full respect for the dignity, human rights and fundamental freedoms of people]~~, but the proposed amendment would cross out those 13 vitally important words. The proposal submitted by the delegation from India would replace those words with a focus on the transfer of wealth and would replace individual rights with inclusivity. This is a direct assault the rights and freedoms of every human being. This is a direct assault on humanity itself. (Page 3)

12. From “non-binding” to “legally binding.”

The proposed amendments would seek to remove the words “non-binding” from the definitions of temporary and standing recommendations that are made by the World Health Organization. When coupled with Article 42, (the Implementation of Health Measures) which says: “Health measures, including the recommendations made under Articles 15 and 16 shall be initiated and completed without delay by all States Parties.” That turns the WHO’s advisory role into a totalitarian dictatorship. The statements made by the WHO are currently recommendations, they are NOT commands upon the people of the earth. (Page 2)

13. Nations Shall, Must, Are Obligated and Have a Duty to Collaborate With and Assist other Nations

In a direct assault on national sovereignty, the proposed amendments to Article 43 state that “Recommendations made pursuant to... this Article shall be implemented... within two weeks from the date of [the] recommendation... and the decision made [by the Emergency Committee] on the request for [any] reconsideration shall be final.

Essentially, the WHO’s Emergency Committee would be given the power to overrule actions taken by sovereign nations. (Pages 21-22)

While the proposed amendments to the International Health Regulations seek to remove some very important rights and freedoms, the vast majority of the document seeks to add in new language, giving new authority to the WHO.

PART III: The proposed amendments a would implement a great number of changes that everyone should absolutely disagree with.

So now, let's turn to the many, many things that these proposed amendments would add to the International Health Regulations.

14. Drugs and Jabs = Health

In Article 1, the definition of "health products" fails to include the very things that were shown to be effective in double blind, placebo controlled, clinical studies that have been ignored by the world.

The definitions do not include vitamins, minerals, herbs and other beneficial nutrients that proved themselves to be supremely beneficial and truly safe. In lieu of using products that are truly safe and effective, the WHO seeks to redirect billions of dollars toward the Pharmaceutical Hospital, Emergency Industrial Complex for drugs and injections that are not proven to be safe and are only effective in increasing the risk of being diagnosed with the very dis-eases that these products are purported to protect people against. (Page 2)

15. Expanded Scope

The proposed amendments to Article 2 would dramatically expand the scope of the International Health Regulations from dealing with actual risks to dealing with anything that had the potential to be a risk to public health. This amendment would open up the doors wide to massive abuse beyond anything we have seen over the past 3 years. (Page 3)

16. Protecting Health Care Systems Instead of People

In the proposed amendment to the new second paragraph (bis) of Article 3, the focus of the WHO is subtly shifted away from the health of real people and would be guided to place primary preference upon the resilience of health care systems. We don't need to focus upon the health of our health care systems so much as we need to focus upon the health of PEOPLE. Our health care facilities are no longer a place where people who are suffering from dis-ease go in order to regain their health. Our health care facilities have become killing fields to be feared. (Page 3)

17. Common But Differentiated Responsibilities and Respective Capabilities

In the proposed amendments to Parts 1 and 2 of Article 3, the repeated use of the phrase "common but differentiated responsibilities and respective capabilities" is used to mask what is inherently discriminatory, racist, sexist and unequal treatment of people around the world under the guise of "equity and inclusivity." Please note that the phrase "common but differentiated responsibilities and respective capabilities" is NOT defined in Article 1. (Page 3)

18. All Powerful National Competent Authority

The proposed amendments to Article 4, would seek to establish a National Competent Authority who would be given great power to implement the obligations under these regulations, while having absolutely no accountability for any of the harm caused by any of their official actions. This without precedent. (Pages 4-5)

19. Developed Nations' Obligation to Provide Assistance to Developing Nations

While the existing document fails to clarify which countries are considered to be on which list, in both Article 5 and in Annex 1, the proposed amendments would clearly obligate "developed nations" to assist "developing nations" to build their ability to detect, assess and notify the WHO regarding pathogenic, infectious outbreaks. (Pages 4 and 31)

20. Loss of Sovereignty

IF the proposed amendments to Articles 9, 10 and 12 were to be adopted, the WHO will no longer need to consult any sovereign nation in which an event may, or may not be occurring within that nation before declaring that there is a Public Health Emergency of International Concern (PHEIC) within the borders of that nation. (Pages 6-10)

21. Intermediate Public Health Alert

The proposed amendments to Article 12 would also enable the Director General of the WHO to declare a Intermediate Public Health Alert. (Pages 8-10)

22. World Alert and Response Notice

The proposed amendments to Article 12 would also enable the Director General of the WHO to declare a World Alert and Response Notice. (Page 10)

23. Public Health Emergency of Regional Concern (PHERC)

Also, the proposed amendments to Article 12 would also enable the Regional Directors of the WHO to declare a Public Health Emergency of Regional Concern (PHERC). (Pages 8-10)

24. The WHO Would Be Placed in a Position of Global Authority

The proposed amendments seek to create a new Article 13A which would have the world community recognize the World Health Organization as the guidance and coordinating authority during international emergencies. (Pages 12-14)

25. WHO Allocation Plan

The proposed new Article 13A would also empower the WHO to craft an "Allocation Plan" to mandate the manufacturing, donation and distribution of various pandemic response products. If these amendments were to be adopted, the WHO would effectively be placed in control of the means of production of any and all nations of the world. Upon the dictate of the WHO, formerly sovereign nations would be obligated to ensure that the manufacturers within their borders gear up production and donate their products as directed by the WHO. (Pages 12-15 and page 21)

26. Events That Are Only Potentially Dangerous Can Be Declared Emergencies

The proposed amendments to Article 15 would empower the WHO to declare emergencies and make legally-binding recommendations or commands based on situations that merely had the potential to cause Public Health Emergencies of International Concern. (Page 14)

27. The WHO Could be Empowered to Mandate Policy During Emergencies

The existing Article 18 lists a number of "recommendations" that the WHO could make but, if the proposed amendments are adopted, these non-binding recommendations would no longer merely be suggestions, but would be legally-binding upon the member nations. (Page 16)

1. Review travel history in affected areas;
2. Review proof of medical examination and any laboratory analysis;
3. Require medical examinations;

4. Review proof of vaccination or other prophylaxis;
5. Require vaccination or other prophylaxis;
6. Place suspect persons under public health observation;
7. Implement quarantine or other health measures for suspect persons;
8. Implement isolation and treatment where necessary of affected persons;
9. Implement tracing of contacts of suspect or affected persons;
10. Refuse entry of suspect and affected persons;
11. Refuse entry of unaffected persons to affected areas; and
12. Implement exit screening and/or restrictions on persons from affected areas.
13. Review manifest and routing;
14. Implement inspections;
15. Review proof of measures taken on departure or in transit to eliminate infection or contamination;
16. Implement treatment of the baggage, cargo, containers, conveyances, goods, postal parcels or human remains to remove infection or contamination, including vectors and reservoirs;
17. The use of specific health measures to ensure the safe handling and transport of human remains;
18. Implement isolation or quarantine;
19. Seizure and destruction of infected or contaminated or suspect baggage, cargo, containers, conveyances, goods or postal parcels under controlled conditions if no available treatment or process will otherwise be successful; and
20. Refuse departure or entry.

28. Traveler's Health Declaration

The proposed amendments to Article 18 also seek to create mechanisms to develop and apply a "Traveler's Health Declaration" that would require personal information about one's travel itinerary, possible symptoms and any prevention measures that had been complied with in order to facilitate contact tracing. (Page 16)

29. Foreign "Health Care Workers"

The proposed amendments to Article 18 also appear to make it mandatory for nations to allow foreign "health care workers" to enter their country. (Pages 16-17)

30. Digital Global Health Certificates

The proposed amendments to Articles 18, 23, 24, 27, 28, 31, 35, 36 and 44 as well as proposed amendments to Annexes 6, 7 and 8 would institute a global digital health certificate with a paper backup which would require people to show a QR code in order to continue to live their life as a human being on planet Earth, to travel, to shop, to do whatever it is that this may be used to prevent. It would set up an interoperable, world-wide digital health database system that would potentially enable bureaucrats from around the world to set requirements for prophylaxis, medications, treatment, injections and God only knows what else. This could potentially require people to undergo health treatments that are against their free will, in violation of their deeply held religious beliefs and their right of informed dissent just to enable them to participate in society. (Multiple pages)

31. Passenger Locator Form

The proposed amendments to Article 23 would set up a Passenger Locator Form that would require people to provide their travel itinerary and planned locations in order to facilitate contact tracing. (Page 18)

32. Competent Authorities Given Command Over Ships and Aircraft

The proposed amendments to Articles 27 and 28 would enable so-called “competent authorities” to actually command the captains of ships and aircraft to follow their orders. (Pages 18-19)

33. Multiple Health Documents

The proposed amendments to Articles 35 and 36 would dramatically expand the required health documents to require testing certificates, vaccine certificates, prophylaxis certificates and recovery certificates. (Page 20)

34. Legally Binding “Recommendations”

The proposed amendments to Article 42, as mentioned earlier, would require nations to implement the “recommendations” of the Dictator General of the World Hypocrisy Organization as though they were legally-binding orders, not just recommendations. (Page 20)

Article 42 Implementation of health measures

Health measures taken pursuant to these Regulations, including the recommendations made under Article 15 and 16, shall be initiated and completed without delay by all State Parties, and applied in a transparent, equitable and non-discriminatory manner. State Parties shall also take measures to ensure Non-State Actors operating in their respective territories comply with such measures.

35. Attain The Highest Achievable Level of Health Protection

The proposed amendments to Article 43 seem to allow and encourage nations to go to the absolute extreme in responding to any so-called “emergency by striving to “attain the “highest achievable level of health protection.” This appears to encourage and give support to actions that were implemented by some nations which employed extremely severe lockdowns, travel restrictions and ZERO COVID policies. (Page 21)

36. The Finality of Decisions Made by the Emergency Committee Would Be a Direct Attack on National Sovereignty

The proposed amendments to Article 43 would make the decisions of the Emergency Committee legally-binding and final. They would seek to negate decisions made by sovereign member nations and limit the freedom of sovereign nations to enact legislation or regulations as they determine to be appropriate, as stated in Article 3, Section 4. (Pages 21-22)

37. Loss of Privacy Regarding Health Records

The proposed amendments to Article 44 would facilitate digital access to everyone’s private health records. The loss of one’s unalienable right to privacy regarding their health records is something that every human being on the planet must oppose. (Pages 22-24)

38. Censorship

The proposed amendments to Article 44 would also facilitate the censorship of any differing opinions under the guise of mis-information or dis-information. (Page 23)

39. WHO Interference in the Crafting of Legislation

The proposed amendments to Article 44 would also involve the World Health Organization in actually writing the laws that would be enacted in various nations in order to implement these regulations. (Page 23)

40. Unlimited Money for the PHEIC

The proposed amendments to Article 44A would organize massive financing on behalf of the Pharmaceutical Hospital Emergency Industrial Complex with absolutely no estimate or limit on the proposed costs. (Page 25)

41. Financing Rules to Remain Undetermined for 24 Months

The proposed amendments to Article 44A also state that the details of the financing mechanism would NOT be decided upon until 24 months after the adoption of the amendments to the International Health Regulations. (Page 25)

42. Loss of Privacy of Personal Health Data

The proposed amendments to Article 45 would make it acceptable for private, personal health data to be shared. Again, this violation of our unalienable right to privacy in our personal health records must not be allowed to occur. (Page 25)

43. Lack of Transparency with the General Public

The proposed amendments to Article 49 fail to stipulate that the reports of the Emergency Committee must be revealed to the general public. The reports of the Emergency Committee must be made publicly available, especially the dissenting voices that may disagree with the recommendations. The proposed amendment to Article 49 only requires the information to be shared with the member nations, who could then keep it secret from the general public. Personal experience has proven that the members of the delegations to the WHO are inaccessible and refuse to reveal such communications, even after numerous Freedom of Information Act Requests. (Pages 26-27)

44. Implementation Committee and More Bureaucracy

The proposed amendments to Articles 53A and 54 bis would redundantly establish an Implementation Committee or place implementation of the proposed amendments into the hands of the World Health Assembly. This Implementation Committee would just add to the bureaucracy along with the Compliance Committee, the Emergency Committee, the Review Committee, the Special Committee and the Standing Committee on Health and Emergency Prevention, Preparedness, and Response. Spending money on bureaucracy does not improve the health of the general public. (Pages 26-27)

45. Compliance Committee

The proposed amendments to Article 53 bis-quater would create yet another bureaucracy in the form of a Compliance Committee. This committee would consist of at least 36 people (6

bureaucrats from each of the 6 WHO regions). The Compliance Committee would be empowered to make recommendations to nations regarding how they may improve compliance with the core capacities required by the amendments to the International Health Regulations. This is yet another attack on the sovereignty of nations and the freedoms of people. (Pages 28-29)

46. Core Capacities

The proposed amendments to Annex 1 are absolutely massive. They include seven (7) full pages of requirements that each and every member nation would be required to implement as changes to the “core capacities” of their nation’s public health system. These changes also seek to impose requirements on a local or community level, at an intermediate public health response level, at the national health governance level as well as at the global level. (Pages 31-37)

47. Treatment Guidelines

The proposed amendments to Annex 1 would seek to enforce clinical guidance and treatment guidelines. The doctor-patient relationship would be absolutely destroyed.(Page 32)

48. Propaganda

The proposed amendments to Annex 1 would also require the core capacity for “information dissemination” via “appropriate messages” and “communication management.” By any other name, this is propaganda that would be funded by billions of dollars allocated to the WHO. (Page 32)

49. Surveillance Networks

The proposed amendments to Annex 1 would set up surveillance networks within the territories of the member nations to “quickly detect public health events.” The definition of a “public health event” can be almost anything that they want it to be. (Page 32)

50. Obligations of Duty to Cooperate

The proposed amendments seek to create an entirely new Annex 10 which would create “Obligations of Duty to Cooperate” that would require nations to assist when asked to build infrastructure around the world. And most concerning, on the very last page of the proposed amendments is the requirement of “Developed States Parties” of which there is not yet a list of nations clarifying which nations are considered to be developed, to assist in the building and maintaining of facilities at points of entry and for the operations associated with the implementation of the International Health Regulations. (Page 46)

What in the world could such facilities be planned to be used for?

PART IV: There are glaring contradictions and flaws in the proposed amendments to the International Health Regulations.

In addition to a number of blatant contradictions, many issues are missing, forgotten, overlooked or purposefully left out from the proposed amendments as well as missing from the entire process.

Neither the Working Group to consider amendments to the International Health Regulations (WGIHR) nor the International Health Regulations Review Committee (IHRRC) seem to have the

foggiest clue about the many things that We the People of the World are actually very concerned about.

51. Lack of Input From The General Public

The vast majority of the people of the world have no idea whatsoever that any of these negotiations are happening. They have been given no opportunity whatsoever to have any say or any input into these secret negotiations. All of these negotiations are being done without any form of democratic process or public comment. Those of us who have reached out in an attempt to have our voices heard realize that the WHO does NOT reply, they do NOT respond to members of the general public at all. They are only interested in the inputs from what are considered to be “relevant stakeholders” which are big-money organizations and foundations, many of which donate to the WHO and actually fund and thus control their activities. That is what gives them a seat at the negotiating table and a voice in these negotiations. The average person is completely shut out and is considered to have and offer no value to the people who are negotiating, supposedly on behalf of the people of their nations.

52. Unknown and Unaccountable Delegates

Most people do not have any idea of who their delegates to the WHO are. They have no idea regarding who may be pretending to represent them before the WHO. Most people in the world do not know that the World Health Assembly even exists and that the 76th meeting will be occurring at the end of May, 2023.

53. The Negotiating Process has been Hijacked by the IHRRC

At the 75th meeting in May of 2022, the World Health Assembly agreed to create a Working Group to consider amendments to the International Health Regulations (WGIHR). They scheduled an initial meeting of the WGIHR for mid-November 2022, but the negotiating process was hijacked by the WHO at the beginning of October. The WHO created an International Health Regulations Review Committee (IHRRC) that took over the job that should be directly under the control of the Secretariat of the WGIHR. The IHRRC is sworn to secrecy and confidentiality and answers only to the Director General. The IHRRC was put together in early October and has met several times for weeklong secret meetings to negotiate and craft the document that they plan to submit to the WHO for consideration at the 76th World Health Assembly in May of 2023.

These are oligarchs and technocrats who are making rules to give more power, authority and money to oligarchs and technocrats.

The WGIHR's authority over this process appears to have been usurped by the IHRRC. As of the end of 2022 the WGIHR has failed to provide any insight into their upcoming schedule and they have not planned any means by which the public would be able to comment on these negotiations to amend the International Health Regulations. It appears that the entire negotiating process has been hijacked by a group of 18 “experts” who have been hand-picked to do the bidding of the Dictator General of the World Hypocrisy Organization.

The entire process violates one of the fundamental principles in the Preamble of the WHO Constitution which states:

“Informed opinion and active co-operation on the part of the public are of the utmost importance in the improvement of the health of the people.”

54. Undefined Terminology

In regards to the proposed amendments themselves, the WGIHR and the IHRRC have created a jargon of their own that they refuse to legally define. Dozens of undefined words and phrases are used throughout the proposed amendments and, since they are not defined, they can purposefully be misrepresented and skillfully re-interpreted at will.

Undefined terms:

1. Assessment and Risk Criteria
2. Assistive Products
3. Benefit Sharing Mechanism
4. Common But Differentiated Responsibilities and Respective Capabilities
5. Conflict and Violence Elements
6. **Developed States Parties**
7. **Developing States Parties**
8. **Equity**
9. Event Information [Web]Site
10. Fair and Equitable Sharing of Benefits
11. Genetic Sequence Data
12. Genome Sequence Data
13. Guidance
14. **Inclusiveness**
15. Joint External Evaluation
16. National IHR Competent Authority
17. National IHR Focal Point
18. Non-State Actors (an official list is needed)
19. **Pandemic**
20. Potential to Become a PHEIC
21. **Preparedness**
22. **Prevention**
23. Public Health Interventions
24. **Recovery**
25. **Response**
26. Risks With a Potential to Impact Public Health
27. **Solidarity**
28. Universal Health Periodic Review
29. **Vaccine**

Without proper legal definitions, these words can be interpreted and re-interpreted at will to mean whatever they want them to mean.

55. Hypocrisy

After rejecting numerous natural and inexpensive therapeutic agents due to false claims of a lack of peer-reviewed studies, the WGIHR and the IHRRC continue to fail to appreciate the irony that they are negotiating proposed amendments to the International Health Regulations, purportedly to improve pandemic prevention, preparedness, response and recovery, and they have failed to provide a single peer-reviewed, double-blind, placebo-controlled study to back up any of their many recommendations. They are clearly NOT meeting their own supposed “gold standard.”

56. Fatal Flaw #1 - There are NO Valid Criteria by Which to Measure Preparedness

I will comment on just one of the several dozen undefined terms, which is the phrase “assessment and risk criteria.” During the first Informal Focused Conference, the WHO moderator asked several experts to explain which metrics could be used to determine a nation’s preparedness and thus, give them the ability to prevent and/or respond to a PHEIC. The experts clearly stated that no metrics, or assessment or risk criteria had been shown to accurately determine whether or not a nation could be confident that they were adequately prepared for the next pandemic.

Ignoring the fact that the word pandemic itself is not legally defined, the point is this: The entire process of crafting amendments to the International Health Regulations in order to “be better prepared to prevent and respond to the next pandemic” is a useless exercise because NO ONE KNOWS HOW TO MEASURE PREPAREDNESS! The WHO’s own experts expressed it in the following words, and I quote:

“We owe it to ourselves to not continue to rely on them in a dogmatic way until allowing scientific analyses to generate a new set of measurements. It’s a topic that I think has been marginalized, but is very important.”

The WHO is purporting to negotiate legally-binding amendments to the International Health Regulations to improve the ability to prevent and prepare for the next pandemic, and they have NO IDEA how to measure the goals that they say they are trying to achieve.

57. Fatal Flaw #2: National Sovereignty of Every Nation Directly Conflicts With the WHO’s Attempted Power Grab

Many of the proposed amendments should be seen as null-and-void because they directly conflict with principle number 4 in Article 3, which clearly states the following:

“States have, in accordance with the Charter of the United Nations and the principles of international law, the sovereign right to legislate and to implement legislation in pursuance of their health policies.”

Sovereign states cannot be commanded by recommendations that have attempted to be converted into commands or orders by the Compliance Committee, by the Rulings of the Emergency Committee or by the proclamations found in Article 44, Annex 1, or Annex 10 or by a change in terminology in Article 1 that seeks to change non-binding recommendations into legally-binding “Obligations of Duty to Cooperate.”

This makes the International Health Regulations self-contradictory and would make them null and void. The WHO seeks to have the member nations surrender their right to sovereign control over their own public health systems to the WHO. This is reason enough to #StopTheAmendments and #ExitTheWHO.

58. No Way to Cancel or End a Declared Emergency

In much the same way that the Director General is free to declare an emergency even against the advice of his own expert Emergency Committee with essentially no valid data whatsoever, the opposite problem of being unable to bring an already declared emergency to an end is also under the sole control of the Dictator General. There is currently no way for We the People to insist that an emergency be brought to an end.

59. The Proposed Funding Mechanism is Redundant With the World Bank’s Pandemic Fund

Although the World Bank’s Pandemic Fund is as deeply flawed as the ill-defined funding mechanisms proposed by both the proposed Pandemic Treaty and the proposed amendments to

the International Health Regulations, the World Bank's Pandemic Fund is currently in place and will begin serving as a mechanism that can be studied to see if the hoped for benefits may arise from the many billions of dollars that they plan to spend. To even consider wasting untold tens of billions of dollars before the pilot project being conducted by the World Bank has had a chance to succeed or fail, is ridiculous. The World Bank Pandemic Fund has had great difficulty raising the money that they had hoped for. To believe that the funds associated with the proposed treaty and amendments will be greeted any more favorably is sheer folly.

60. Spending tens of billions of dollars diverts that money away from things that people are actually suffering from

Spending billions of dollars on the items and personnel that are currently undefined by the proposed amendments could and should absolutely be spent on health related issues that could truly have an impact upon people who are suffering from a wide range of dis-eases. Spending money to attempt to prevent or prepare for an event that may never come, and even if it does, is likely to be far different than what may have been planned for is simply bureaucratic malfeasance.

PART V: The proposed amendments are absolutely ignoring many of the things that really should be and need to be addressed.

61. The Importance of Individual Health Over Public Health Systems

Supporting Public Health Systems associated with the Pharmaceutical Hospital Emergency Industrial Complex is not even remotely the same as supporting the health of individual people. The WHO seems to have forgotten that the good of any people is the sum total of the benefits enjoyed by each and every individual. The unalienable human rights of each individual, their personal sovereignty and their bodily autonomy, supersede the privileges of any and all international organizations, nations, states, provinces, cities or other groups that derive their existence from We, The Individual People Of The World.

62. Failure to explain the magical disappearance of Influenza

The WHO seems to be at a complete loss to explain how and why influenza magically disappeared from the health statistics over the past few years.

63. Failure to Isolate the virus

The WHO continues to be in absolute denial of the fact that no one has ever provided actual evidence of the existence of the supposed virus that has been given the name SARS-CoV-2 and its many supposed variants. Even though hundreds of Freedom of Information Requests for such evidence from around the world have been submitted, no one appears to have ever been able to properly isolate it and provide evidence of having done so.

64. Failure to prove causality via Koch's Postulates

The WHO also continues to ignore the fundamental fact that SARS-CoV-2 has never been submitted to the scrutiny required according to Koch's Postulates to determine whether or not it is actually the causal factor in the collection of EXTREMELY common symptoms that have come to be known as COVID-19. SARS-CoV-2 has not been properly shown to be the sole cause of the symptoms associated with COVID-19 which has resulted in widespread mis-diagnosis, with massive numbers of false positive RT-PCR results.

65. Two Weeks to Flatten The Curve Was An Absolute Failure

The WHO is in complete denial that the concept of “two weeks to flatten the curve was a lie and that the lockdowns that resulted from that lie failed to stop the spread of whatever is causing the dis-ease that is known as COVID-19.

66. Lockdowns, Curfews, Travel Restrictions

The WHO is still failing to admit that lockdowns, quarantines, curfews, travel restrictions, social distancing and the wearing of masks only served to trigger severe economic devastation and caused an enormous mental health catastrophe. They still refuse to acknowledge that countless studies have shown that those actions failed miserably and have never been shown to reduce the spread of a respiratory pathogen.

67. Using RT-PCR to Diagnose Disease is Fraudulent

The WHO is still promoting the lie and pretending to determine cases of a disease via RT-PCR that is NOT of any benefit whatsoever to improving people's health. Using RT-PCR is clearly NOT a valid way of diagnosing disease. All it does is generate a huge percentage of false positives that simply wastes resources on asymptomatic people who are actually more properly described as being healthy. Generating massive numbers of improperly diagnosed fake “cases” only serves to assist the fear-mongering that leads to feeding the Pharmaceutical Hospital Emergency Industrial Complex. Using RT-PCR must be admitted to be the fraud that it has always been since the very beginning.

68. Early Treatment

The WHO still seems to believe that the early, inaccurate detection of disease via RT-PCR followed by lockdowns, quarantines and mask wearing is somehow a better strategy to prevent outbreaks from spreading into pandemics than early effective treatment with decades old essential medications that have exhibited a long history of safety and effectiveness in combination with vitamins, minerals, herbs and good nutrition.

The WHO continues to fail to acknowledge that the blame for the death of millions of people must be placed directly upon the numerous health officials around the world who insisted that frontline clinicians follow pathetic treatment protocols which prevented the use of early, effective treatments. Millions of people died because their doctors were directed to tell them that “nothing could be done” and sadly, this situation still exists.

The WHO appears to be completely ignore-ant of the fact that the intelligent early treatment with essential medications and natural substances that were provided by wise and experienced health professionals all around the world were far more successful in preventing hospitalizations and preventing deaths than the pathetic official protocol of do nothing, take a Tylenol and go to the emergency room if it gets really bad so we can put you in a drug induced coma in order to mechanically control your breathing with a ventilator and give you Medazolam so that you can have a “good death.”

69. Nutrition

The WHO continues to fail to recognize the benefits of treatment with vitamins and minerals such as vitamins C and D and the mineral zinc. There is no profit to be had by the Pharmaceutical Hospital Emergency Industrial Complex in utilizing these proven, natural ingredients, and THAT is what clearly explains why they have not been used.



James Roguski

"Unapproved" Treatments That Have Been Shown to be Safe and Effective for COVID-19

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70. Essential Medications

The WHO continues to fail to recognize the benefits of repurposed essential medications such as hydroxychloroquine and ivermectin. Every person who contributed to restricting the use of these life-saving essential medications is a criminal and should be charged with mass murder.

71. Dangerous Authorized and Approved Medications

The WHO continues to fail to address the deadly side effects of approved and authorized drugs such as remdesivir and medazolam that have contributed to kidney failure and death in thousands of individuals. The ongoing use of these drugs must be investigated to determine their true risk/benefit ratio.

72. Ventilators are Deadly

The WHO continues to deny that ventilators and the drugs that are administered as part of the ventilator protocol have actually caused the deaths of thousands of innocent victims of medical murder.

73. In Silico Genetic Sequence Used for mRNA Injections

The WHO still chooses to ignore the undeniable fact that the genetic sequence that was supposedly used to create the mRNA injections was clearly created in silico (in a computer) and is not a naturally occurring sequence. If a spike protein is produced in the human body due to the mRNA found in the injections, then it is clearly a non-natural, man-made biological weapon.

74. Quality Assurance Failure

The WHO has failed miserably to ensure that quality assurance testing was done to ensure the purity of the ingredients in the jabs that have been injected into billions of people. In the past, if any other product was found to have the levels of contamination reported by many researchers or exhibited the complete lack of the purported active ingredient, such mislabeled products could, should and would have been recalled from the market immediately.

75. Vaccine Equity

The WHO still seems to believe that equity in producing and distributing poisonous drugs and deadly injections is more important than focusing on treatment protocols that actually save lives. Clearly, they believe that equity is about wealth, not about health.

76. The So-called “Vaccines” are simply NOT effective.

The WHO still fails to acknowledge that the COVID-19 gene-therapy biological weapons have failed miserably in their stated goals. Several billion people have had multiple injections and yet COVID-19 is rampant across the world, especially in those people who have received the most jabs. The WHO refuses to admit that the so-called COVID-19 “vaccines” were rushed into use and were never shown to be effective. They were never studied nor shown to reduce transmission of any virus. Statistics from all across the world have shown that those who have been jabbed are absolutely NOT protected from being diagnosed with COVID-19. How massive of a failure does this need to become before the WHO will recognize and admit that it has committed a gargantuan mistake?

77. The So-Called “Vaccines” Are Absolutely NOT safe

What will it take for the WHO to realize and admit that the jabs are damaging people’s immune systems and actually making the situation far worse than it was. The WHO refuses to admit that the so-called COVID-19 “vaccines” were rushed into use and were never shown to be safe. Lack of safety testing in pregnant women is an extremely egregious violation of the most basic ethical standards of health care.

Anyone who states that these injections are “safe” is committing a crime against humanity and should be charged as an accessory to mass murder.

78. Death, Disability and Dis-ease

The WHO is in complete denial of the many thousands of people who have been killed by these injections, or who have suffered severe disability, heart attacks, strokes, myocarditis, pericarditis, turbocharged cancers, Bell’s Palsy and countless other adverse reactions to the injections. The WHO is ignore-ant of the tens of thousands of people who have suffered damaged immune systems, cardiovascular problems, liver, kidney and nervous system and other systemic damage due to the toxic effects of the poorly tested injections. Their injuries suffered by these people around the world are real, not rare.

79. Fraudulent Causes of Death Listed on Death Certificates

The WHO seems to be in complete denial that the ongoing practice of claiming that people who died with a positive RT-PCR test, but whose deaths were actually due to a wide variety of other causes should still be counted as COVID-19 deaths is actually a form of fraud of which many people are aware. The WHO refuses to even examine the fact that, while many people have died, the reasons behind the causes of their deaths are exceedingly unclear and multi-faceted and cannot reliably be attributed to COVID-19

80. The Cover-up the Facts and the Propensity to Attack the Messengers

The WHO seems to be very much in favor of censoring those who seek to expose the truth in order to avoid holding themselves and other officials accountable for the financial devastation, mental anguish, physical harm and untold death that they have caused by their overreach, their ineptitude and their craven desire for power and control. Censorship is NOT a solution to the catastrophic failure that we have all witnessed over the past 3 years.

PART VI: The proposed amendments would trample our rights and restrict our freedoms.

81. The Unalienable Right To Privacy

All people have an absolute, unalienable right to privacy in their personal information, including health related data. Every individual human being has the unalienable right to be free from any requirement to have or present any “vaccine passport,” “digital-ID,” or “health certificate” of any kind, whether in printed, digital or any other form.

82. The Unalienable Right To Express One’s Opinions

Every individual human being must always be free to fully express their own personal opinion free from any threat of retribution. Only the free debate of different and competing opinions can provide an environment of informed decision-making by each country, state, county, community, family and individual. Each individual has the right to publicly express their own opinion regarding the effectiveness, or lack thereof, of any health related policy or treatment in spoken and/or written form. Every person’s experience is a valuable scientific observation and must NOT be censored.

As more free debate and free expression of ideas, facts and data are allowed to occur, each level of society will be better able to decide for itself what the best interventions to recommend are for the control and management of any disease. Any form of suppression of free public debate is strictly forbidden. Promotion of the public debate of competing points of view and access by the population to that debate, plus the personal dialogue between patients and doctors, will ensure each individual and family can be sufficiently informed to make their own choices and decisions regarding their health, under the principle of informed dissent. No uniform behavior of all of society can be required and the autonomy and free will of each individual must be protected.

83. The Unalienable Right To Provide Information on Prevention and Healing

Every individual human being has the unalienable right to provide information that is directed by their experience and wisdom, free from executive mandate, bureaucratic dictate, pressure or coercion. All people have an unalienable right to choose to ignore or to take action upon the information that they receive, free from any form of censorship or coercion.

84. The Unalienable Right To Choose Treatment

Every individual human being must always be free to use any preventive and/or therapeutic treatment interventions that they consider to be the best choice for them. This may include strategies such as lifestyle changes, food as medicine, vitamins, minerals, natural supplements and repurposed essential medications that were previously approved for other diseases and have a long safety record. Withholding any of those optional strategies is a violation of an individual’s unalienable right to choose. Health care decisions must ultimately be made based on the individual’s choice, not by bureaucratic dictate by government, academics, hospitals, clinics, medical practitioners or “public health experts.”

85. The Unalienable Right To Refuse Treatment

Every individual human being must always retain the unalienable right to refuse any intervention recommended by any institution, the World Health Organization, governments at all levels, medical associations, hospitals or health care providers. Each individual must be in control of the ultimate decision to utilize any and all health-related treatments, medications, and nutrition, as they themselves deem necessary to improve and/or maintain their health. The right of informed dissent by patients will always be placed above any political interests or centralized decision-making by any government or health agency.

86. The Unalienable Right To Travel Freely Upon The Planet

Every individual human being has the unalienable right to move about the planet and this right may NOT be made dependent upon health, testing, or treatment based requirements. Each individual has the right to travel, free from any lockdowns, quarantines, vaccine requirements, vaccine passports, digital-IDs, mask mandates, social distancing or any other attempt to impede their freedom of assembly or movement.

87. The Unalienable Rights Of Parents To Protect The Unalienable Rights Of Their Children

Every parent has the unalienable right and the solemn obligation to ensure that all the unalienable rights of their children are defended. No government or any other organization has the right to prevent any parent from defending the unalienable rights of their children.

88. The Unalienable Right To Be With Family and Friends

Every individual human being has the right to visit with family and friends, who may be suffering through an illness, in order to provide them with love and emotional support that they need, in any setting including, but not limited to, home, clinics or hospitals. The Freedom of Assembly shall NOT be denied.

89. The Unalienable Right To Freedom From Discrimination

Each individual human being has the right to be free from discrimination based upon any demand upon anyone to undergo any form of medical procedure, including testing. Discrimination based on personal health choices is absolutely unacceptable in employment or education matters, when accessing public and private institutions, organizations, private businesses or in other locations or in regards to any other issue. Discrimination based on medical status is wrong and must NOT be permitted in any form whatsoever.

90. There May be NO Derogation of Rights During a Declared Emergency

Every government, every corporation, every organization and every individual human being must respect and honor everyone's unalienable rights despite any declaration of a "state of emergency" by anyone. Governments do NOT have the authority to suspend human rights because of so-called "emergencies." The declaration of an "emergency" does not give anyone the right to infringe upon anyone else's unalienable human rights. Every individual human being has the right to withhold their consent and refuse treatment or intervention of any kind, at any time, regardless of whether there is a declared "emergency" or not. Regardless of the scope and/or severity of any disease outbreak or real pandemic, human rights remain unalienable and may not be abridged.

[#ExitTheWHO](#)

PART VII: The Ten Main Reasons why every nation on earth should #ExitTheWHO

91. The WHO is Clearly Attempting a Power Grab

The WHO is blatantly seeking to increase its power by pursuing a legally-binding "Pandemic Treaty" and proposed amendments to the International Health Regulations. The WHO seeks to turn its recommendations into legally-binding orders and control. The WHO seeks to have the

194 member nations surrender their sovereignty to the WHO. This must NOT be allowed to happen.

92. Conflicts of Interest and Corruption Have Plagued the WHO for Decades

The WHO is infiltrated by Big Pharma, Big Money, and Big Foundations and has been corrupted by financial donations from corporations and non-governmental organizations which have undue influence over WHO policies in ways that benefit the corporations and the organizations through a money-laundering and influence-peddling scheme of massive proportions. The WHO follows the dictates of its so-called “relevant stakeholders” while ignoring the needs and desires of “We the People.” The global health architecture proposed by the WHO is much closer to an organized crime syndicate than it is to anything resembling public health

93. The WHO is Plagued With Vaccine Madness

The WHO is influenced by vaccine manufacturers and vaccine pushers such as GAVI and Bill Gates. The WHO has clearly lost sight of its core purpose of promoting health and has overemphasized the use of “vaccines” which have recently been switched and converted into gene-therapy treatments which have not improved health, but have actually degraded the overall health of billions of people around the world. Best practices designed to improve health are now being ignored in favor of actions that are ultimately designed to profit the Pharmaceutical Hospital Emergency Industrial Complex.

94. Stop the Expansion of Bureaucracy and Waste

The WHO is dominated by bureaucrats and technocrats that are beholden to Big Pharma and are not knowledgeable health professionals that are dedicated to caring for patients and actually helping them to maintain and improve their health. The WHO wastes enormous amounts of money on salaries for their bloated staff and have allowed travel expenses to increase to such a degree that actual health related programs are chronically underfunded.

95. The WHO Has Continuously Engaged in Fear-Mongering

The WHO has sounded the alarm and wasted time, effort and money by declaring fake Public Health Emergencies of International Concern (PHEICs) and are now seeking to be able to increase that activity by being able to declare Public Health Emergencies of Regional Concern (PHERC) and Intermediate Health Alerts. The fear-mongering has got to stop, and the only way to ensure that happens is for each and every nation to #ExitTheWHO and to ignore their recommendations.

96. The WHO's Recommendations Have Been Horrible

The WHO has made horrible and corrupt recommendations in support of the expanded use of pharmaceutical drugs such as opiates and they have actually been responsible for the untold millions of unnecessary deaths. Turning their recommendations into legally-binding obligations would be a mistake of epic proportion.

97. The WHO Follows a False Model of Health

The WHO is overly dependent upon the petro-chemical based practice of allopathic medicine that is designed to alter and mask symptoms with chemicals, rather than to actually improve health. The WHO does not offer a forum for clinical and scientific discussion or debate and clearly marginalizes natural healing modalities.

98. Unwillingness to Learn From Mistakes Of the Past

The WHO has repeatedly demonstrated that it is absolutely unwilling and incapable of learning from its mistakes and is destined to continue wasting money while providing horrible advice based on the corruptive influence of Big Pharma.

99. WHO Delegates are Unaccountable, Out-Of-Touch, They Operate in Secret and They Lack Transparency

The delegates to the World Health Assembly are unelected, unaccountable, unknown to the people they purport to represent and they are completely out of touch with the needs and desires of the people of their respective nations. Far too much of what is done by the WHO remains hidden. What we know is horrible. What we don't know may be monstrous.

100. The WHO has NO Authority Whatsoever Over We The People

For the most part, the World Health Organization has been an advisory organization. Their attempt to expand the scope of their authority should be seen for what it is: a worldwide POWER GRAB designed to set up a one-world governing body that is unelected and unaccountable to the people.

We the People must never allow authority to be handed over to any organization without demanding accountability.

We must never allow organizations to spend billions of dollars without complete transparency.

We must insist that each and every nation on earth #ExitTheWHO in order to chart their own course.

We the People of the world must stand together and defend our rights, our freedoms and our dignity. We must...

#[StopTheTreaty](#)

#[StopTheAmendments](#)

and

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by James Roguski

The old system is crumbling, and we must build its replacement quickly.

If you are fed up with the government, hospital, medical, pharmaceutical, media, industrial complex and would like to help build a holistic alternative to the WHO, then feel free to contact me directly anytime.

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olde reb · Writes olde's Substack · Oct 12, 2023

The WHO, as representing the U.N., and to be an instrument of Wall Street's agenda of world domination has been documented by John Perkins in CONFESSIONS OF ECONOMIC HIT MAN. Perkins built on William Blum's expose' KILLING HOPE; US MILITARY AND CIA INTERVENTIONS as confirmed by Michel Chossudovsky in GLOBALIZATION OF POVERTY AND THE NWO established globalist Wall Street financiers goal of national domination by financial intrigue.

The Federal Reserve, as a privately held FR Board of Governors, Inc., has been analyzed to have covertly skimmed \$33 Trillion in profit that legally belongs to the US government and used it for a globalist agenda. Ref; 31 CFR §375.3. This pattern of government manipulation by financiers appears to be traced as far back to the City of London financiers inducing King John to invade Normandy in 1215.

Ref; FATAL EMBRACE: [financiers] AND THE STATE by Benjamin Ginsberg. The Baron's revolt led to the Magna Carta. The current pathological megalomania appears headed toward a nuclear termination.

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Douglas Jack Writes Douglas's Substack Sep 25, 2023

James Rogulski, Thank you for your WHO Pandemic research, which I've linked to through your recent conversations on CHDTV. Although informative to a degree, unfortunately this discussion is still focused on centralized protest, lobbying & change from the top-down, which in a perverted way, only reaffirms popular dependence upon the Oligarch \$\$ powers, who have \$\$ control over all government, institutional (WHO, UN, WEF etc.) & corporate entities. Oligarch triangulated minority share control of the US-Federal-Reserve, Bank-of-England (City-of-London) & Bank-of-International-Settlements provides these few with power over a: Finance, Media, Religion, Education, Military-Industrial, Legislative, Judicial & Pharma-med COMPLEX.

HUMANITY'S ANCIENT INDIGENOUS TEMPLATE FOR ECONOMIC EMPOWERMENT

'EXOGENY' (Latin 'Other-generated') 7000 years ago in Babylon, the same lineage of Oligarchs violently captured & perverted the issue of what became a false metal-coin 'money' (Greek 'mnemosis' = 'memory'). Festering violent centralized control ignorance about people & life caused each empire to fail (eg. Babylon, Assyria, Greece, Rome, Spain, France, Netherlands, Belgium, Britain, USA, Canada, Australia). In failure, these empires continue to invade westerly, exporting 10s of millions of economic-ecological refugee rejects to colonize & establish the next military power center for issuing fake money

'INDIGENOUS' (L. 'Self-generating') OPTONS FOR LOVING TRANSFORMATON TODAY

Originally for many 10s of 1000s of years all humanity empowered the individual from the bottom up
ith an

comment

interdisciplinary set of factors caused the collapse of the Roman Empire.

<https://sites.google.com/site/indigenecommunity/a-home/3-indigenous-circle-of-life>

Time-based equivalency accounting on the String-shell Value system (eg. Wampum on Turtle-Island/N. America, Quipu in S. America, Cowrie in once indigenous Celtic & Slavic Europe, Asia, Africa, Australia & all islands) was universal RELATIONAL ECONOMY in all humanity's once 'Indigenous' (Latin 'Self-

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