

# How We Can Stop the WHO's Horrific Pandemic Treaty

Analysis by [A Midwestern Doctor](#)

May 08, 2024

## STORY AT-A-GLANCE

- › “Preventing” pandemics is one of the most lucrative areas in medicine. Sadly, this money has incentivized “preventative” research which frequently leads to disastrous leaks and suppresses effective solutions for the pandemics that emerge
- › COVID-19 was handled so egregiously that it woke much of the public up to this gift and the pandemic-industrial complex is now facing an existential threat to its business model
- › To address this “threat” the WHO (World Health Organization) has covertly created a treaty behind the scenes which usurps national sovereignty and gives international health agencies terrifying control during “health emergencies”
- › A grassroots activist movement advocating for health freedoms has accomplished something remarkable in their fight to derail the WHO treaty and they need your help

Throughout COVID-19, the more money countries spent complying with the WHO’s guidelines for mitigating COVID-19, the more people died.<sup>1</sup> Because of this, many countries in Africa had a COVID-19 death rate which was less than 1%<sup>2</sup> of that seen throughout the Western World.

Rather than admit this, the WHO is using those deaths to justify a horrific treaty that dramatically increases its power to control each nation’s pandemic response. Since its most evil provisions (e.g., complete censorship of dissenting voices and the promotion of dangerous bioweapons research that inevitably leads to catastrophic lab leaks) have been effectively concealed by the WHO, it is necessary to understand exactly what is in it so that we can stop it.

# History of the Pandemic Treaty

Since the WHO aims to dictate how individual nations' doctors practice medicine, this has required bypassing the normal democratic process (as the growing populist movements of many nations would reject the WHO's edicts). As treaties may supercede national law, the WHO chose to push each nation into adopting a treaty that grants vast powers to the WHO.

This campaign began in November of 2020,<sup>3</sup> at G20 (the annual gathering for the 20 leading economic powers) where a proposal was put forward for a “pandemic treaty” to ensure the nations of the world would handle future pandemics in an “appropriate” manner. A few months later, in March of 2021, citing the statements made at the G20 meeting, the World Economic Forum (WEF) echoed this call.<sup>4</sup>

Since that time, a series of policies and regulations has gradually been put together by the WHO, the UN, the World Bank, the US, the EU and other multinational organizations (with the assistance of the other globalist organizations like the UN and the Rockefeller Foundation) to remedy the “deficiencies” in our pandemic response.

Those policies and regulations in turn are part of a “pandemic treaty” and amendments to existing International Health Regulations. By virtue of both documents being international treaties, they must then be obeyed by each signatory country.

The pandemic treaty hence contains a wish-list of each thing the globalists have been working for decades to attain.

## Climate Change and Pandemics

Since the “war on climate change” and the “[war on pandemics](#)” represent two of the greatest sources of wealth and power for the global elite, a lot of work has been put into conditioning the public to be terrified of the existential risk each allegedly poses.

The pandemic treaty seeks to link both of these together by arguing that “climate change” is the root cause of the disastrous pandemics,<sup>5</sup> and that this “problem” thus

necessitates giving the globalists control over how we interact with the environment. For example, they argue habitat loss brings humans in contact with deadly diseases.

However, while this is a huge ecological issue, there is very little evidence tying it to pandemics,<sup>6</sup> as outside of biolab leaks, consequential animal to human disease transmissions are quite rare.

Exclusive: Destruction of wildlife and the climate crisis is hurting humanity, with Covid-19 a 'clear warning shot', say experts

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Nature is sending us a message with the coronavirus pandemic and the ongoing climate crisis, according to the UN's environment chief, Inger Andersen.

## One Health

One Health began in 2004,<sup>7</sup> at an international (globalist) conference where the idea was put forward that public health needed to be expanded into an umbrella which could control (and profit off) every aspect of our lives.

For example, "climate change" was folded into public health under the rationale that the dire environmental threats we faced necessitated making "ecological health" a core facet of public health. "One Health," in turn, was merged with the notion that the problems we now faced were so complex that they should be decided by (corrupt) panels of multidisciplinary "experts."

One Health is now embedded within governments and international organizations on every continent. The CDC has a One Health office<sup>8</sup> (as do many other US agencies such as the USDA,<sup>9</sup> the Fish and Wildlife Service, the FDA and the NIH). Many other large international organizations (e.g., the UN, FAO, OIE, and UNICEF) and globalist groups

(e.g., the Rockefeller Foundation<sup>10</sup> and the WEF<sup>11</sup>) are also aggressively promoting the One Health message.<sup>12</sup>

Many billions in grants have been given globally to establish “One Health” as a pillar of public health throughout the world, despite the fact it has not yet done anything that benefited health.

Rather, everyone who made a lot of money off COVID-19 (even Pfizer<sup>13</sup>) is promoting One Health because enshrining this incredibly vague declaration within the legal and public health system provides them with the means to enact whatever policies benefit them. Advancing “One Health” is thus a key theme throughout the WHO’s pandemic treaty.

## **Protecting Pandemic Products**

Since the pandemic racket’s primary source of revenue is selling proprietary products to “mitigate” the next pandemic, the treaty protects that market.

This is done by reaffirming the use of (incredibly profitable) emergency use pharmaceuticals, which, as we saw throughout COVID-19, were a disaster. Since an Emergency Use Authorization (EUA) can be issued with minimal or no testing of a drug or vaccine, that eliminates the lion’s share of the costs in bringing a new pharmaceutical to market.

Rather, with an EUA, the manufacturer can roll out the pharmaceutical product absent a demonstration of its safety and effectiveness – but only if the manufacturer, government, WHO and everyone else involved is shielded from liability for injuries that result.

The WHO’s pandemic treaty in turn makes it very clear<sup>14</sup> each signatory nation is expected to push such EUA products onto the market and has stipulated that immunity from liability **be given to the manufacturers**.

Likewise, since the bioweapons industry stands to lose a great deal of money if public protests outlaw their reckless research, the treaty also protects that business. Similarly, the WHO's new Biohub initiative<sup>15</sup> does as well:

The COVID-19 pandemic, along with other recent outbreaks and epidemics, has underscored the importance of rapid and broad sharing of pathogens for effective surveillance and the timely development of medical response products such as diagnostics, therapeutics or vaccines. Currently a great deal of pathogen sharing is done bilaterally and on an *ad hoc* basis, which can be inefficient and risks both leaving some countries out and not covering important, emerging pathogens.

The world needs a system to rapidly, safely and efficiently share biological materials with epidemic or pandemic potential, and expertise to conduct thorough risk assessments that can be rapidly shared with all countries, and in time, to develop medical countermeasures that can be equitably shared with all countries in need.

The WHO BioHub System will offer a reliable, safe, and transparent mechanism for WHO Member States to voluntarily share novel biological materials, without replacing or competing with existing systems. Sharing of biological materials with epidemic or pandemic potential will be done through one (or more) of the laboratories designated as a WHO BioHub Facility.

This will allow WHO Member States and partners to work in a better and faster way, to advance research, and to be more prepared for health emergencies as well as ensure fairness in access to benefits arising from this sharing.

## Combating 'Misinformation'

One of the biggest problems the pandemic cartel now faces is that because of the audacity of their vaccine lies, much of the population no longer trusts them. Because of this (and their unwillingness to admit their mistakes and reform their actions), the only remaining option available to them is to outlaw all dissenting voices.

A recent UNESCO report<sup>16</sup> outlines global measures to curb speech, creating an "Internet of Trust" focusing on "misinformation," "disinformation," "hate speech," and "conspiracy theories." The pandemic treaty in turn emphasizes countering false information during health events (e.g., it defines an "infodemic" as excessive misleading information during disease outbreaks).

**Note:** *Ironically, much of what our authorities told us throughout the pandemic was later proven to be deadly misinformation, while at the same time, they suppressed the critical scientific evidence which, had it not been censored, would have saved millions of lives. Orwellian doublespeak in turn permeates the pandemic treaty (e.g., it frames censorship as "protecting human rights and fundamental freedoms").*

## Usurping National Sovereignty

One of the major debates in international law is the question of when exactly an international treaty supersedes national (or state) law.

Since the underlying purpose of the WHO's pandemic treaty is to provide a mechanism to bypass populist resistance to the WHO's abhorrent edicts, the treaty is attempting to supersede local law, and to do so in secret so local legislators don't realize what has been agreed to until the treaty's "emergency" pandemic provisions kick in. For example, to quote an international lawyer and a former WHO physician scientist:<sup>17</sup>

*"A rational examination of the texts in question shows that:*

- 1. The documents propose a transfer of decision-making power to the WHO regarding basic aspects of societal function, which countries undertake to enact.*
- 2. The WHO DG (Director General) will have sole authority to decide when and where they are applied [remember that they apply to both 'pandemics' and 'other health hazards'].*
- 3. The proposals are intended to be binding under international law."*

These powers include controlling where people can travel, forcing them to quarantine, implementing contact tracing, mandating treatment or vaccination and prohibiting competing treatments.

Furthermore, many of the treaty's provisions also violate existing laws (e.g., mass surveillance which violates basic medical privacy protections, taking away intellectual property rights<sup>18</sup> from members of signatory nations, and requiring nations to share potential pandemic pathogens with other nations and the WHO).

## **Meryl Nass the WHO Treaty Wrecking Ball**

**Meryl Nass MD** is a quiet and unassuming country doctor<sup>19</sup> who lives in an inconspicuous house in rural Maine and loves to garden. That's fitting since she has

been a fierce thorn in the medical-industrial complex's side for decades (e.g., she was one of the leading activists who opposed [the military's devastating anthrax vaccine](#)).

During the COVID era, Meryl began treating many of her COVID patients with repurposed drug protocols (e.g., hydroxychloroquine) and continued to do so even after her state moved to protect business interests by cracking down on anyone using off-patent therapies to treat COVID-19. Meryl spoke out both against this and later against the experimental vaccines.

The medical industry in turn decided they needed to make an example out of her, and chose to do so by suspending her medical license. The charges and justification for doing so were so ridiculous that thirteen members of Maine's legislature (shortly joined by nine more) formally protested the medical board's conduct. The license suspension ended up backfiring because losing the ability to practice medicine freed up a lot of Meryl's time.

## **Door to Freedom**

On June 2nd 2023,<sup>20</sup> while she was fighting to protect her medical license, Meryl decided that she needed to do something about the WHO's pending power grab and started the WHO pushback project, which she initially funded with \$25,000 of her savings,<sup>21</sup> along with the money she has received from Substack subscriptions.<sup>22</sup> Since that time, her fledgling nonprofit became known as "[Door to Freedom](#)" and has gradually received more and more outside support.

Meryl, in turn has done dozens of podcasts and numerous grueling tours to address parliaments around the world about the pandemic treaty (e.g., on a recent trip she briefed 5 different parliaments<sup>23</sup>). These efforts have resulted in numerous countries' parliamentarians being convinced their countries should resist the pandemic treaty and the amended International Health Regulations.

In turn, many political parties are now vocally opposed to it (e.g., Germany, the Netherlands, the Philippines and Estonia).<sup>24,25,26,27</sup> Furthermore, some countries are even

beginning to pursue charges against those who were complicit in the COVID-19 disaster (e.g., Italy investigated the former health minister for homicide<sup>28</sup> because he covered up vaccine deaths, and Slovakia's Prime Minister is investigating the entire COVID response<sup>29</sup>).

Meryl has also spoken to our elected officials and at Congressional symposia such as the one hosted by Senator Ron Johnson,<sup>30</sup> while Door to Freedom has provided legal support<sup>31</sup> to elected officials who wish to use their position to oppose the pandemic treaty. These are monumental political shifts and it is unbelievable this organization was able to pull this off in a matter of months.

## **What You Can Do to Help**

There are three major things each of you can do to help stop this abomination in its tracks. First and foremost, we need to spread awareness about this issue so that it doesn't stay hidden in the shadows. Discuss it whenever you can with those close to you and share articles about it within your network. Very few people would support the pandemic treaty if they actually understood what was in it, so let them know!

Second, Senator Ron Johnson's bill S444 and Rep. Tom Tiffany's bill HR1425 would require that the Senate review the WHO treaties and would prevent their ratification unless 2/3 of the Senate approved.

Because 49 Republican Senators are already cosponsors, the treaties are almost guaranteed to be stopped by the Senate if we can pass these bills. There are many elected officials who are willing to listen to public complaints about the WHO. It is critical to contact your elected representatives to make them aware of what is happening.

Most recently, those senators sent a formal letter to Joe Biden stipulating he must withdraw from the treaty or send it to the senate for ratification (where it cannot be passed).





States are rejecting the WHO as well because the US Constitution reserves healthcare as a state authority. At least one house has passed a bill rejecting the WHO's jurisdiction in Oklahoma, Tennessee, and Louisiana. Ask your state legislators, attorney general or governor to reject the WHO's authority in your state as well. Like our senators, they need your voice and support.

Third, please consider supporting their work either by directly donating to Door to Freedom like I have or by [supporting Meryl's Substack](#). They are operating on a shoestring budget but nonetheless getting a lot done (something you rarely see in the nonprofit world).

Time is of the essence. The amended International Health Regulations and pandemic treaty will be voted on<sup>32</sup> at the World Health Assembly in May 2024.<sup>33</sup> Because of this, we have about one month left to hit the critical mass to stop this (and have that vote fail).

We are at a moment in history where we could easily go down two different paths with profound implications for generations to come – our society may end up becoming enslaved to the pandemic-industrial complex, but we also have a once in a lifetime opportunity to break up a predatory industry which has victimized generations of human beings around the world in its relentless pursuit of power and profit.

It's the grassroots efforts of activists like Meryl Nass alongside independent outlets like this one that light a spark that makes it possible to transform the world. Let's all do what we can to raise our voices and fight for health freedoms.

**Author's note:** This is an abridged article. For those of you who want additional information, links, and a more detailed analysis please view the full article [here](#).

## A Note From Dr. Mercola About the Author

A Midwestern Doctor (AMD) is a board-certified physician in the Midwest and a longtime reader of Mercola.com. I appreciate his exceptional insight on a wide range of topics and I'm grateful to share them. I also respect his desire to remain anonymous as he is still on the front lines treating patients. To find more of AMD's work, be sure to check out [The Forgotten Side of Medicine](#) on Substack.

## Sources and References

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- <sup>1</sup> [The Forgotten Side of Medicine, February 7, 2024](#)
- <sup>2</sup> [Johns Hopkins, March 10, 2023](#)
- <sup>3, 4, 23, 26, 27, 28</sup> [Meryl Nass Substack, December 20, 2023](#)
- <sup>5</sup> [The Rockefeller Foundation, May 23, 2023](#)
- <sup>6, 7, 14, 29, 31</sup> [Meryl Nass Substack, January 28, 2024](#)
- <sup>8</sup> [CDC](#)
- <sup>9</sup> [USDA](#)
- <sup>10</sup> [One Health Commission](#)
- <sup>11</sup> [World Economic Forum August 18, 2022 \(Archived\)](#)
- <sup>12</sup> [Tropical Medical Infectious Diseases, June 2019; 4\(2\): 88](#)
- <sup>13</sup> [Pfizer, January 27, 2023 \(PDF\)](#)
- <sup>15, 32, 33</sup> [WHO](#)
- <sup>16</sup> [The Epoch Times, November 28, 2023](#)
- <sup>17</sup> [Brownstone Institute, December 11, 2023](#)
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- <sup>19</sup> [Meryl Nass Substack, August 25, 2023](#)
- <sup>20, 21</sup> [Meryl Nass Substack, June 2, 2023](#)
- <sup>22</sup> [Meryl Nass Substack, September 20, 2023](#)
- <sup>24, 25</sup> [Meryl Nass Substack, November 30, 2023](#)
- <sup>30</sup> [Senator Ron Johnson, November 8, 2023](#)