#### Speaker 1 (<u>00:04</u>):

Welcome to the Bill Walton Show featuring conversations with leaders, entrepreneurs, artists and thinkers. Fresh perspectives on money, culture, politics and human flourishing, interesting people, interesting things.

#### Bill Walton (00:24):

At a meeting of the World Health Assembly, starting on May 27th, just less than three months from now, the World Health Organization will be meeting and they're meeting to adopt two agreements, one amends the existing International Health Regulations. The other, a new agreement called the Pandemic Agreement, is ostensibly tended to prevent and guide responses to future pandemics. Now, what happens is that the World Health Organization has been an advisory organization, and what they're attempting to do here is make what their edicts are mandatory. They want to require the US in 195, supposedly sovereign states, to basically seed their authority in any health situation or anything that might even be climate related to the World Health Organization director general, that would give him the authority to declare unilaterally public health emergencies of international concern. This is of concern to us because it's a wide open invitation to dictatorship and totalitarianism. I'm going to touch just the tip of the iceberg here because I've got two incredibly interesting people, Reggie Littlejohn and Meryl Nass. Both have long impressive resumes. Reggie's founder of the... Help me Out.

Reggie Littlejohn (01:56):

Well, Women's Rights Without Frontiers.

Bill Walton (01:57):

Women's Rights Without Frontiers. You've founded so many things. I lost my-

Reggie Littlejohn (02:00):

Right. I'm the co-founder of the Sovereignty Coalition, and I'm also launching a new initiative called the Anti Globalist Alliance, which I haven't told you about yet.

#### Bill Walton (02:08):

We're going to find out about that. Meryl Nass, she's pretty well-educated. She started out with a BS from MIT and then went on to be a doctor and has a very, very storied career. She was the one that first discovered how Ebola... Correct?

Meryl Nass (<u>02:26</u>):

Anthrax.

## Bill Walton (02:28):

Anthrax was part of biological warfare in Africa and has since gone on to do a lot of work most recently with the COVID and the vaccine crisis that we've been through. So Reggie, Meryl. Reggie, why don't you start with the Sovereignty Coalition, because what we really want to dig into today is the World Health Organization's threat to our sovereignty, not just ours, but every other country in the world.

Reggie Littlejohn (02:56):

So as you mentioned, I am the founder and president of Women's Rights Without Frontiers, where for many, many years I was confronting forced abortion in China. I was able to see the way that the Chinese Communist Party exercises its totalitarian authority. I became very concerned to see that coming to the United States through the World Health Organization and through the COVID response. So, Frank Gaffney and I co-founded something called the Sovereignty Coalition because the way that the World Health Organization is proposing new amendments to the International Health Regulations and the Pandemic Treaty would significantly damage or destroy our national sovereignty and also our personal medical freedom. So that's why we co-founded the Sovereignty Coalition. Meryl is a member of the Sovereignty Coalition.

Bill Walton (<u>03:50</u>): Well, and Meryl founded Door to Freedom.

Meryl Nass (<u>03:52</u>): Yes.

Bill Walton (03:52):

You've got a fabulous website which explains in great detail what the World Health Organization is up to, what's at stake and what we've got to do about it. You want to talk?

# Meryl Nass (04:02):

Yeah. So I found out two years ago that the World Health Organization was trying to convert itself into the world dictator on health. In fact, take this odd concept called One Health, which was invented about 20 years ago, and says that you can't actually consider human health in isolation, but you must include the health of animals, plants, and ecosystems in any consideration of human health. How that crazy concept has been used is to basically allow the director of the World Health Organization to declare emergencies based on climate or biodiversity loss or pollution or anything that impinges on this one health idea. Because when you add ecosystems, you're talking about everything in the world can be brought into the basket and placed under that person's jurisdiction.

## Bill Walton (05:03):

Well, there's even something called the One Health Commission, I'm sure you guys know about it. What they say is One Health is an integrated, unifying approach that aims to sustainably balance and optimize the health of people, animal and ecosystems. So what they're doing, I guess, is they're putting human beings on the same level and playing field as plants and animals and the environment. What that means, as you're pointing out, let me put a... It means the World Health Organization can be in charge of everything. If they declare a climate emergency, that's a health issue. If there's a gun incident, they can use that as to declare a health emergency. So essentially, anything that happens on the planet, they can declare a health emergency and bring about their remedies.

## Meryl Nass (05:54):

Yes. As long as these two documents, or one of them, gets passed in May.

Bill Walton (<u>05:59</u>):

Well, let's talk about that. Reggie, you went to Yale Law School, you could probably help us with the documents and you also were a litigator. So we've got the existing document, which is being amended, and that has a lot of egregious stuff in it. Then we've got the new pandemic agreement.

## Reggie Littlejohn (<u>06:17</u>):

Okay. So the International Health Regulations in their current form were passed in 2005. So last year they floated some amendments and it was a long process, but right now they've got about 305, 306 different amendments that they are considering. We have not seen an updated draft of this for over a year. I think it's 13 months at this point. So all of these amendments are in there, and we don't know which ones they're currently considering or what they're not.

## (<u>06:50</u>):

But the bottom line is that in these amendments, number one, they have stricken the word non-binding so that the intent is that these will be legally binding. They have also said that they want to have the power to mandate what medications a person can have, what medications a person cannot have, what medications a person must have. So if there's another pandemic, they will be able to say what a doctor can prescribe and not prescribe. So it's like having Tedros Ghebreyesus, the director general of the WHO, sitting in your doctor's office with you. They also want the power to mandate vaccines. So vaccine mandates, forced vaccination, mask mandates, quarantines, lockdowns. The WHO is seeking the power to tell our country how we have to handle a pandemic and also the power to be our personal physician.

## Bill Walton (07:59):

So the WHO, let's set the stage here, it's basically an agency related to the United Nations. It's a subsidiary and affiliate, whatever. It's a United Nations type organization. Its funding. Let's talk about where its funding comes from. Essentially, United States historically has been the largest donor. But the thing that makes this different is it has individual donors. It can be people or corporations or whatever. It turns out the second-largest donor is the Bill and Melinda Gates Foundation. We've all seen Bill Gates trotting all over the world trying to tell us how we ought to be living. Meryl, do you want to take that and tell us about Bill, and no longer Melinda, but Bill?

## Meryl Nass (08:47):

So there's a two-year budget for the UN, and the budget is roughly \$4 billion. It was more during the first couple of years of the pandemic. It collects dues, but dues only account for 15% of its budget. 85% of the budget comes from voluntary contributions, which may be from nations or the Bill and Melinda Gates Foundation or organizations that Bill Gates has created, such as Gavi and CEPI, or organizations that the Bill and Melinda Gates Foundation funds, and pharmaceutical companies and the United States voluntarily is giving even more than it gives in dues. So the WHO's first, second, and third, fourth, fifth top donor varies from year to year, but the United States is usually number one. When Trump pulled out, the Bill and Melinda Gates Foundation was number two.

## Bill Walton (09:44):

But these are donors with an agenda. You go on the website and you look at the organizations. It's hard to tell, but it turns out the pharmaceutical companies, which have got a big stake in mandating vaccines and whatever treatments are, they're big funders of the WHO.

Meryl Nass (10:00):

Yes.

Reggie Littlejohn (<u>10:01</u>):

Right. So the point is that there's a massive conflict of interest here. You've got donors who will stand to profit hugely if there's a pandemic and if there is a vaccine in which they're invested to address it. So in an interview at Davos, I think a couple of years ago, somebody asked Bill Gates, "What are the finances behind this?" He said, "Well, the Bill and Melinda Gates Foundation has given about \$10 billion to vaccine research, and we have enjoyed a 20 to one return on investment." 20 to one return on investment. So they have every reason in the world to jab every arm in the world because they're making a ton of money off of it. They're funding the World Health Organization, so the World Health Organization is beholden to its donors. So in what world do we trust them to say whether or not we need a vaccine?

Bill Walton (11:04):

Tell us about Tedros, our president. Where'd he come from? Who is he and who's behind him?

Meryl Nass (11:11):

Yeah, so Tedros is an Ethiopian from the Tigray party, the National Liberation Front.

Bill Walton (11:22):

He's a Marxist.

#### Meryl Nass (11:23):

Which is a Marxist party. They controlled Ethiopia for over 30 years. They're no longer in power. They've made war on some of the other tribes. His group is considered a terrorist organization by the State Department of the US. He personally is said to have been responsible for covering up three cholera epidemics in Ethiopia and preventing aid from getting to these other tribes. He is sponsored by Bill Gates and the Chinese Communist Party. The British government did not want him to be the head of the WHO, but there is horse-trading going on. It seemed like he was good for the United States at the time. There is no open process. There's an opaque process where the director general is chosen and he's now in his second term.

Bill Walton (<u>12:19</u>): How long is his term?

Meryl Nass (12:20):

Each term is five years. So, he's been there six years.

#### Bill Walton (12:23):

So he is got four more left in this, but we don't know how he got re-upped in the first place. It's all behind the scenes. I think it's one of the points we need to make is that the WHO has been doing this in deep, deep secret to try to get these amendments changed. This is not something they want any publicity about. The Biden administration has been working with them to get these changes in place. What group is that? Is that Health and Human Services that manages our relationship Meryl Nass (12:52):

Yeah. The State Department is involved as well, and USAID

Bill Walton (12:56):

Essentially we've got our State Department pushing a document which seeds United States sovereignty to this international organization. They're doing it in secret.

Meryl Nass (13:07):

And lying to the Congress about it in a hearing in December.

Bill Walton (<u>13:11</u>): How did they do that? What's the story?

Meryl Nass (13:13):

It was the Wenstrup COVID Response Committee, and they brought in three government officials from HHS, from State and USAID. Loyce Pace is the primary person who works as the head of global health at HHS, and I guess she is our chief negotiator. So the three of them were asked, is sovereignty being seeded? They all said absolutely not. They misrepresented what these documents were about. Really surprisingly, only Marjorie Taylor Greene really put their feet to the fire.

Bill Walton (13:51):

That's stunning. Give me a lawyerly reading of this. What does it mean when you replace the word may with shall and you do it over 100 times?

Reggie Littlejohn (14:02):

Right. It means that it's required, and we don't even have to have a lawyerly interpretation because the World Health Organization itself came out with a document saying that they consider these things to be legally binding. So just one thing I wanted to say, because we never got into the Pandemic Treaty. The Pandemic Treaty works together with-

Bill Walton (<u>14:22</u>): We're going to do. Right now.

Reggie Littlejohn (<u>14:25</u>):

All right. Okay. The Pandemic Treaty works with the International Health Regulations. It incorporates the International Health Regulations by reference four times. In both documents they have sections on surveillance and censorship. So in the Pandemic Treaty in particular, they say that it would obligate nations to surveil on the basis of One Health, human health, animal health, plant health, and the environment. In other words, every aspect of human life on earth is going to be surveilled.

#### Bill Walton (14:59):

They require all the countries that are party to this agreement to do the surveilling.

Reggie Littlejohn (15:04):

Exactly. Then there's censorship. So the censorship piece of it is really, really important. They are requiring nations to manage infodemics. What's an infodemic? An infodemic is simply too much information. It could be true information, but if it will reduce the trust in the government, then it's considered to be a threat. So then they want you to manage it.

## Bill Walton (15:32):

Well, is that like CISA's malformation? They've got misinformation, disinformation and malformation. Malinformation is something that's true, but it doesn't go along with the narrative?

## Meryl Nass (15:41):

We don't like it.

# Reggie Littlejohn (<u>15:41</u>):

Yeah, it's true. It's like an inconvenient truth. Okay. Right. So in other words, you could be saying something that's absolutely true. Like, for example, there is human-to-human transmission, which the Chinese Communist Party was lying about in the beginning of COVID and which the World Health Organization parroted and put all over the world. If you said, no, there is human-to-human transmission, back in the beginning, that would've been malformation or an infodemic because even though it's true, it's something that reduces people's trust in the WHO narrative. Nations will also be required to combat, which is the military term, combat misinformation and disinformation through social listening, meaning they're going to be at least watching over our social media accounts and possibly listening to our phone calls. I don't know what social listening is.

Bill Walton (16:29):

Well, they probably already are doing that.

# Reggie Littlejohn (<u>16:30</u>):

They probably already are. So this surveillance and censorship is going to be carried out through digital IDs, which is a whole nother kettle of fish.

# Bill Walton (16:43):

This is Bill Walton. I'm here with Meryl Nass and Reggie Littlejohn. We're talking about the World Health Organization's scheme essentially to control not only our healthcare, but control virtually every aspect of our life. If this is the camel's nose under the tent, we need to stop. We got to stop this before it becomes real. Meryl, you went through an incredible experience with COVID, and you early on identified that this came from a lab. This is based on your previous experience with anthrax. Can you talk about that?

# Meryl Nass (<u>17:24</u>):

Well, yes. So, I've been a student and writer about biological warfare for 35 years. So it was apparent to me that the most likely source of this SARS-2 epidemic was a lab leak. I don't know how to, it was just apparent. These things don't just erupt out of nowhere. You need to have a series of mutations over a long time before a virus is easily transmissible to people, if it came from an animal. This one just jumped out of nowhere and was highly transmissible in humans and turned out to be adapted to humans better than any other animal. That doesn't happen in nature. There were other reasons. SARS viruses are

designated by the US government as select agents, which are agents that can be used or create pandemics. So it was already in a class that was thought to be where biological warfare agents come from.

#### Bill Walton (18:31):

Well, you were the first person in the world to investigate a pandemic. In this case it was in Zimbabwe, before that it was Rhodesia, using anthrax and biological warfare.

#### Meryl Nass (18:44):

Right. So yeah, I showed that the world's largest anthrax outbreak in both humans and cattle was in fact a biological warfare event. I published that paper in 1992.

#### Bill Walton (19:01):

Well, let's talk about the COVID is on everybody's mind now. The World Health Organization that wants to have this total power. Let's talk about their track record during COVID.

#### Meryl Nass (19:14):

Everything pretty much that the WHO recommended was wrong. When they occasionally made a mistake and put something on their website, for instance, about China's success with hydroxychloroquine or ivermectin, they would have to then take it down. They recommended all the wrong non-pharmaceutical interventions like masks and social distancing and locking people into their apartment buildings and all sorts of things that just don't work, but destroy the economy, destroy education, destroy people's businesses. Even though the Chinese studied hydroxychloroquine in 20 different clinical trials very early on, because it had been established by the Chinese and by Americans and Europeans, that it worked very well for SARS-1 after the SARS-1 epidemic. They shared that information in the very beginning in February, March of 2020. But then they too, shut it down, shut that information down like the rest of the developed world.

#### Bill Walton (20:17):

What was the relationship between the WHO and the CDC during this? Were they joined?

#### Meryl Nass (20:22):

Very tight. Yes, they agreed with almost everything. I think the CDC tended to control the WHO. Say, okay, change that, then the WHO would flip.

#### Reggie Littlejohn (20:34):

So with respect to China's role in this, the WHO adopted basically the China model. The China model of lockdowns, mass mandates, vaccine mandates, quarantines. In China, the quarantines were so severe that they were actually soldering people into their apartment buildings.

Bill Walton (20:56): What? Soldering?

Meryl Nass (<u>20:57</u>): Yeah, locking them in. Reggie Littlejohn (20:59):

Locking them in. But soldering, okay. I don't know if you've ever seen the clip. It might be useful to splice it in, but there's a clip on the internet of people in Shanghai who have been locked into their high rises who were told that they would be able to get food and they had no access to food, and they're just standing on their balconies and just shrieking into the night. So there's all these high rises-

Bill Walton (21:22):

I remember that.

## Reggie Littlejohn (21:23):

... and just shrieking into the night. That's the end result of the China model. They are pushing that out to the world through the World Health Organization. So the China model depends very strongly on the social credit system and on digital IDs. So the World Health Organization in the International Health Regulations and the Pandemic agreement, they're using this now disease X, which is supposed to be 20 times more lethal than COVID. It was actually just a hypothetical disease. As a pretext to roll out these digital IDs.

## (<u>22:07</u>):

The World Health Organization is working now with the European Union to roll out digital IDs all over the world. So they're saying, well, we need these because disease X is coming, and we need to be able to track everyone and see who's sick and see who's been vaccinated, et cetera. But if you go onto the World Economic Forum website and just look up digital ID, you'll come up with a chart about all the different uses of a digital ID. So these are all the things that you will be required to have a digital ID in order to do. In order to access healthcare, you'll have to have a digital ID. In order to have a bank account, in order to carry on online transactions, in order to travel, in order to vote, in order to pay your taxes.

Bill Walton (22:52):

Now, is that embedded in this document? Is that just the implications of the document?

Reggie Littlejohn (22:55):

No. This is on the World Economic Forum website.

Bill Walton (<u>23:02</u>): Oh, well, they're all in on this.

Meryl Nass (<u>23:03</u>): Right. There's all different bits of information in different places. So theory-

Bill Walton (<u>23:07</u>): Again, your website is?

Meryl Nass (<u>23:09</u>): My website is doortofreedom.org. Bill Walton (23:11): That has all this on the website. You've outlined in detail what this is about.

Meryl Nass (<u>23:17</u>): Well, we have some of it. We've focused on the WHO.

Bill Walton (<u>23:20</u>): I'm sorry. Keep...

Meryl Nass (23:21):

So the European Union had a digital vaccine passport/ID. They gave it to the WHO a few months ago when it expired. The WHO is rolling it out, and we've been told it's going to be digital money as well as digital ID. We've been told the WHO that there's unfortunately a billion people, mostly in Africa, who don't have a proper ID, and therefore they don't have benefits, like they can't cross borders or they can't access pensions, or we don't even know what these so-called benefits are that these people in Africa who don't have a digital ID are suffering from. But it's this terrible lack of a digital ID that's harming a billion people, so we have to roll it out for everyone. Of course, we know that it is the key to the social credit score and to a level of control never before seen.

# Reggie Littlejohn (24:25):

So, I'd like to just elaborate on that. So what this means is that if it's tracking all these different aspects of your life, and if you have to have this digital ID even to pay your taxes or vote or even have a bank account or carry on online transactions or own a cell phone and a computer, what it means is if you step out of line, they can shut this down. So let's say that you refuse to be vaccinated or you refuse to be boosted. Just like in China, if you are out of line in China, they will just shut off your digital ID and you will not be able to travel, and you will not be able to carry on online transactions, et cetera, and you'll be paralyzed. If people think that this can't happen in North America, it already did happen with the truckers when the Trudeau administration shut down the truckers protest, which was over vaccine mandates, by shutting truckers off from their credit cards and their banks accounts.

# Bill Walton (25:26):

Well, didn't Letitia James recommend that for the truckers outside New York who wouldn't deliver into the city, that we had to shut down their bank accounts, seize their bank accounts?

Meryl Nass (25:33): She may have had.

Bill Walton (<u>25:34</u>): That friend of Liberty, Letitia James. Yeah.

Meryl Nass (25:36):

Yeah. They also had their insurance policies canceled, and in some cases, their tires were slashed.

Bill Walton (25:42):

## They did or threatened?

Meryl Nass (<u>25:44</u>): I think they did.

Bill Walton (<u>25:44</u>): Okay.

Meryl Nass (25:44):

Yeah. They did not want them to be able to drive away. They wanted them impounded. Apply maximum harm.

Bill Walton (25:51):

Now, you paid a big personal price for your stance. You were for... My doctor is for ivermectin. I halfway took it, but that was forbidden. You recommended it, and what happened?

## Meryl Nass (26:11):

Yeah, so there were many doctors who were prescribing hydroxychloroquine and ivermectin and vitamin D and zinc and steroids and other things for COVID that were not recommended by the government. There was a massive attempt to scare all the doctors not to get out of line by taking a few of them and making us poster children. So they actually took the chief medical officer of Hawaii and made him a poster child. They went after him. They went after a doctor who was giving hydroxychloroquine to prisoners in, I think, Virginia. I'm not sure which state it was.

## (<u>26:50</u>):

But members of Congress, including Elizabeth Warren, were saying, "How dare he do this?" When these are safe drugs. They're over the counter in most of the world. Hydroxychloroquine is over the counter in France until January of 2020 when they made it a prescription drug. These are drugs that have been used to prevent malaria in Africa. I've taken the drugs myself for many decades, six decades. Ivermectin has been around for almost four decades, and again, is used preventatively by hundreds of millions of people in Africa without a prescription. Merck was the inventor. Merck has donated over a billion doses to Africans. Then when the pandemic came out, Merck said, "Well, we don't know if it's safe or not."

Reggie Littlejohn (<u>27:44</u>):

Right. Well, the reason for that is that-

## Bill Walton (27:46):

You, well, Merck also set up a research lab just outside Beijing. I think it's a couple billion dollar research lab, R&D lab. So, that tells you a lot about Merck.

Meryl Nass (<u>27:56</u>): Yes.

Reggie Littlejohn (27:57):

So why would Merck and other companies that know that hydroxychloroquine and ivermectin are safe, why would they suddenly say, even though they've been making it and providing a billion doses to Africa, why would they suddenly say, "Oh, it's not safe. We don't know whether it's safe."? In my opinion, it's because pharmaceutical industry wanted to get the vaccine through emergency use authorization, and they can't get that authorization if there is another treatment that is effective and available. So, how many millions of people died because they never got hydroxychloroquine and ivermectin? So to push through this EUA so that the one solution would be the vaccine, and whose idea was that? Could it be some of the people who are benefiting from these vaccines?

Meryl Nass (<u>28:49</u>): The pandemic is over, it's still hard to get them.

Bill Walton (<u>28:53</u>): If you look at Pfizer financials... What? You still can't get them.

Meryl Nass (<u>28:53</u>): Still can't them. Very difficult.

Bill Walton (28:55):

So the World Health Organization is really tempting to codify and make mandatory all the things that were supposedly advisory, now they want to make sure they get this locked down. Didn't France just pass a law that says if you speak out against the government mandated or recommended, I'll put that in quotes, vaccines in France, that's a felony and you can go to jail?

Meryl Nass (<u>29:21</u>): Yes.

Bill Walton (29:23):

I feel like I dreamed that. Is that actually happening?

Meryl Nass (29:26):

I think there's one more step, but I'm not sure that has to go through. But yes, there on their way to making that law.

Bill Walton (29:32):

Because there's a lot of alarmists and we're all very concerned about the loss of freedom. But there's sometimes these apocryphal stories, I thought that might be one. But that's actually happening?

Reggie Littlejohn (29:40):

No, it's happening. Thank God in the United States, we have the first amendment, so we can fight back against that. But if we have an administration that's trying to ram it down our throats, what needs to happen is we need to build the political will to resist. Through shows like this, where you are helping us get the word out about what's really going on here, because if all they do is they listen to the mainstream media-

Bill Walton (<u>30:09</u>): You're not going to hear this.

Reggie Littlejohn (<u>30:10</u>):

... they're not going to hear it, and they're going to think that it's reasonable and it's not reasonable.

Bill Walton (30:15):

So let's circle back to the agreements that are being put in place now. We call them a treaty, but they don't want to call it a treaty. Why?

Reggie Littlejohn (<u>30:27</u>):

Because they don't want it to go through the treaty process. So there's been at least three, maybe four iterations of this proposed, I call it a treaty, but they will call it an agreement. They'll call it an accord. They'll call it a convention. They'll call it a framework. They'll call it anything but a treaty because they don't want it to have to go through the treaty process.

Bill Walton (<u>30:45</u>):

The treaty process means Senate approval?

Reggie Littlejohn (<u>30:48</u>):

Exactly. The Senate would have to approve it. If it's not a treaty, then it can just be executed by executive order, which is easy for them right now because Biden's in office.

Bill Walton (<u>30:57</u>):

Well, the Senate doesn't want to take a vote on this. They're deliberately pushing this off. They don't want to take responsibility. You don't hear many, if any, senators saying, we want to declare this to be what it is.

Meryl Nass (<u>31:09</u>):

So, Ron Johnson twice-

Bill Walton (31:11):

Well, Ron does.

Meryl Nass (<u>31:12</u>):

... put a bill in the Senate, and it was, I think once an amendment and once a bill. It was voted down on strict party lines, 49 to 47 is what I was told. That requiring the pandemic treaty to go through the US Senate. So the senators themselves decided they didn't want to deal with it. It was a hot potato.

Bill Walton (<u>31:31</u>):

What's the name of the person in HHS that's doing this? What's her name?

Meryl Nass (<u>31:34</u>): Loyce Pace. Bill Walton (<u>31:35</u>): Lois Pace?

Meryl Nass (<u>31:37</u>): Loyce.

Reggie Littlejohn (<u>31:37</u>): Loyce. L-O-I-C-E-

Meryl Nass (<u>31:38</u>): L-O-Y-C-E.

Reggie Littlejohn (<u>31:39</u>): L-O-Y-C-E.

Bill Walton (<u>31:39</u>): So we need to put a face on this.

Meryl Nass (<u>31:41</u>):

Yes, we do.

Bill Walton (<u>31:42</u>):

We need to do a Saul Alinsky and make this personal. Well, you think about it, people talk about government, this agency that there's, there's always people. There's always a person who's making these things happen. She's leading a group of people inside government. And who's in the State Department? Do we know whether they're-

Meryl Nass (32:03):

What's his name? Nkengasong. A Ghanaian, from Ghana, a man who I guess has US and Ghana citizenship.

Bill Walton (32:12):

Sure, why not?

Meryl Nass (32:13):

Was head of the African CDC. He's the State Department person. And a famous author of Indian extraction who really, I don't know how he found himself in this position. What is his name? I'll think of it. Sorry.

Bill Walton (<u>32:30</u>):

We'll figure. This is Bill Walton. I'm here with Meryl Nass and Reggie Littlejohn, and we're talking about how eager the Biden administration is to seed US sovereignty to the World Health Organization and what we ought to do about it. So you guys, you're leading the Sovereignty Coalition along with our good friend Frank Gaffney. What's our line of action here?

### Reggie Littlejohn (<u>32:51</u>):

Well, we have actually had some really great successes. I'll tell you about it, but I would just say everybody should go on to sovereigntycoalition.org and sign the declaration there. But when we started, which was just about a year ago now, the whole issue of the World Health Organization and the effort to defund it was there are a couple of bills, but they were languishing in committee. Then we did an action, a campaign to get people to send emails to their legislators. Then within six weeks, there was a congressional press conference where 18 members of Congress got up and said, "We need to defund the World Health Organization." Some of them even said, it is just basically an arm of the Chinese Communist Party. So, that was huge.

#### (<u>33:47</u>):

Then a couple of those members were members of a subcommittee of the Appropriations Committee. That subcommittee defunded the World Health Organization, but it needed to pass through the entire Appropriations Committee. So we did another action and got people to send emails and call their legislators. The morning that that vote was taking place, each member of the House Appropriations Committee had 5,500, that is 5,500 emails in his or her inbox saying, "Defund the WHO." The Appropriations Committee defunded the WHO. They actually sent us a video of two of the leaders of that in the Congress thanking the Sovereignty Coalition for educating them on this, which is the basis of their action. So then we did another action, and the house passed a bill where defunding the WHO and requiring any treaty would have to go through the Senate. That passed, but we're still in the appropriations process, and it still has to pass through the Senate. So, we still need people's help on this.

#### Meryl Nass (34:49):

Right. That was the Foreign Operations bill, and it passed the entire house in September. Unfortunately, it's unlikely to pass the Senate unless we can make a lot of noise in the next few weeks because it's about to go through the Senate.

Bill Walton (35:05):

Of course, Mitch McConnell is going to be a big champion of this, I'm sure.

Reggie Littlejohn (<u>35:10</u>): Right.

Bill Walton (<u>35:11</u>): He's a little compromised.

Meryl Nass (<u>35:14</u>): Yes. Chinese wife.

Bill Walton (35:15):

Chinese wife. They call him the first family of China, I think, in the shipping business.

Meryl Nass (35:24):

Yeah. But we did, that was an amazing bill. It defunded UNESCO, it defunded not all of the UN, but some UN agencies. It totally defunded the WHO and it defunded the Climate Czar.

### Bill Walton (35:42):

So if this passes the World Health Assembly, it's now March 2024. This happens in the last week in May 2024. It takes 50% of the 195 countries to redo the-

## Reggie Littlejohn (<u>36:00</u>):

The amendments to the International Health Regulations.

## Bill Walton (36:02):

But then it takes two thirds to do the pandemic treaty. So if those pass, what's the likelihood of them passing?

## Reggie Littlejohn (<u>36:09</u>):

Oh, okay. Well, two things. Number one, I think that if they do come up for a vote, they probably will pass. Something that the WHO people need to realize. The WHO is one country, one vote. So it's not like the United States has any extra votes. Our vote is not worth any more than the smallest country in the world. But my contention is that this vote needs to be delayed because under their own rules, under the International Health Regulations, I think it's Article 55 says that they have to submit the final form of the amendments or any major agreement four months in advance. That date passed on January 27th.

## (<u>36:52</u>):

So they are continuing to negotiate these, and they're probably going to ambush the World Health Assembly maybe a week or two before it meets, saying, okay, here it is. This is what we're going to vote on. They might even continue negotiating on it all the way up, which gives no opportunity for the world and for civil society to comment on it. That is against their own rules. So my contention is that they need to delay that vote. Now, if they delay the vote until the World Health Assembly in 2025, that will give us more time to educate people about the [inaudible 00:37:25] of this.

## Bill Walton (37:25):

But who's going to make them delay the vote? How do we-

# Reggie Littlejohn (<u>37:26</u>):

Other countries. Okay, one of the things that I'm going to be concentrating on is to try to get other countries to send something in saying, we believe that this vote needs to be delayed because these amendments were not submitted to us by January 27th.

## Meryl Nass (37:42):

So, I would say that actually the WHO doesn't follow its own procedures as specified in its constitution, and in the International Health Regulations in many ways. I've collected about a dozen different ways. For example, many of the proposed amendments to the International Health Regulations are not suitable as regulations.

## (<u>38:04</u>):

So the Constitution of the WHO tells you that regulations can only have this limited scope and that things that are broader than that scope have to be treaties, you see? But they didn't put them in the treaty because it's easier to pass them if they're in the regulations. It's a 50% versus the two-thirds vote, and the regulations are already there, so you're only amending them. You're not creating a new

document. So, that's one thing. They don't like to have votes. They're supposed to have a vote of the entire World Health Assembly, the 194 members, and then there's two other members of the regulations that aren't part of the WHO. So they all should be voting. But in fact, two years ago when they voted on amendments, there was no vote. There was a committee. They had a bogus consensus procedure, and the World Health Assembly never voted. When 12 members of the European Parliament asked the WHO, where's the evidence that a vote, as required, took place in 2022? Tedros has not answered them, and it's three months later.

# Bill Walton (<u>39:09</u>):

So let's dream that Trump wins and he's president and he's inaugurated in January 2025. We know he exited the WHO funding before, going to do it again. Is this agreement enforceable, if we've got a new president?

# Reggie Littlejohn (39:33):

I think that they would have a very hard... Okay, you're supposed to give a year's notice, and then you're supposed to continue paying dues during that year and blah, blah, blah. If Trump just says, "Hey, I'm withdrawing. I'm not paying dues. I'm done with you guys." I don't know how they're going to force the United States to do that. The danger is when you have an administration like the one that we have now that actually is driving these amendments. So let's say that they pass in May. So then the Biden administration has between May and November to start implementing them. You can do a lot of damage in that amount of time.

## Bill Walton (40:06):

Well, this is just like a border. They're just giving up American sovereignty willy-nilly to anybody. But this is another reason we'd like to see Mr. Trump president so we can exit this thing.

## Meryl Nass (40:19):

Absolutely. So we can exit both documents. There's something called the Vienna Treaty of Treaties that tells you, look, if a country is really unhappy with the way things are going with a treaty, they can make an announcement and get out. Now, Trump was following a procedure that we had actually added in as a reservation to the WHO Constitution when we joined in 1948, which said we have to give a year's notice and we have to pay up our dues in order to get out. So he had started that procedure, and then he was thrown out of office basically after six months and never was able to get to the one-year limit. But he probably could have gotten out quicker if he'd used this Treaty of Treaties loophole.

## (<u>41:06</u>):

If we follow what the documents actually say, we would have 10 months to issue a reservation against these amendments after the Biden administration passed. So if we didn't do the Treaty of Treaties, Trump, or anyone else who was president, could until March, get out of the amendments. But once we have signed up to the treaty, it goes into effect for our country in a month. According to the last draft, the latest draft, which just came out a couple of weeks ago, of the treaty, you've got to be in for a minimum of two years or three years.

## Bill Walton (<u>41:46</u>):

So they're trying to lock us up before the election, trying to get this done, get it done, get it done, get it done.

Reggie Littlejohn (<u>41:53</u>): Precisely what they're doing.

Bill Walton (41:55):

We've got to wrap up, but I wanted to do something bigger picture. Meryl, you probably know. Pandemics are actually quite rare.

Meryl Nass (<u>42:04</u>): Yes.

Bill Walton (<u>42:06</u>):

Even COVID, you can argue whether that was a true pandemic. Maybe it was. How would you assess the real risk of COVID?

Meryl Nass (42:18):

Well, the WHO has changed the definition of pandemic many times. You'll find out that in the International Health Regulations, they're now calling it a public health emergency of international concern and not even using the term. Okay. So, depending on how you define it. I personally believe that yes, this was a new disease. We never saw it before because it was due to a bio-engineered virus with many different components that were all designed to make us sick or to get it into cells more easily. So, this was a new disease. It did spread across the world because people did not have immunity to it.

Bill Walton (<u>42:54</u>):

Was it a bioweapon?

Meryl Nass (<u>42:56</u>):

I believe it was a bioweapon, yes. So then you have... Now, it was created, I think, to be a bioweapon. Was it released as a bioweapon deliberately, or did it leak out of a lab? That, we don't have the answer to.

Bill Walton (<u>43:12</u>):

So what would you have done? When this hit the United States, what measures would you have taken if you were in charge of our public health?

Meryl Nass (43:22):

Well, first off, the CDC got in the way of us having a test that actually worked. So it took about three months to have a test. That happened because the CDC said, you can only use our test, and we're only going to test people if basically we're absolutely sure they already have it, like they've been to China and they have a classic case. So that's what they did in January and February. They tested only a few hundred people in the whole country and let it spread widely. So I believe there was an effort to make it spread.

# (<u>43:53</u>):

Finally, in March, everyone had had enough, and the CDC was told, you're not in charge of this anymore. The FDA said, okay, we will start approving tests to be run if you give us the paperwork. But the paperwork took a week or two to complete. So by the middle of March, FDA then said, if you have a test, start using it, send us the paperwork later. We've got to start testing people and figure out who has what. But by that time, it was all over the country. Now, I was aware in February that hydroxychloroquine was probably going to be very effective. I became aware of several papers that showed that. I had read the Chinese scientists had actually told a group of doctors at Johns Hopkins that it worked. They had published about a 50-page brochure about everything they found to be reasonably effective and made it available to us, translated it into English, and we didn't follow it. So, the FLCCC had good guidelines starting from late spring of 2020, and doctors around the country were not allowed to utilize those guidelines. They were told what to do.

Bill Walton (45:07):

But what about the things that were most disruptive for us personally, the masks, the social distancing, the lockdowns? Did we need them?

Meryl Nass (45:15):

We didn't need any of them. None of them worked. In studies done before, and subsequently, it's acknowledged that they don't work. Now, it may be that wearing an N95 mask in a hospital when you've been trained how to wear it and you've been fit tested, they probably work under that setting. I used them for 40 years in hospitals. But people going out and buying an N95 mask and reusing it and not knowing how to wear it correctly, and they take it on and off.

Bill Walton (<u>45:45</u>):

And they all fit too loose.

Meryl Nass (45:46):

It didn't do anything. Wearing the mask does one thing, it stops you from spitting on someone else. If you're coughing and globs of saliva or wet material from your nose comes out, that's what it does. So if you put a simple surgical mask on a person who is producing large droplets, that can be a good thing. That's the only thing it's good for.

Bill Walton (46:11):

But the-

Reggie Littlejohn (<u>46:14</u>): It's a splash guard.

Meryl Nass (<u>46:14</u>): Yes, a splash guard.

Reggie Littlejohn (<u>46:15</u>): I said it's a splash guard.

Bill Walton (46:16):

Okay. But the World Health Organization in this agreement basically outlines some of the things, the steps they could take, which would include masks, would include lockdowns, would include the vaccine passports, ability to keep people in or out of a country. The whole totalitarian regime is right there.

## Reggie Littlejohn (<u>46:40</u>):

They want to be able to mandate it around the world or to any country that they want so that they will tell the United States what we must do. They will be able to tell us, you need to have a mask mandate, you need to have a vaccine mandate, you need to have quarantines, you need to have lockdowns. The World Health Organization will be able to tell us what to do.

#### Meryl Nass (46:59):

Yeah. The thing is, people say, "Well, they can't make you comply." The answer to that is, A, it's the Biden administration where this came from originally, so they have every intention of complying. But, B, what isn't specified in the documents in any detail is that they're setting up a compliance committee, an implementation committee, a focal point in every country to assess how well the country is obeying, a new secretariat and a new conference of the parties, all of which are going to make their own rules. So once you sign up to the treaty, you're going to have to then live with what all these different committees do.

#### Reggie Littlejohn (47:36):

Right. It's a blank check. It's just basically, we trust you do what you want to do. We don't know what rules you're going to create.

Meryl Nass (<u>47:46</u>):

We don't know what it's going to cost.

Reggie Littlejohn (<u>47:47</u>):

We don't know what it's going to cost. We don't know anything about it. But just go ahead, here's a blank check from the United States and the world.

Bill Walton (<u>47:53</u>):

Both of you separately or together, tell us what we ought to do now?

Meryl Nass (47:57):

The best thing is to get out of the WHO and just say-

Bill Walton (<u>48:00</u>):

Period. Exit.

## Meryl Nass (<u>48:01</u>):

... this is going in the wrong direction. The WHO doesn't do anything for the United States. How have we benefited from that organization? It's a conduit. So we give them funds and then they are supposed to help fix developing nations. Well, the developing nations aren't any better off than they were in 1948. So they haven't really done anything for them, and they haven't done anything for us. So, getting out is

the thing. There are other charities that perform all of the charitable functions of the WHO and can do them better.

Reggie Littlejohn (<u>48:31</u>):

Right. That's the global picture. The immediate picture is I would urge people to go to sovereigntycoalition.org and sign our most recent action item, which is designed to help this defunding of the WHO to make it through the Senate. So that's like an immediate action that people can take.

Bill Walton (48:50):

Fantastic. Reggie Littlejohn, Meryl Nass, thanks for all this. You'll be back.

Meryl Nass (48:55):

One more thing.

Bill Walton (<u>48:56</u>):

We're going to keep up this fight here because I want full disclosure, I'm a member of the Sovereignty Coalition.

Meryl Nass (49:01):

Yeah. But no, we're rolling out a program right now to get attorney generals and governors and state legislatures on board about this, because based on the first, sorry, the 10th Amendment, states actually have Sovereignty for Health, not the federal government.

Bill Walton (49:20):

So where do we go to find that? Is that on your website?

Meryl Nass (<u>49:24</u>): So, it's rolling out today.

Bill Walton (<u>49:25</u>): With the Sovereignty Coalition-

Meryl Nass (49:28):

It will be on the Door to Freedom website and on the Sovereignty Coalition website. We are asking Attorney Generals to sign a letter to the president saying, our state has no intention of complying with this. You cannot turn over the healthcare of our citizens to the WHO because you don't have it, we have it, and we're keeping it.

Reggie Littlejohn (49:49):

Right. So that's lucky for people who live in conservative states where the AG will sign that thing. For those of us living in very progressive states-

Bill Walton (<u>49:58</u>): Time to move. Reggie Littlejohn (<u>49:59</u>): Yeah. Well, that's something to consider. That's something to consider.

Meryl Nass (<u>50:05</u>):

Yeah. I think both Trump and Bobby Kennedy will get us out of this mess.

Bill Walton (<u>50:11</u>): Good. I like that. So we're going to help him.

Meryl Nass (<u>50:14</u>):

Yes.

Bill Walton (<u>50:15</u>):

You guys are going to help. I'll be chipping in what I can do. So anyway, thanks for joining. This has been the Bill Walton Show, and you can find us in all the major podcast platforms, Rumble and YouTube, and Substack now and also on CPAC Live on Monday nights. If you like this and you want to be involved, send us a note via email to our website, or you can comment on Substack. Let us know what else you'd like us to cover. As always, we're going to take it in and then try to make it happen. So thanks for joining. Hope you found this edifying. I know I did.