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WHO Pandemic Treaty/Agreement

*Excerpts of press conference remarks by Rep. Chris Smith (R-NJ)
Chairman, Foreign Affairs Global Health, Global Human Rights
and International Organizations
Washington, DC—February 5, 2024*

Binding international covenants, treaties, or agreements—and the legal obligations imposed on nations requires serious and comprehensive analysis.

The proposed [WHO Pandemic Treaty/Agreement](#), which UN news explicitly states will be binding on any country that agrees to it—[“Such agreements made between countries have legal standing and are binding”](#)—is under consideration by the [Intergovernmental Negotiating Body](#) (INB) in Geneva who likely will present a final text on May 27th for a World Health Assembly vote.

Outside the INB however, far too little scrutiny has been given, far too few questions asked as to what this legally binding agreement or treaty means to health policy in the United States and elsewhere.

If approved, it remains unclear whether the Biden Administration intends to submit this treaty/agreement to the Senate for its constitutionally-required advice and consent as a prerequisite for ratification—an executive agreement bypassing Senate ratification would be an egregious mistake.

It’s unclear in the extreme as to how many billions of dollars U.S. taxpayers will be required to give pursuant to **Article 20** of the Agreement in “annual monetary contributions...to the WHO Pandemic Agreement.” We won’t know the amount until “a sustainable funding mechanism” is established after the fact “by the Conference of the Parties no later than 31 December 2026.” (**Articles 20 and 21**)

Article 12 stipulates that “in the event of a pandemic, real-time access by WHO at a minimum of 20% (10% as a donation and 10% at affordable prices to WHO) for products for distribution. 20% of what and from where?”

Whether it be Ebola, HIV-AIDS, cholera or Covid-19, Americans have been extraordinarily generous and have relied on U.S. agencies which are accountable to the American people to make recommendations and decisions concerning allocation of funds—not unelected bureaucrats at WHO.

Article 6 of the Agreement calls for the “continued provision of ...essential health services...” which includes abortion on demand.

There is absolutely no ambiguity here. Abortion is included in the [list of essential health care services published by WHO in 2020 in the](#) wake of COVID-19 despite the fact that a majority of countries restrict and regulate abortion.

Paragraph 13 of the Pandemic Agreement affirms the need to prioritize “equity and respect for human rights”, yet on [November 25, 2021](#) the WHO made clear that it construes the killing of unborn children by abortion—dismemberment, child beheading and starvation, and that’s how the abortion pill works—to be a human right.

Article 25 empowers the Pandemic Agreement’s implementation leadership to enter into “bilateral or multilateral agreements...on issues relevant or additional to the WHO Pandemic Agreement...”

That’s what WHO is already doing, and under the Pandemic Agreement it gets worse.

Last February, WHO granted abortion provider and promoter International Planned Parenthood Federation “official relations with WHO” status.

In August, WHO’s Director General signed a [Memorandum of Understanding \(MOU\)](#) with the European Parliamentary Forum for Sexual and Reproductive Rights to advance laws and policies according to WHO guidelines.

And what’s that? WHO’s law and policy guidelines on abortion—[Towards a supportive law and policy environment for quality abortion care: evidence brief](#)— a supplement to the WHO [Abortion Care Guideline](#), proposes actions “to create an enabling environment” for abortion and seeks the overturning of laws regulating or restricting abortion including waiting periods, parental notification, conscientious objection and any gestational age limit—WHO now is pushing laws to legalize abortion for all nine months!

As we meet here today the WHO Executive Board is expected to vote in May to give another abortion-promoting organization— the Center for Reproductive Rights— “official relations with WHO” status. This is an organization that like the WHO itself, lobbies for changes in law, and uses case law to promote abortion on demand for all nine months.

On January 22nd thirty-three pro-life organizations including the National Right to Life Committee, Susan B Anthony Pro-Life America, AUL, Family Research Council, Heritage Foundation, LifeNews [signed a letter authored by C-FAM](#) to WHO’s executive board urging them to stop the WHO from entering into an official relationship with the Center for Reproductive Rights.

There are many other concerns with the Agreement that our distinguished panel of experts will address.

Article 18 seeks to “combat false, misleading, misinformation or disinformation...”

(With regard to Covid-19, does that apply retroactively to the WHO and Director Tedros concerning the origins of Covid-19, misleading guidance and the malign influence of Xi Jinping’s Chinese Communist Party on all matters related to the virus?)

Article 18 also begs the question: Will there be any room for dissent on vaccines, therapeutics, virus transmission and the like—especially among scientists and health professionals—or will group think again crowd out other viewpoints?

We have reason for concern—past could be prologue.

This past Saturday, the Washington Examiner broke the story that the White House refused to allow depositions of a Biden Covid-19 advisor and the director of digital strategy:

“Andrew Slavitt, a longtime health official who worked on President Joe Biden’s coronavirus response team, was scheduled to appear before the House Judiciary Committee on Jan. 31. He didn’t.

“Judiciary Committee Chairman Jim Jordan (R-OH) indicated that the administration also objected to the committee’s forthcoming deposition with Robert Flaherty, Biden’s former director of digital strategy.

“The committee is seeking to speak with Slavitt and Flaherty about the well-documented pressure they put on social media companies to censor content, particularly about COVID-19, beginning in 2021.

“Flaherty would routinely demand the companies report to him on their practices for removing content, such as posts that showed “vaccine hesitancy” and “borderline content.”

“In one instance, Flaherty became angry with Meta in July 2021, indicating he was displeased with the platform’s efforts to censor a group that became known as the “disinformation dozen,” which included Robert F. Kennedy Jr.

“Are you guys f***ing serious? I want an answer on what happened here and I want it today,” Flaherty wrote to Meta.”

Nations, including the United States, are precluded by the draft Pandemic Agreement from taking reservations when they consider ratification concerning any aspect of the Agreement. **Article 26:** “No reservations may be made to the WHO Pandemic Agreement.”