WHO Convention, Agreement or Other International Instrument (WHO CA+)

The WHO CA+ features heavily at this year's World Health Assembly. This intends to provide the overarching "architecture" (governance, funding structure, supply lines etc) for health emergency preparedness, prevention and response (HEPR).

We are told to believe that emergencies are proliferating, in part due to the problems of the animal-human interface, as though this is a new way of living. In fact with improved living standards, humans have far less contact with animals than in the past, so such risks are diminishing.

The last pandemic with high mortality was the 1918-19 Spanish Flu, in which the main cause of death was <u>bacterial pneumonia</u>, during the pre-antibiotic era. Three pre-Covid pandemics since then (<u>see page 7</u>) all had relatively low impact which was likely due to the advent of effective antibiotics. It is curious then, that in the chaos of the Covid pandemic, as well as <u>erroneously encouraged</u> mechanical ventilation, antibiotic use was removed from guidance.

Table 3. Influenza pandemics in the 20th and 21st century

PANDEMIC	INFLUENZA A SUBTYPE	MORTALITY IMPACT
1918–1919 "Spanish flu"	H1N1	20–50 million deaths (<i>17</i>)
1957-1958 "Asian flu"	H2N2	1.1 million deaths (23)
1968–1969 "Hong Kong flu"	H3N2	1 million deaths (23)
2009-2010 H1N1pdm09	H1N1	123 000–203 000 respiratory deaths (22)

On the eve of the 76th World Health Assembly, WHO announced a new and "ambitious" International Pathogen Surveillance Network (IPSN). With the new pseudo-scientific ideology imposed during Covid, that mere presence of a pathogen requires enforced interventions, and the WHO CA+ including "threats" in the need for emergency coordination (page 8), this poses a very real menace to society. Every health professional knows that when you look for a potential pathogen, you can find it, but that whilst this may pose a threat in specific instances, under many circumstances such findings are incidental, harmless, and even beneficial given the interplay between pathogens and immune systems.

(g) assess global, and regional situations and may forecast the emerging pandemic threats, level of risk they possess, need for any specific preparedness programme or response options including the availability or need for new research on the health products and technologies;

The Rockefeller Foundation announced a partnership with WHO on 23 May 2023, <u>To Expand Global Pandemic Preparedness in Era of Climate Change</u>. The focus will be on genomic surveillance, pathogen detection tools and climate related threats. This should disquiet everyone given the dubious history of the Rockefeller Foundation and their involvement in <u>silencing dissent</u> during Covid. They receive multiple mentions in intelligence agent Dr John Coleman's 1993 book <u>Conspirator's Hierarchy: The Story of The Committee of 300</u> and more recently by <u>Noor Bin Laden</u> reporting from Geneva on 24 May 2023, suggesting a long history of criminal-level subversion.

1953

Iran - CIA overthrows the democratically elected Mohammed Mossadegh in a military coup, after he threatened to nationalize British oil. The CIA replaces him with a dictator, the Shah of Iran, whose secret police, SAVAK, is as brutal as the Gestapo. Operation MK-ULTRA - Inspired by North Korea's brainwashing program, the CIA begins experiments on mind control. The most notorious part of this project involves giving LSD and other drugs to American subjects without their knowledge or against their will, causing several to commit suicide. However, the operation involves far more than this. Funded in part by the Rockefeller and Ford foundations, research includes propaganda, brainwashing, public relations, advertising, hypnosis, and other forms of suggestion.

In the nine page Report by the Director-General on HEPR dated 19 May 2023, Tedros Ghebreyesus invites the World Health Assembly to consider the following, which includes the WHO CA+ as well as planned amendments to the International Health Regulations (see separate section):

ACTION BY THE HEALTH ASSEMBLY

The Health Assembly is invited to note the report and to provide guidance in respect of the following questions.

- Do the initiatives outlined adequately reflect what is required to strengthen the global architecture for health emergency prevention, preparedness, response, and resilience?
- How can the implementation of the HEPR framework be accelerated at the national level to meet the pressing needs of communities affected by health emergencies in the short term?
- What is the best approach to ensure effective coordination and coherence among the diverse partners and stakeholders required to successfully translate the HEPR framework into global, regional, national, and local impact?

A leaked <u>Draft Bureau's Text</u> of the WHO CA+ dated 22 May 2023 appears to suggest that member nations are not in agreement on a number of important points. Most notably is the option to exclude One Health from the HEPR approach. For a more detailed analysis of the apparent disarray within the International Negotiating Body, see <u>James Roguski's</u> 24 May 2023 article.