



Written by [Rebecca Terrell](#) on July 22, 2022

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Lethal UN Healthcare

American sovereignty is in the crosshairs of her own leaders, recently dodging a bullet that would have officially ceded healthcare policymaking to the United Nations. The Biden administration proposed regulatory updates intended to empower the UN's World Health Organization (WHO) to mandate medical care across the globe. Though the White House could not garner enough support for its totalitarian proposals among delegates at the World Health Assembly's 75th annual meeting in May, WHO members are crafting an agreement that would effectively accomplish the same thing.



AP Images

If passed, the Pandemic Treaty will green-light the WHO to declare public health emergencies at its whim, and to impose dictates in any of its 194 member countries without the consent of those involved in the supposed crisis. That's a chilling thought, considering the myriad excuses available for making such a declaration. For instance, the UN Intergovernmental Panel on Climate Change, backed by string-pulling foundations of leftist billionaires, incessantly stokes irrational fear over alleged catastrophic health impacts of global warming. The *New England Journal of Medicine*, one of the world's most influential publications, announced in June the launch of a new article series on "fossil-fuel-driven health harms" and recommends "incorporating a climate lens into medical training."

Eco-hysteria is only the tip of the iceberg. In April of last year, Biden said the United States is facing "a gun violence public health epidemic," and the U.S. Centers for Disease Control and Prevention (CDC) declared racism a "serious public health threat." An empowered WHO could exploit these or countless other ploys to impose Covid-style restrictions and mandates that strip individual liberties and expand Deep State power.

Population Control

The foundation of these concocted scourges is the decades-running bogeyman of overpopulation. The 1973 dystopian film *Soylent Green* exemplifies typical population propaganda. Set in the year 2022, the movie depicts a world debilitated by too many people, ushering in overconsumption and catastrophic man-made global warming. Massive food shortages drive prices sky high, and the only remedies are government subsidies to families of euthanasia volunteers and artificial meal replacements from the Soylent corporation. The hellish movie climaxes with the hero's grisly discovery that the firm's top-selling item, Soylent Green, is made from the corpses of euthanized people.

Despite that and other ludicrous exaggerations in the eco-thriller, *The Washington Post* declared earlier this year that *Soylent Green* "got a lot right" after all. "Our overpopulated planet is experiencing catastrophic climate change," the author opined, without bothering to mention hyperinflation and food



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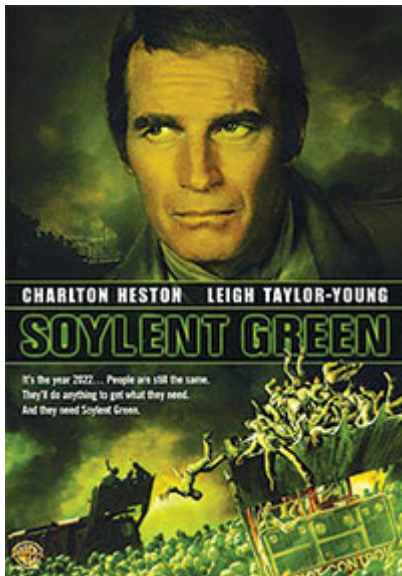
shortages that we are actually facing this year, or the fact that both are caused by destructive government policies, not overcrowding.

Overpopulation is the hackneyed claim of elitists who erroneously believe the world would be a lot better off with fewer people in it. Paul Ehrlich's 1968 book *The Population Bomb* warned of mass starvation and postulated that the Earth could not indefinitely sustain more than two billion people, a number already surpassed in the 1920s. He continued spouting such outrageous bilge in subsequent years, prompting economist Julian Simon to bet him in 1980 that by the end of the decade, the Earth would not run out of resources to sustain humanity. Simon won.

Population Decline

It was a sure bet because rationally minded economists acknowledge that demographic decline is hardly a harbinger of prosperity. History confirms that when populations increase, standards of living improve and people live longer. Poverty is associated with oppressive government, not with a growing populace.

However, experts unencumbered by leftist ideologies warn that the world is indeed on the cusp of a population crisis — one of decline. The 2008 documentary *Demographic Winter* and its 2009 sequel *Demographic Bomb* feature researchers, including a Nobel laureate and various government officials, who explain that even though global population is still growing, credit goes to advances in medicine and longer lifespans, not to people having more children. In fact, they warn of the unprecedented phenomenon of below-replacement birthrates in many countries and the inevitable consequences of an aging population: economic contraction, higher taxes, and strained healthcare and pension systems.



Propaganda picture: The 1973 dystopian film *Soylent Green* predicted that in 2022 overpopulation would usher in catastrophic man-made climate change and massive food shortages.

Leftist reviewers labeled the films as disoriented rants, but recent statistics prove otherwise. A 2020 U.S. Census Bureau report revealed that without immigration, the U.S. population would be in a nosedive and unable to maintain the country's market position on the international stage. The bureau also says that middle-aged adults currently outnumber children, and estimates that adults over age 65 will exceed kids by the year 2034. Countries ahead of us on this same demographic trajectory include



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Japan, Germany, Italy, France, Spain, and most eastern European nations. Their populations are aging even more rapidly than that of the United States and should begin shrinking within a few years.

Contraceptive Vaccines

Nevertheless, the United Nations unrelentingly plugs the myth of an overpopulated world careening toward self-destruction. Its depopulation agenda began in earnest in 1969 with formation of the UN Population Fund (UNFPA) to “promote universal sexual and reproductive health and rights,” buzzwords for the inhuman institutionalization of abortion, contraception, and sterilization.

Next, in 1972, came the first world conference on the environment, which launched the UN Environment Programme. The conference’s *Stockholm Document* makes the unsubstantiated assertion: “The natural growth of population continuously presents problems for the preservation of the environment.” To “face these problems,” conferees recommended that the WHO “should promote and intensify research endeavor in the field of human reproduction, so that the serious consequences of population explosion on human environment can be prevented.”

The agency wasted no time. It had already targeted women in developing nations with birth-control programs; now it turned to contraceptive vaccines to round out its depopulation portfolio. Through its Task Force on Vaccines for Fertility Regulation, WHO invested hundreds of millions of dollars on “reproductive health” research over the next 20 years, according to its annals. Contributors included UNFPA, the United States, various European nations, and private entities such as the Ford and Rockefeller foundations.

Naturally, pro-life groups objected, but opposition also hailed from an unlikely quarter. A 2003 text entitled *The Vaccine Book* relates that feminists expressed concern in the late 1980s that anti-fertility vaccines might be forced on women without their consent. (As we’ll see, their suspicions would prove prophetic just a few years later.)

Undeterred, WHO pressed on, with payoff in the early 1990s when its scientists made a breakthrough discovery. Leading researcher Gursaran Pran Talwar bragged in the 1994 *Proceedings of the National Academy of Sciences USA* that his team had developed a birth-control vaccine for family planning.

They had combined human chorionic gonadotropin (hCG), otherwise known as the “pregnancy hormone,” with standard tetanus and diphtheria inoculations. The mixture makes it impossible for a fully immunized woman to carry a baby to term. Typically when a woman becomes pregnant, the developing embryo soon begins producing hCG and cannot survive without it. In fact, that is how pregnancy tests work; they detect the chemical in a mother’s blood or urine. In normal circumstances, hCG does not trigger an immune reaction.

However, Talwar found that a subcellular component of the hormone, the “beta subunit” (β -hCG), when combined with tetanus or diphtheria vaccines, tricks a woman’s immune system into treating hCG as a foreign invader. Should she become pregnant after receiving the combo shot, her antibodies attack the hormone, causing a spontaneous abortion.

Forced Sterilization

Within months of Talwar’s boast, the nonprofit Human Life International (HLI) discovered β -hCG in vials from WHO’s 1994 tetanus vaccination campaign in Mexico. HLI suspected foul play, as related in one of

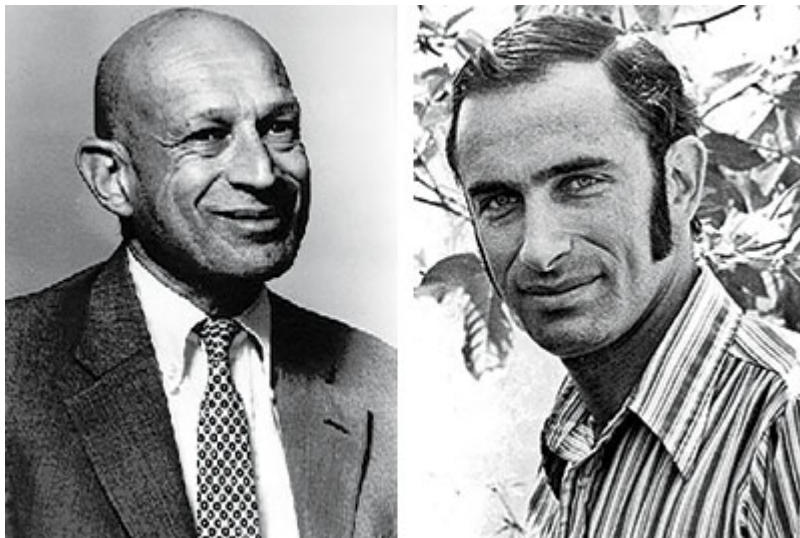


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its 1995 newsletters, because WHO targeted only women of child-bearing age, and because the vaccine series involved several shots over a short period of time, unlike the customary tetanus regimen of one shot every five to 10 years.

HLI's Mexican bombshell raised red flags with its affiliates in Nicaragua and the Philippines. WHO had recently conducted tetanus campaigns with equally odd parameters and no mention of the β -hCG (or its abortifacient potential) that doctors found in independently tested vials. According to HLI, Tanzania and Nigeria were likely victimized as well. Though WHO denied wrongdoing, repeat investigations confirmed the presence of β -hCG in other samples, and vaccinated women tested positive for anti-hCG antibodies.



Safe bet: In 1980, economist Julian Simon (left) bet population-alarmist Paul Ehrlich (right) that the cost of particular raw materials would decrease over the next decade. Simon won the wager.

Heaping further outrage on Philippine targets of the covert sterilization plot, news emerged that the tainted tetanus vaccines had never been licensed in their country, as required by law. The nation's Bureau of Food and Drugs excused itself, saying WHO certification was good enough, and the Philippine Department of Health declared the vaccines safe without any testing.

Nevertheless, Catholic and pro-life groups won a court order in 1995 to halt the anti-tetanus campaign "because the vaccine had been laced with β -hCG," according to *The Philippine Star*. Unfortunately, three million women were already fully inoculated.

That same year, WHO turned to Kenya, but by then the country's Catholic bishops were wise to UN wiles. They demanded independent testing. Instead of submitting samples, the agency canceled its campaign without explanation — for the time being.

Kenya

Nearly 20 years later, Bishop Paul Kariuki, chairman of the Kenya Conference of Catholic Bishops' health committee, appeared before the nation's parliament to report that a new anti-tetanus campaign, launched in 2013 by WHO and the UN Children's Fund (UNICEF), was the same wolf in sheep's clothing of two decades prior.

"To our surprise, the Ministry of Health confirmed it had not tested the vaccine, having trusted it, since



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it originated from WHO,” said Kariuki, as reported by Religion News Service. Less-gullible members of the country’s Catholic Doctors Association (KCDA) sent vials to accredited labs at Lancet Kenya, the University of Nairobi, and Nairobi Hospital. Half of the tests came back positive for β -hCG, and the bishops urged a nationwide boycott of the campaign.

KCDA spokesman Dr. Wahome Ngare, an obstetrician/gynecologist, noticed that the Kenya protocol precisely mimicked WHO’s previous operations in Mexico, Nicaragua, and the Philippines. In a statement published in 2014 in *Kenya Today*, he explained how contraceptive vaccines work, saying that “the mother has to receive 5 injections spread 6 months apart, and the full effect is noted 2-3 years after the last injection.” The schedule he described was precisely that of WHO’s tetanus program. Ngare cited research verifying that women who had received the full round in the Americas and Philippines were rendered “permanently infertile.”

However, Kenya’s health minister, James Macharia, defended the vaccines, attesting to the credibility of WHO and UNICEF. “It’s a safe, certified vaccine,” he told BBC News at the time, explaining that the reason women were targeted was to protect their offspring from a fatal bacterial disease. Maternal and neonatal tetanus is linked to unhygienic childbirth in developing countries, killing tens of thousands of infants each year, according to UNICEF statistics. However, if a mother is immune, her baby will be, too.

“We were already giving tetanus injections to all the pregnant women,” Ngare explains in *Infertility: A Diabolical Agenda*, a new documentary by the vaccine watchdog Children’s Health Defense (CHD). If what Ngare claimed was true, why did WHO want to inoculate all women, pregnant or not?

Logically, the national parliament called for new tests from a different accredited research lab. “We actually found that some of the vaccines were contaminated with beta hCG,” said AgriQ-Quest director Fredrick Muthuri. He also tested samples of the standard tetanus vaccine from government stockpiles. None of those contained any anti-fertility antigen, but they were not used in the WHO/UNICEF campaign.

Kenya’s health ministry cried foul, claiming that defective testing had produced false positives. Dr. Nicholas Muraguri, director of medical services, who had commissioned the tests, asked Muthuri to “alter the results to reflect that the vaccines were safe to be administered.” Muthuri refused. A short time later the Kenya Accreditation Service suspended AgriQ-Quest’s license.

But government’s thirst for revenge was yet unsated. Health officials inundated media with “safe and effective” jargon and launched a vicious smear campaign against the Catholic doctors. A statement from the Ministry of Health, broadcast on Kenyan television, dubbed KCDA’s accusations as “baseless pronouncements not backed by any scientific evidence.” Medical journals pressured scientists to retract peer-reviewed, published papers that supported the doctors’ evidence, as recounted by [RetractionWatch.com](#). Kenya’s medical board issued gag orders against Ngare and KCDA chairman Dr. Stephen Karanja, threatening their licenses should they violate the injunction.



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Nefarious agenda: Doctors discovered covert contraceptive agents in tetanus vaccines administered by the World Health Organization in Mexico, Nicaragua, the Philippines, and Kenya. *(Photo credit: Newscom)*

Government officials even accused KCDA of intentionally contaminating the vials that tested positive for β -hCG. Muthuri rallied to the doctors' defense, explaining that the antigen that AgriQ-Quest found was chemically bonded to the tetanus toxoid in the vaccine, and could not have simply been mixed in post-manufacture by pro-life hucksters.

Moreover, he told CHD of another discovery his lab stumbled upon: Vaccines from government stockpiles tested negative for β -hCG but curiously were stamped with the same batch number and manufacturer label as vials from the WHO/UNICEF campaign. During testing, a label fell off one of the stockpile bottles. Underneath was an original label, bearing an entirely different batch number and manufacturer name. "So it just means that somebody actually had something big to hide," Muthuri said.

In his statement, Ngare wrote that the evidence "proved right our worst fears; that this WHO/UNICEF campaign is not about eradicating neonatal tetanus but is a well-coordinated, forceful, population control, mass sterilization exercise using a proven fertility regulating vaccine."

The national parliament agreed after reviewing KCDA's original data in 2017. During a press conference from Kenya's Capitol Hill, then-opposition leader Raila Odinga announced that the doctors were right. He called WHO's stealth sterilization maneuver "one of the most callous human rights abuses committed against innocent girls and women in Kenya, whose only crime was to trust the state."

Infertility Pandemic

Antoninah Mutinda, founder of the Christian nonprofit People of the Way International, is one of the victims of WHO's furtive population-control scheme. "My journey with the miscarriages was very difficult," she told CHD. After receiving WHO's tetanus inoculation, she lost three babies, unable to maintain pregnancy beyond 10 weeks. Testing showed high levels of anti-hCG antibodies in her system. "To imagine that a system somewhere, some people somewhere, are behind my inability to carry pregnancy to term.... That is a diabolical agenda."

It is also widespread. "According to the WHO, up to 63 countries may have been targeted" with the agency's covert abortion serum, relates CHD. For the rest of the world, Dr. Karanja issued this warning:



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“When they are through with Africa, they’re coming for you. Keep your children ready. They will come for them, and they’ll come for you.”

Interestingly, WHO’s tetanus-elimination campaign has been going on since the late 1980s, but in more than three decades has not made much headway in eradicating the disease. The agency admitted in a 2020 scientific brief that maternal and neonatal tetanus “remains a major public health problem.”

Infertility is an even greater concern. Both Ngare and Karanja identified it as a “major problem in gynecology in Africa.” The medical journal *Aging* reported in 2019 that the “global disease burden of infertility has been increasing throughout the period from 1990 to 2017.” It has become so common that WHO calls it a public health issue affecting some 186 million individuals, and medical associations across the globe recognize June of each year as World Infertility Awareness Month.

Its impact is everywhere. World Bank data reveal plummeting fertility rates in Mexico, Nicaragua, the Philippines, and Kenya, and in most countries across the globe. From a high of 5.1 births per woman worldwide in 1964, the rate has plunged to 2.4 in 2020, with no expectation of recovery. Even India is in the red; *Business Standard* reported in May that the total fertility rate has fallen “below the replacement level of fertility of 2.1 children per woman.”

Our Future

WHO plays a definitive role in this crisis of population decline. The agency brags on its website about helping women “avoid pregnancy,” mostly through abortifacient methods, and estimates that in 2017 alone its programs prevented 308 million pregnancies. Moreover, it declares that “abortion is health care” — though the procedure is only successful when a baby is murdered — and it exults that abortion claims some 73 million lives worldwide annually. Keep in mind that these disclosures do not account for its covert vaccine casualties.

So, should we cede healthcare authority to WHO? “They’re not fit for a haircut, let alone running global health policy,” quipped Andrew Wakefield, director of the CHD *Infertility* documentary, in a roundtable discussion following its premiere. “The WHO should not be in charge of anything.”

Joining his conversation was a panel that included CHD’s chief science officer Dr. Brian Hooker, physician and author Christiane Northrup, and pediatrician Liz Mumper. They focused on fertility issues related to the SARS-CoV-2 shots, and cited numerous studies, including Pfizer’s original clinical trials, that evince an increase of 80 percent or more in miscarriage rates, fetal malformations, and stillbirths post-Covid jab. The CDC’s Vaccine Adverse Event Reporting System reveals 10 times as many fertility reports when compared to baseline from years prior to the Covid vaccine rollout.



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Eternal vigilance: Dr. Wahome Ngare, a member of the Kenya Catholic Doctors Association, suspected nefarious goals behind a UN tetanus vaccination campaign in his country. Lab tests discovered contraceptive agents hidden within the jabs. *(Photo credit: [facebook.com/wahomengare](https://www.facebook.com/wahomengare))*

The panel also expressed grave concerns that Covid inoculations administered to children could adversely affect their fertility in the future. Nevertheless, in June the U.S. Food & Drug Administration granted emergency use authorization to both Pfizer and Moderna Covid vaccines for infants as young as six months, despite a dearth of clinical safety trials and the drastically low risk Covid poses to children.

WHO has eagerly joined in promoting the jab for both kids and adults through the COVAX initiative, a collaboration that includes a star-studded lineup of population-control advocates: UNICEF; the Coalition for Epidemic Preparedness Innovations (CEPI); and Gavi, the Vaccine Alliance. CEPI was launched in 2017 by Klaus Schwab's World Economic Forum, the organizational mastermind of the "Great Reset" to usher in the dystopian "Fourth Industrial Revolution" and a drastic reduction in the world's population. Depopulation cheerleader Bill Gates co-founded CEPI and leads the funding for both that organization and Gavi.

Considering these groups' admitted aims, it is certainly not outside the realm of possibility that the Covid jab is yet another stealth depopulation scheme, and that future "pandemics" will afford fresh opportunity toward the same end. Any nations that sign the proposed Pandemic Treaty shouldn't be surprised.

Particularly disturbing for Americans is that the Biden administration already tried to implement the treaty provisions in one fell swoop, without input from Congress — indeed, with barely a press release announcing its intent. The United States should consider itself duly warned. In the meantime, we should defund and exit the WHO.

Rebecca Terrell is a senior editor of The New American.



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