



January 22, 2024

Submitted electronically

The Honorable Susan Kim  
Principle Deputy to the Assistant Secretary  
HHS Office of Global Affairs Leadership  
200 Independence Avenue, SW  
Washington, DC 20201

**Re:           Public comment on “the Implications of Access and Benefit Sharing (ABS) Commitments/Regimes and Other Proposed Commitments Being Considered Under a WHO Convention, Agreement or Other International Instrument on Pandemic Prevention, Preparedness and Response”**

**FR Doc:     2023-28341**

Dear Principle Deputy Kim,

Action Requested of HHS

On December 22, 2023, the U.S. Department of Health and Human Services (HHS) published a notice inviting comment on the implications of various aspects of the latest draft of the World Health Organization’s (WHO) Pandemic Preparedness Agreement (Draft Agreement) now being negotiated by the various member states of the WHO. This comment is submitted by the Family Research Council (FRC) in Washington, D.C.

We call on HHS to reject the Draft Agreement in its entirety and reconsider the need for a pandemic agreement. The Draft Agreement cannot be salvaged with amendments or edits. Furthermore, any agreement that the Biden administration signs must be submitted to the U.S. Senate for its consideration, advice, and consent. The staggering obligations, new policies, and array of new institutions created by the Draft Agreement require the submission of the agreement to the Senate for consideration as a treaty.

A Contrasting Vision from that Presented by the Draft Pandemic Agreement

FRC is a non-profit organization whose vision for America is “a prevailing culture in which all human life is valued, families flourish, and religious liberty thrives.” FRC believes, as do all orthodox Christian believers, that human beings alone among the creatures of the Earth were created in the image and likeness of God. Accordingly, we are opposed to any constitution, treaty, statute, or policy that

diminishes or erases the inherent right of humans to life, from conception (*i.e.*, fertilization) to natural death.

We believe this vision for human flourishing is facilitated best by more localized political structures of representative, constitutional nation-states and their subsidiary government layers (*e.g.*, provinces, counties, and municipalities). FRC rejects any analytical framework wherein the best responses to any future pandemic could be promulgated by an amalgamation of world government structures. Although FRC recognizes that there are benefits from international cooperation between nations, international organizations, and NGOs, the Draft Agreement only pays lip service to state sovereignty as it seeks to create new political arrangements that transfer power from individual member states to global institutions and sub-structures, most notably the WHO.

Finally, *the* most important check on political, intellectual, scientific, and medical tyranny is having the ability to seek the truth and disseminate one's understanding of scientific fact without fear of punishment. As Christians, we seek to learn, understand, and proclaim the Truth of the Lordship of Jesus Christ. For many of those who founded the American republic, that same desire lay at the core of the need for the enactment of the First Amendment to the Constitution, which guarantees Americans the right to worship freely, to express and promulgate those beliefs, to make arguments, to assert facts and theories, and to engage in all manner of debate.

This legal, political, and social environment that supports and defends the right to freely exchange ideas and debate one's beliefs is essential to promoting health based on scientific evidence—*especially during a pandemic*. A free internet, along with other unlicensed means of communication, is the best vehicle for publicly challenging and testing false orthodoxies and narratives in medical and scientific fields. The abject failures of public health organizations like the WHO, the U.S. Food and Drug Administration (FDA), the U.S. Centers for Disease Control (CDC), and the U.S. National Institutes of Health (NIH) during the recent COVID-19 pandemic indicate that government-promulgated health narratives should be challengeable and open to public debate. The loss of that freedom will be far more life-threatening than any pandemic could be.

### Fighting Pandemics: The WHO's Completely Different Worldview

It must be recognized at the outset that the Draft Agreement is, first and foremost, a global political, economic, and social manifesto. Its worthiness as an international agreement dealing with future pandemics only follows if one believes that the following will enhance a future pandemic response: yielding national sovereignty; centralizing international medical power in the WHO; global, national, and corporate censorship; the suppression of freedom of conscience; instituting multifaceted redistribution plans for income and assets across nations; mandating universal health care plans; appropriating intellectual property; sharing genetic information about diseases; sharing pandemic samples; and supporting quotas encompassing "gender" (not sex) diversity; etc.

The Draft Agreement outlines an institution-building framework and process for the creation of a web of freedom-strangling entities, legal regulatory mandates, and relationships that, when needed, can be switched on to function as a "turnkey totalitarian state."<sup>1</sup> Because FRC rejects each aspect of this plan,

we urge the Biden administration to reject the Draft Agreement in its entirety. In its place, the United States should lead the way to negotiate a modest agreement that focuses on producing more communication among networked individuals; physicians treating patients in real-time; greater reliance on observational, real-time health approaches; less self-interested access to the power levers at the WHO by NGO's and large medical corporations; and greater transparency.

### The Draft Agreement's Vague "One Health" Paradigm

Article 5 of the Draft Agreement states that the Parties "commit to promote and implement a One Health approach for pandemic prevention..." An article on One Health in *The Lancet* scolds that "[m]odern attitudes to human health take a purely anthropocentric view—that the human being is the centre of medical attention and concern."<sup>2</sup> The new worldview is one which "places us in an interconnected and interdependent relationship with non-human animals and the environment." A "One Health Approach," according to Article 1(d):

....recognizes that the health of humans, domestic and wild animals, plants and the wider environment (including ecosystems) is closely linked and interdependent.

There is an everything-connects-everything dimension to One Health, but what relevance it has to stopping a future pandemic is unclear. Scientists did not need One Health to understand that pathogens often come from the non-human environment or that there are important relationships between all the sciences.

Some critics of the Draft Agreement consider it platitudinous. Even if that is true, its vagueness serves the purposes of WHO bureaucrats who wish to concentrate power for themselves. One Health appears to allow any biological, climatological, social, "equitable," economic, or environmental theory to be roped into the One Health approach. It presents a world health Rorschach Test, a blank check waiting to be cashed. This health-fear paradigm must be opposed by responsible, moral governments that will not use fear to gain power over trusting populations.

On a more philosophical note, One Health's neo-paganism opposes the Judeo-Christian framework in which humans have dominion over a world created by God, in whose image and likeness we humans were made. Under One Health, humanity is just another brick in a godless, monistic wall.<sup>3</sup> This is unsettling, for one must wonder whether the One Health calculus might someday work to deny humanity life-saving care in order to meet the demands of some anti-human alternative worldview.

Any international health agreement to which the United States joins should be guided, above all, by an unshakeable commitment to protecting human life from fertilization to natural death. Thus, One Health's framing and apparent valuation of human life vis-à-vis other forms of life are unacceptable and must be rejected.

## The WHO's Power Grab

Article 3 of the Draft Agreement states that “to achieve its objectives,” the document “will be guided” by general principles and approaches. As set forth in Article 3(3), one of those principles is “equity.” “Equity” is a key term in neo-Marxist social justice theory, which uses a lot of jargon. The most effective terms are ones that hijack the use of well-established terms that have established positive meanings that can be twisted to suit the movement’s purposes. “Equity” is one of the cornerstone concepts of social justice. Although its standard meaning focuses on treating people even-handedly and justly (*see*, “equality”), the social justice (neo-Marxist) usage of “equity” is radically different. There, “equity” requires the redistribution of resources (power, income, education, jobs) to correct unjust power relationships and structures previously existing in society.<sup>4</sup> It does not look to create a society that provides equality of opportunity and a “level playing field.” Rather, it wants a tilted playing field that is unequal because, according to social justice Marxism, the notion of upward mobility, improvement through equality, and the “level playing field” are myths.<sup>5</sup> This version of “equity” entails discrimination against perceived oppressors.

Therefore, it is revealing and alarming that this description of “equity” is central to the meaning of the Draft Agreement (Article 3):

3. **Equity** – Equity is at the centre of pandemic prevention, preparedness and response, both at the national level within States and at the international level between States. It requires, inter alia, specific measures to protect persons in vulnerable situations. Equity includes the unhindered, fair, equitable and timely access to safe, effective, quality and affordable pandemic-related products and services, information, pandemic-related technologies and social protection.

“Equity” and “equitable” appear over twenty times, including in Article 2, which states that the Draft Agreement is “guided by equity.” Thus, the document is imbued with a socialist underpinning. Chapter 2’s title is “The world together equitably: Achieving equity in, for and through pandemic prevention, preparedness and response,” and that underscores this point.

Article 3(2) defines, or rather, comments on “sovereignty”:

2. **Sovereignty** – States have, in accordance with the Charter of the United Nations and the general principles of international law, the sovereign right to legislate and to implement legislation in pursuance of their health policies.

It is noteworthy that the power structure here is inverted and that the WHO is slyly asserting preeminence over nation-states. That is, the WHO Constitution was signed by the representatives of 51 nation-states in 1946. Whatever authority or power it has now was derived from a grant of authority from these nation-states. So, this provision should say that the sovereign entities in the international system are nation-states from whom the UN and WHO derive various powers. Instead, the Draft Agreement informs us that states can legislate and implement legislation “in pursuance of their health policies” but only in so much as they act “in accordance with the Charter of the United Nations and general principles of international law.”

This document overflows with mandates on the states that are parties to it. The term “shall” appears in the Draft Agreement over 175 times. In legal parlance, “shall” is a mandatory command. Typically, in the Draft Agreement, a sentence with “shall” will also include text along the lines of “The Parties shall” or “Each Party shall.” That indicates that a mandate is specified in that text for each nation-state (“Party”) that agrees to be a party to the Draft Agreement. The sovereignty of the signatory states will be substantially and negatively impacted.

### Censorship

The Draft Agreement also dives into the subject of censorship. The Draft Agreement presents the reader with the Orwellian conception of an “infodemic” (Article 1(c)):

(c) “infodemic” means too much information, false or misleading information, in digital and physical environments during a disease outbreak. It causes confusion and risk-taking behaviours that can harm health. It also leads to mistrust in health authorities and undermines public health and social measures;

The term is demeaning to any country’s citizens and voters who are deemed to be incapable of handling “too much information.” It implies that the public’s poor reasoning skills cause them to take risks that can harm their health. But even more authoritarian is the concern that too much information may cause citizens to mistrust their betters in government.

This term “infodemic” is only used once, in Article 9, which deals with ways to promote research and development capacity. Article 9(2)(d) declares that “to this end, the Parties shall promote:”

(d) knowledge translation and evidence-based communication tools, strategies and partnerships relating to pandemic prevention, preparedness and response, including infodemic management, at local, national, regional and international levels.

Aside from the jargon, according to the Draft Agreement, increased research and development capacity also requires “evidence-based communication tools” for use in pandemic response, in addition to prevention and preparedness and “infodemic management.” While this document does not delineate how such “management” is to be accomplished, it is to be addressed at the local, regional, and international levels.

Censorship is more directly addressed in Article 18(1) of the Draft Agreement—“Communications and awareness”:

1. The Parties shall strengthen science, public health and pandemic literacy in the population, as well as access to information on pandemics and their effects and drivers, and combat false, misleading, misinformation or disinformation, including through effective international collaboration and cooperation....<sup>6</sup>

One cannot look at the Draft Agreement in a vacuum. It is taking place in the context of the 2030 Sustainable Development Goals, whose 17 “SDGs” were adopted at the UN Sustainable Development Summit in New York in September 2015. These goals encompass those of the world government behemoth that is slowly enveloping the nation-state system with incremental elimination of their sovereign powers by the national governments themselves.

Suffice it to say that challenges to this “Agenda” are not to be taken lightly. So, for example, in January 2021, the UN General Assembly requested that the Secretary-General submit a report on countering disinformation in the next year. Of note, the first numbered paragraph “emphasize[d]” that “all forms of disinformation can negatively impact the enjoyment of human rights and fundamental freedoms.” Furthermore, disinformation might have a detrimental effect on attaining the Sustainable Development Goals.<sup>7</sup> On August 12, 2022, the Secretary-General submitted a detailed 19-page report to the UN General Assembly on “countering disinformation.”<sup>8</sup>

It goes on and on. A major document from the Secretary-General, “Our Common Agenda,” outlining the global catastrophe ahead if we don’t hand over national power to the emerging world government, had a paragraph flagging the dangers of disinformation in the digital age.<sup>9</sup> This, in turn, generated a full-blown report in June 2023 on “Information Integrity on Platforms,” which contained an introduction from the Secretary-General that concluded as follows:

Optimism over the potential of social media to connect and engage people has been dampened as mis- and disinformation and hate speech have surged from the margins of digital space into the mainstream. The danger cannot be overstated. Social media-enabled hate speech and disinformation can lead to violence and death. *The ability to disseminate large-scale disinformation to undermine scientifically established facts poses an existential risk to humanity (A/75/982, para. 26) and endangers democratic institutions and fundamental human rights.* These risks have further intensified because of rapid advancements in technology, such as generative artificial intelligence. Across the world, the United Nations is monitoring how mis- and disinformation and hate speech can threaten progress towards the Sustainable Development Goals. It has become clear that business as usual is not an option.<sup>10</sup>

Given the commitment of the American people to the tenets of the First Amendment, no administration of the United States should even consider signing an agreement with information control principles tucked away inside it.

### WHO PABS and “Benefit Sharing”: Socialist Pathogen Exploration

The Draft Agreement sets up an elaborate mechanism for the multilateral “sharing” of various pandemic-related products, genetic materials, and pathogenic samples. The WHO appears ready to spend billions of dollars in a research frenzy to discover (or perhaps develop) more dangerous pathogens while giving wider access to all the technology, intellectual property, and research products in an “equitable” sharing scheme. The dangers of this scheme are obvious.

The WHO Pathogen Access and Benefit-Sharing System (WHO PABS System) is intended “to ensure rapid and timely risk assessment and facilitate rapid and timely development of, and equitable access to, pandemic-related products for pandemic prevention, preparedness and response.”<sup>11</sup> Article 12 states the System will have “materials” sharing arrangements in which pathogen-related materials and genetic sequences will be shared across the system.<sup>12</sup> A Standard Material Transfer Agreement (a PABS SMTA) will be developed.<sup>13</sup>

With respect to “PABS multilateral benefit sharing such benefits may include both monetary and non-monetary benefits.” *In the event of an actual pandemic:*

...real-time access by WHO to a minimum of 20% (10% as a donation and 10% at affordable prices to WHO) of the production of safe, efficacious and effective pandemic-related products for distribution based on public health risks and need... each Party that has manufacturing facilities ... shall take all necessary steps to facilitate the export of such pandemic-related products....<sup>14</sup>

This means that in the event of a pandemic, the WHO would get access to 20 percent of the United States’ anti-pathogen products—10 percent would have to be donated outright, and another 10 percent sold at “affordable” prices. As stipulated by Article 12(6), the Parties “shall develop a mechanism to ensure the fair and equitable allocation of pandemic-related products, *based on public health risks and needs*” (emphasis added). “Equitable” allocation based on risks and needs sounds like mandatory global donations to everyone according to their needs, forcing Party states to participate in a global socialist arrangement.

Along these lines, Article 6 (“Preparedness, readiness and resilience”) advocates for universal health coverage. It states that each signatory nation “shall continue” to strengthen its healthcare system in that this will benefit pandemic “prevention, preparedness, and response.” Furthermore, the parties shall continue... “taking into account the need for equity and resilience, with a view to the progressive realization of universal health coverage.”

#### Other Mandates

- Article 6 focuses on pandemic preparedness, readiness, and resilience. Each Party is required to strengthen its health system, which entails:
  - (g) creating and maintaining up-to-date, universal, interconnected platforms and technologies for early detection, forecasting and timely information sharing...including building digital health...capacities.<sup>15</sup>

Beating pandemics requires a newer, better surveillance state, apparently.

- Article 11 sets forth an entire intellectual property transfer and equitable redistribution framework that may override U.S. intellectual property statutes and is euphemistically described in language like this:

The Parties, within a set time frame, working through the [new Draft Agreement bureaucracy (Article 21-24)], shall strengthen existing, and develop innovative, multilateral mechanisms, including through the pooling of knowledge, intellectual property and data, that promote the transfer of technology and know-how for the production of pandemic-related products, on mutually agreed terms as appropriate, to manufacturers, particularly in developing countries.

- In Article 13, the “Parties” will be required to establish the “WHO Global Supply Chain and Logistics Network” (the WHO SCL Network) that will be managed by the new pandemic bureaucracy terms to make claims on the distribution of products and services “guided by equity and public health needs, paying particular attention to the needs of developing Parties.”
- According to Article 14(5), “[e]ach Party shall take steps to ensure that it has the legal, administrative and financial frameworks in place to support emergency regulatory approvals for the effective and timely regulatory approval of pandemic-related products during a pandemic.” After Operation Warp Speed revealed the profound dangers of truncating standard drug and biological product review procedures, it is disturbing that the WHO is now upholding expedited review as exemplary.
- Shockingly, the Draft Agreement is calling for the creation of no-fault vaccine injury policies. Article 15 focuses on pandemic drug and vaccine-related products with respect to “compensation and liability management.” “The [new pandemic agreement bureaucracy] shall establish, within two years of the entry into force of the WHO Pandemic Agreement, using existing relevant models as a reference, *no-fault vaccine injury compensation mechanism(s)*....”<sup>16</sup> It is claimed that this is to get vaccine compensation funds available to the injured, but that seems like a ruse. The current payout rate for vaccine claims under the U.S. federally mandated system is so minimal that this approach appears to be nothing more than a way to deny the injured access to court. It is also not clear at all that vaccine makers should be absolved of claims based on fault.<sup>17</sup> This provision appears to be a sop to the vaccine industry, the vaccine-selling NGOs that provide massive funding to the WHO (e.g., GAVI).
- Article 17 mandates “whole-of-government” and “whole-of-society” approaches to pandemic product distribution. For example, Article 14(4)(a) states that “each Party shall develop” plans to “identify and prioritize populations for access to pandemic-related products and health services.”

#### The Draft Agreement’s Institution Building: Creating a New Bureaucracy

If one were not already alarmed about American sovereignty being undermined, the Draft creates an entirely new massive, international health bureaucracy in Chapter III (*see* Articles 21-24). Article 21(1) states: “A Conference of Parties is hereby established.”

- Only delegates from the nations that are parties to the Draft Agreement will be allowed to participate in the Conference of Parties’ (COP) decision-making processes.<sup>18</sup>
- The first session of the COP will take place “not later than one year after” the Draft Agreement enters into force.<sup>19</sup>



- The COP has the authority to set up subsidiary bodies to carry out necessary tasks.<sup>20</sup>
- Each Party to the Draft Agreement will have one vote. So, this will be like the UN General Assembly in which the United States has the same voting power as Guinea Bissau, for example.<sup>21</sup>
- The COP will be like a mini-UN General Assembly that will also need a Secretariat. Article 24 creates that Secretariat. It will have many functions, ways to spend funds, hire nameless, unelected bureaucrats, enter into contracts, etc.<sup>22</sup> One can only imagine the fight that will take place to figure out where this Secretariat will be located.

## Conclusion

For the numerous reasons stated above, Family Research Council strongly opposes the WHO's Draft Pandemic Preparedness Agreement and believes the American government must not join this agreement. It is not redeemable even with amendments. The entire Draft Agreement must be scrapped. Should the administration be so unwise as to join this agreement, it must be submitted to the U.S. Senate for its advice and consent in accordance with the U.S. Constitution.

Thank you for your consideration.

Respectfully submitted,

/s/ Chris Gacek, J.D. Ph.D.  
Senior Fellow for Regulatory Policy

Family Research Council  
801 G Street, NW  
Washington, DC 20001

---

<sup>1</sup> Ronald Bailey, "The NSA Recommendations: Preventing a Turnkey Totalitarianism," *Reason Magazine*, December 20, 2013, <https://reason.com/2013/12/20/preventing-turnkey-totalitarianism/>. Bailey attributes the phrase "turnkey totalitarian state" to "NSA whistleblower William Binney."

<sup>2</sup> "One Health: A Call for Ecological Equity," *The Lancet* 401, no. 10372 (January 2023), [https://doi.org/10.1016/S0140-6736\(23\)00090-9](https://doi.org/10.1016/S0140-6736(23)00090-9).

<sup>3</sup> Ben Johnson, "Explainer: WHO's Pandemic Agreement Threatens National Sovereignty, Free Speech, and Life," *Washington Stand*, January 9, 2023, <https://washingtonstand.com/commentary/explainer-whos-pandemic-agreement-threatens-national-sovereignty-free-speech-and-life>.

<sup>4</sup> "Equity," New Discourses, <https://newdiscourses.com/tftw-equity/>; New Discourses, "Equity: A Translation from the Wokish | James Lindsay," YouTube video, September 25, 2021, [https://youtu.be/0oK\\_kuRG1oU](https://youtu.be/0oK_kuRG1oU).

<sup>5</sup> Robert L. Reece, "Debunking the Mobility Myth," *Teaching Tolerance*, no. 58 (Spring 2018), <https://www.learningforjustice.org/magazine/spring-2018/debunking-the-mobility-myth>.

<sup>6</sup> "Research Essentials: A Guide to Research Essentials – What is Mis-, Dis-, and Malinformation?," Iona University, last updated January 11, 2024, <https://guides.iona.edu/researchessentials/disinformation>.

<sup>7</sup> UN General Assembly, "Countering Disinformation for the Promotion of Human Rights and Fundamental Freedoms," resolution, December 24, 2021.

---

<sup>8</sup> Report of the Secretary-General, “Countering Disinformation for the Promotion and Protection of Human Rights and Fundamental Freedoms,” UN General Assembly, August 12, 2022.

<sup>9</sup> United Nations, “Our Common Agenda: Report of the Secretary-General,” report, August 5, 2021,

[https://www.un.org/en/content/common-agenda-report/assets/pdf/Common\\_Agenda\\_Report\\_English.pdf](https://www.un.org/en/content/common-agenda-report/assets/pdf/Common_Agenda_Report_English.pdf).

<sup>10</sup> “Information Integrity on Digital Platforms,” *Our Common Agenda*, Policy Brief 8 (June 2023): 3 (emphasis added); for text that now appears to be the standard UN text that “disinformation” threatens “scientifically established facts” that “poses an existential threat to humanity.”

<sup>11</sup> Article 12: Access and benefit sharing.

<sup>12</sup> Article 12 (4)(a)(i).

<sup>13</sup> Article 12 (4)(a)(iii).

<sup>14</sup> Article 12 (4)(b)(ii)(a).

<sup>15</sup> Article 6 (2)(g).

<sup>16</sup> Article 15 (2) (emphasis added).

<sup>17</sup> Jenna Greene, “COVID Vaccine ‘Black Hole’ for Injury Claims is Unconstitutional, Lawsuit Says,” Reuters, October 10, 2023, <https://www.reuters.com/legal/government/column-covid-vaccine-black-hole-injury-claims-is-unconstitutional-lawsuit-says-2023-10-10/>.

<sup>18</sup> Article 21 (1).

<sup>19</sup> Article 21 (3).

<sup>20</sup> Article 21 (9).

<sup>21</sup> Article 22 (1).

<sup>22</sup> Article 24 (2).