

Shocking Investigation discovers a World-Wide Shadow Government has infiltrated “Elected” Governments & Public Health Institutions & built a Global Vaccine Regime

 expose-news.com/2022/11/27/shadow-govt-has-built-a-global-vaccine-regime

By Rhoda Wilson

November 27, 2022

The same organisations that have an interest in vaccinations today also had a lot of influence in laying the groundwork decades ago. People tend to think of these large and well-known organisations – such as Rockefeller Foundation, Bill & Melinda Gates Foundation, UNICEF; CDC, GAVI, USAID, the World Bank – as independent of each other, but they are not. They are part of a vaccine infrastructure – a global vaccine regime. Or, as *Nations in Action* describes it, the vaccine shadow government architecture.

The architecture is headed by wealthy investors who have created funds and foundations which then engage in various funding activities, while also being responsible for assisting politicians to be elected, or placed, into office. At the same time, the foundations donate to international organisations giving the foundations access to and enabling them to steer the organisations toward certain conclusions.

In short, wealthy organisations and individuals are getting you and your government to pay for and implement private interests through public policies. Policies that are geared towards a pre-determined conclusion that is to the benefit of those wealthy interests.

What is the World Shadow Government?

According to French billionaire and RDH President Philippe Argillier, the shadow government is the actual government that gives official orders to the elected government. There is an extremely powerful entity behind the scene that involves very influential individuals in finance as well as in politics, including some heads of state.

“Altogether, 38 individuals run the daily lives of 8 billion people on Earth ... The Biden administration is under the control of the shadow government. I can confirm this without any hesitation based upon the information that I have,” Argillier told *Nations in Action*.

Nations in Action: Philippe Argillier explains the Shadow Government and the dynamic power of the Databanks,

16 October 2021 (edited by SGT News Network, 2 mins)

You can watch the full 20-minute interview ‘*Global Leaders Strategise Ending the Shadow Government*’ Part I [HERE](#) where Philippe Argillier explained the Shadow Government and the dynamic power of the databanks he has in his possession.

Argillier explained that the shadow government is almost like a corporation with a short, medium and long-term agenda. Most of the time their influence is based on economics, or money. But usually, their influence is directed at geopolitical agreements, with military intervention if needed, along with some of the most powerful countries. For example, the USA, China and France are the most powerful countries working with the shadow government behind the scenes.

To understand the shadow government, we must understand the individuals behind the shadow government, Argillier said. “These individuals [are so wealthy they] have lost all sense of conscience, any values ... when you’re at the top, at the very top [as] they believe they are, [they say] ‘let’s create our own world, let’s decide on behalf 8 billion people on Earth’. It’s almost like playing a game of Monopoly, where you decide what the big next step will be. So far, it’s worked because with that type of money you can buy anything you want.”

In [Part II](#), Argillier said he knew who most of the 38 individuals behind the shadow government were, but he wouldn’t disclose their names.

Further resources:

- [Maria Zack with General McInerney. Global Leaders Strategize on Ending the Shadow Government: Part I-3. Six Amazing Videos](#), Before Its News, 12 November 2021
- Video: [The Awakened Mother Podcast – Philippe Argillier](#), Wendy Silvers, 11 August 2022 (80 mins)
- Video: [Shadow Government: Databanks Expose Global Evil and Corruption Says French Billionaire](#), Stew Peters Network, 11 October 2021 (80 mins)

The Global Vaccine Regime

Why does the US bureaucracy downplay the potential for Covid being a laboratory-leaked, artificially created virus when it had been funding drug/virus research in US and China for well over a decade before the Covid “pandemic” began?

Why was the possibility of a lab-leaked coronavirus shut down in public discourse by the US government institutions, media and World Health Organisation (“WHO”) when, for example, the US National Institutes for Health (“NIH”) Defence Threat Reduction Agency (“DTRA”), Health and Human Services (“HHS”) and the Department of Defence (“DoD”) had been funding Peter Daszak’s EcoHealth Alliance research on bat coronaviruses for decades, including research in Wuhan, China?

In the video below, a researcher from *Nations in Action* presented documents that, when taken together, provide an answer to these questions.

Shadow Government Architecture: The Vaccine Perspective – NIA Research Team, 22 August 2022
(62 mins)

Below are notes taken from the presentation above. Where possible we have added links to the documents referred to. Beginning at timestamp 21:25, *Nations in Action* discussed the global vaccine regime.

History of CDCs Vaccine Schedule

The same organisations that have an interest in vaccinations today also had a lot of influence in laying the groundwork “going back quite far.”

During the period beginning in the 1940s to today, there has been a steady increase in the number of vaccination recommendations from the US Centres for Disease Control and Prevention (“CDC”). Currently, before Covid, the CDC vaccination schedule recommends at least 45 doses within the first 18 years of life.

Late 1940s	Late 1960s	Late 1970s	1985 - 1994	1994 - 1995	2000	2005	2010-2020
Smallpox	Smallpox						
Diphtheria*	Diphtheria*	Diphtheria*	Diphtheria*	Diphtheria*	Diphtheria*	Diphtheria*	Diphtheria*
Tetanus*	Tetanus*	Tetanus*	Tetanus*	Tetanus*	Tetanus*	Tetanus*	Tetanus*
Pertussis*	Pertussis*	Pertussis*	Pertussis*	Pertussis*	Pertussis*	Pertussis*	Pertussis*
	Polio (OPV)	Polio (OPV)					
	Measles	Measles**	Measles**	Measles**	Measles**	Measles**	Measles**
Late 1950s	Mumps	Mumps**	Mumps**	Mumps**	Mumps**	Mumps**	Mumps**
Smallpox	Rubella	Rubella**	Rubella**	Rubella**	Rubella**	Rubella**	Rubella**
Diphtheria*			Polio (OPV)	Polio (OPV)	Polio (IPV)	Polio (IPV)	Polio (IPV)
Tetanus*			Hib	Hib	Hib	Hib	Hib
Pertussis*				Hepatitis B	Hepatitis B	Hepatitis B	Hepatitis B
Polio (IPV)					Varicella	Varicella	Varicella
					Hepatitis A	Hepatitis A	Hepatitis A
						Pneumococcal	Pneumococcal
						Influenza	Influenza
							Rotavirus

Shadow Government Architecture: The Vaccine Perspective, NIA Research, 22 August 2022

In the 1980s, the US government was purchasing between 52% and 55% of childhood vaccinations distributed in the US. In the ten years between 1988 and 1997, the cost of vaccines doubled from \$100 to \$200 per child up to the age of 6. The cumulative cost doubled again, from \$200 to almost \$400 per child, in less than five years between 1997 and

2001. The introduction of the pneumococcal conjugate vaccine to the schedule for infants resulted in another doubling of public spending, from \$500 million to \$1 billion, between 2000 and 2002.

These payments were made from the Vaccine for Children Entitlement Program. Recent Covid legislation has created a new entitlement program, modelled off the Vaccine for Children Entitlement Program, called the Vaccine for Adults Program with initial funding of \$25 billion.

Rockefellers Establish a Taskforce

The 1980s marked a turning point for the vaccination regime spearheaded by the Taskforce on Childhood Survival and Development. The Taskforce was established to coordinate the immunisation activities of major international agencies. It was a partnership between several United Nations (“UN”) agencies and the Rockefeller Foundation.

In 1983, the vaccine compensation act was introduced in Congress. And in 1986, the National Childhood Vaccine Injury Act (“NCVIA”) became law. In short, this law made the liability for vaccine injury the responsibility of the US government while the profits for vaccines went to Big Pharma. As a result, and not surprisingly, in the following decades, there was a massive increase in the number of recommended vaccines. Under the NCVIA, the National Vaccine Injury Compensation Program (“NVICP”) was created.

Following the enactment of the NCVIA, the Children’s Vaccine Initiative was founded in 1990. The sponsors included the World Bank, Rockefeller Foundation, WHO, United Nations Children’s Fund (“UNICEF”) and United Nations Development Program (“UNDP”). It had several goals, three of which were: mobilisation of substantially greater resources for vaccine introduction, especially in developing countries; unprecedented levels of collaboration; and, raising awareness of the high value of vaccines.

Vaccination Agenda - 1990-7



Children's Vaccine Initiative/Rockefeller Foundation Conference on the Global Supply of New Vaccines

Amstg, 8-7 February 1997



CHILDREN'S VACCINE INITIATIVE

World Bank
Rockefeller Foundation
UNICEF
WHO
Gates Foundation
Other donors and partner agencies

- Mobilization of substantially greater resources for vaccine introduction, supply and utilization, especially in developing countries; and
- Unprecedented levels of collaboration among the diverse contributors to vaccine development, supply, quality and delivery – in particular between the public and private sectors in achieving their shared goal of providing the best vaccines possible to improve the health of the world's population.
- Advocacy to raise awareness among decision makers and populations, in both industrialized and developing countries, donor and international agencies of the high value of vaccines, in terms of both health and economic benefits;

Shadow Government Architecture: The Vaccine Perspective, NIA Research, 22 August 2022
(timestamp 28:57)

The Vaccine Regime Goes Global

In 2000, the Global Alliance for Vaccine and Immunisation (“GAVI”), led by the Bill & Melinda Gates Foundation, was formed. GAVI’s purpose is to facilitate vaccination in developing countries by working with WHO, UNICEF, the World Bank, the vaccine industry, research and technical agencies, the Gates Foundation and other private philanthropists. The other private philanthropists GAVI works with are as highlighted in the image below.

Formation/Phase I

Evidence from the formative years of GAVI, and its precursor, the Children’s Vaccine Initiative (CVI), suggests that one of the key motivating factors for setting up a partnership to focus on vaccines and immunizations was to address the disparities in access to so-called ‘new and under-utilized vaccines’ *between* high income and lower income countries, as observed by GAVI’s founders [39–41]. GAVI’s founders included philanthropic institutions (Bill & Melinda Gates Foundation and the Rockefeller Foundation), a small number of sovereign donors (the UK, USA, Norway, Netherlands, Denmark, and Sweden) and partner multilateral agencies (UNICEF, WHO and the World Bank) [17, 40]. Individuals from these institutions coalesced around the notion that the central problems facing these countries were inadequate global

Charting the evolution of approaches employed by the Global Alliance for Vaccines and Immunizations (GAVI), BMC Public Health, 30 November 2015

In 2003, the Gates Foundation developed a report showing the need to create public-private alliances to push the vaccination agenda forward. The report was titled ‘Global Health Partnerships: Assessing Country Consequences’. It stated that “some of the key factors

used to measure success included overall vaccination rate of populations.” In other words, the push for private organisations to benefit globally through public policy vaccination had begun to be documented.

In 2005, there was another push by the vaccine regime. WHO published the '*Global Immunisation Vision and Strategy*' in alliance with the Rockefeller Foundation, Gates Foundation, UNICEF; CDC, GAVI, USAID and the World Bank. One of the visions was that immunisation was seen as “a major element of efforts to attain the Millennium Development Goals.”

Vision: A world in 2015 in which:

- *immunization is highly valued;*
- *every child, adolescent and adult has equal access to immunization as provided for in their national schedule;*
- *more people are protected against more diseases;*
- *immunization and related interventions are sustained in conditions of diverse social values, changing demographics and economies, and evolving diseases;*
- *immunization is seen as crucial for the wider strengthening of health systems and a major element of efforts to attain the Millennium Development Goals;*
- *vaccines are put to best use in improving health and security globally; and*
- *solidarity among the global community guarantees equitable access for all people to the vaccines they need.*

Global Immunisation Vision and Strategy 2006-2015, WHO, October 2005

People tend to think that the organisations mentioned above are independent and stand on their own. But all these organisations are part of a larger infrastructure – WHO, World Bank, and IMF are specialised agencies of the UN and UNICEF is a program and fund of the UN. A lot of the organisations mentioned in *Nations in Action's* presentation are pieces of the overall UN infrastructure (see image below).



Shadow Government Architecture: The Vaccine Perspective, NIA Research, 22 August 2022 (timestamp 33:37)

The Decade of Vaccines

In 2010, the Gates Foundation established a roadmap to make the years from 2010 to 2020 the “decade of vaccines.” Shortly afterwards, on 1 May 2010, the Rockefeller Foundation published ‘*Scenarios on Technology and International Development*’, within which is a scenario titled ‘Lock Step’. The Lock Step scenario stated:

“In order to protect themselves from the spread of increasingly global problems – from pandemics and transnational terrorism to environmental crisis and rising poverty – leaders around the world took a firmer grip on power.”

In 2011, Daszak authored an article published in ScienceDirect titled ‘*The search for meaning in virus discovery*’.

The rate of new virus discovery is increasing dramatically with improvements in sequencing and other molecular diagnostic platforms, and investments in sample collection and analysis. However, progress has been more limited in identification and implication of infectious agents that pose threats to human health and welfare. Here we review strategies for targeting research to enable efficient significant virus discovery.

The search for meaning in virus discovery, ScienceDirect, December 2011

Over the following years, Daszak and his Chinese colleague Shi Zhengli, also known as the “bat woman” or “bat lady,” would discover and isolate more than 100 unique coronaviruses all of which, according to Daszak’s own words, can be easily manipulated in the lab.

A copy of a 2015 presentation given by Daszak to the National Academies of Science, Engineering and Medicine showed EcoHealth Alliance’s work in collaboration with the Wuhan Institute of Virology, which was funded by various US agencies. The research involved infections in humanised mice and coronavirus gain-of-function research using human ACE2 receptors, the protein on the surface of a cell to which the SARS-CoV-2 spike protein binds.

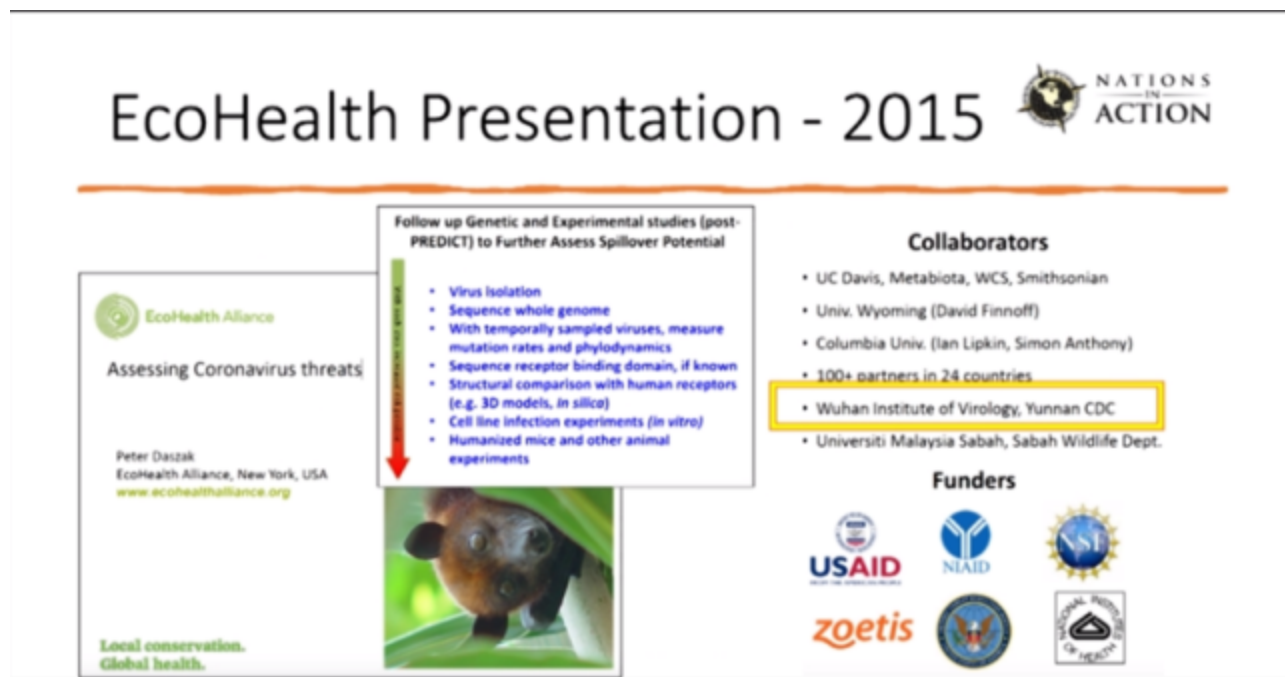


Image compiled from Presentation given by Peter Daszak to the National Academies of Science, Engineering and Medicine

Shadow Government Architecture: The Vaccine Perspective, NIA Research, 22 August 2022 (timestamp 19:30)

As additional proof of the funding behind his research, at the end of Daszak’s 2011 article, it stated the organisations that funded Daszak and his co-author’s, Dr. Lipkin, research:

Peter Daszak’s work is supported by NIAID Non-biodefense emerging infectious disease research opportunities award 1 R01 AI079231, an **NIH/NSF** ‘Ecology of Infectious Diseases’ award from the Fogarty International Centre 2R01-TW005869, the **Rockefeller Foundation, Google.org**, NSF Human and Social Dynamics ‘Agents of Change’ award (SES-HSD-AOC BCS–0826779), and generous support of the American people through the United States Agency for International Development (**USAID**) Emerging Pandemic Threats **PREDICT**. The contents are the responsibility of the authors and do not necessarily reflect the views of USAID or the United States Government. **Dr. Lipkin’s work is supported by grants from the National Institutes of Health** (AI057158, AI0793231, AI070411, EY017404), **Bill and Melinda Gates Foundation, USAID PREDICT, and Defence Threat Reductions Agency**. [emphasis our own]

The search for meaning in virus discovery, ScienceDirect, December 2011

In May 2012, the Global Vaccine Action Plan 2011-2020 was approved to achieve the Gates Foundation’s “decade of vaccines” vision. The Plan was led by the Gates Foundation, GAVI, WHO, UNICEF, African Leaders Malaria Alliance and the US National Institute of Allergy and Infectious Diseases (“NIAID”).

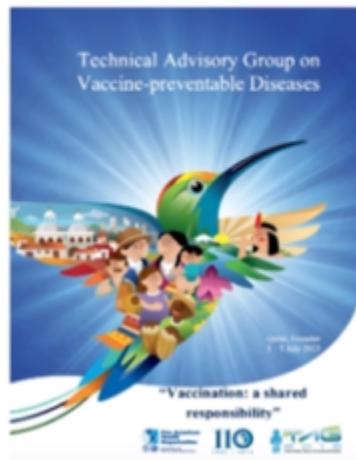
Further resources:

- Peter Daszak’s prophetic statement to NAS workshop, Totality of Evidence
- Dr. Peter Daszak removed from medical journal’s Covid-19 commission, The Post Millennial, 22 June 2021
- Whistle-blower, Former VP of EcoHealth Partners with Attorney Tom Renz

The Revolving Door

In 2013, the Technical Advisory Group (“TAG”) on Vaccine-preventable Diseases released a paper from a meeting with the slogan “vaccination a shared responsibility.” The meeting’s objective was to issue recommendations to address the current and future challenges faced by national immunisation programs in the Americas. Part of the 2013 TAG team were representatives from the National Centre for Immunisation and Respiratory Diseases (“NCIRD”), Canada’s Ministry of Health, the Rockefeller Foundation and NIH.

Vaccination Agenda - 2013



11-11 November 2013	
Dr. Anne Schuchat Director - National Center for Immunization and Respiratory Diseases (NCIRD) Centers for Disease Control and Prevention 1600 Clifton Road, NE Atlanta, GA 30333, United States	President
Dr. Arlene King Chief Medical Officer - Ministry of Health and Long-term Care 100 Queen Street West Toronto, Ontario M5H 2N2, Canada	Member
Dr. Jeanette Vega Managing Director - The Rockefeller Foundation 1230 York Avenue New York, NY 10021, United States	Member
Dr. Roger Glass Director - Fogarty International Center, NIH/JEFIC National Institutes of Health 10101 LBJ Freeway, Room 301 Bethesda, MD 20892, United States	Member

Signatories

- **Dr. Anne Schuchat - Director - National Center for Immunization and Respiratory Diseases (NCIRD) Centers for Disease Control and Prevention**
- **Dr. Arlene King - Chief Medical Officer - Ministry of Health and Long-term Care Toronto, Ontario, Canada**
- **Dr. Jeanette Vega - Managing Director Foundation Initiatives – The Rockefeller Foundation**
- **Dr. Roger Glass - Director - Fogarty International Center, NIH/JEFIC National Institutes of Health**

Shadow Government Architecture: The Vaccine Perspective, NIA Research, 22 August 2022 (timestamp 41:57)

Looking at the individuals who signed the 2013 TAG paper, we see the revolving door of individuals moving between three organisations – the Rockefeller Foundation, GAVI and WHO – and national public health bodies.

Anne Schuchat, who signed on behalf of NCIRD, is currently a member of WHO's Health Hazards Advisory Group and a member of Stanford University's Global Emerging Infectious Diseases Advisory Committee. Formerly she was a member of GAVI's board and GAVI's Programme and Policy Committee and the Audit and Finance Committee. So, she came from GAVI to become a CDC official as director of NCIRD and then became an advisor to WHO.

Arlene King, who signed on behalf of the Ministry of Health of Canada, was a GAVI Alliance board member then she became the Chief Medical Officer of the Ontario Ministry of Health. So, she moved from GAVI to the Canadian government.

Jeanette Vega, who signed on behalf of the Rockefeller Foundation, was a former director of Rockefeller's National Chilean Public Health Insurance Agency (FONASA). Previously she was a Director at WHO and then was the Vice Minister of Health in Chile. After leaving the Rockefeller Foundation she became a director of the National Chilean Public Health Insurance Agency and later Minister of Social Development. So, she moved from WHO to the Chilean government, then to the Rockefeller Foundation and back to the Chilean government.

Roger Glass, who signed on behalf of NIH's Fogarty International Centre, received the Albert B. Sabin Gold Medal Award in 2015 which is awarded by the Sabin Vaccine Institute founded in 1993 to continue the work of developing and promoting vaccines. Sabin was best known for developing the oral polio vaccine. In 1934, Sabin conducted research at the Lister Institute for Preventative Medicine, London, and then joined the Rockefeller Institute University.

In 2017, Rajiv Shah was elected President of the Rockefeller Foundation. Previously he was a director at the Gates Foundation and then he was USAID Administrator under the Obama Administration.

Global Pandemic Preparedness

In May 2018, WHO and the World Bank formed the Global Preparedness Monitoring Board ("GPMB"). In September 2018, the GPMB convened a meeting at WHO in Geneva to discuss key issues on global pandemic preparedness. GPMB had commissioned a study which was spearheaded by the Johns Hopkins Bloomberg School of Public Health. In September 2019, GPMB published a report '*Preparedness for a High-Impact Respiratory Pathogen Pandemic*'.

EXECUTIVE SUMMARY

This report examines the current state of preparedness for pandemics caused by "high-impact respiratory pathogens"—that is, pathogens with the potential for widespread transmission and high observed mortality. Were a high-impact respiratory pathogen to emerge, either naturally or as the result of accidental or deliberate release, it would likely have significant public health, economic, social, and political consequences. Novel high-impact respiratory pathogens have a combination of qualities that contribute to their potential to initiate a pandemic. The combined possibilities of short incubation periods and asymptomatic spread can result in very small windows for interrupting transmission, making such an outbreak difficult to contain. The potential for high-impact respiratory pathogens to affect many countries at once will likely require international approaches different from those that have typically occurred in geographically limited events, such as the ongoing Ebola crisis in Democratic Republic of the Congo (DRC).

Preparedness for a High-Impact Respiratory Pathogen Pandemic, September 2019, pg. 6

The conclusions of the 2019 report included:

hydroxychloroquine as a treatment Covid. Afterwards, he left government service and is now Chief Executive Officer of the Pandemic Prevention Institute at The Rockefeller Foundation.

To sum up, wealthy organisations and individuals are getting you and your government to pay for and implement private interests through public policies. Policies that are geared towards a pre-determined conclusion that is to the benefit of those wealthy global interests.

Further reading:

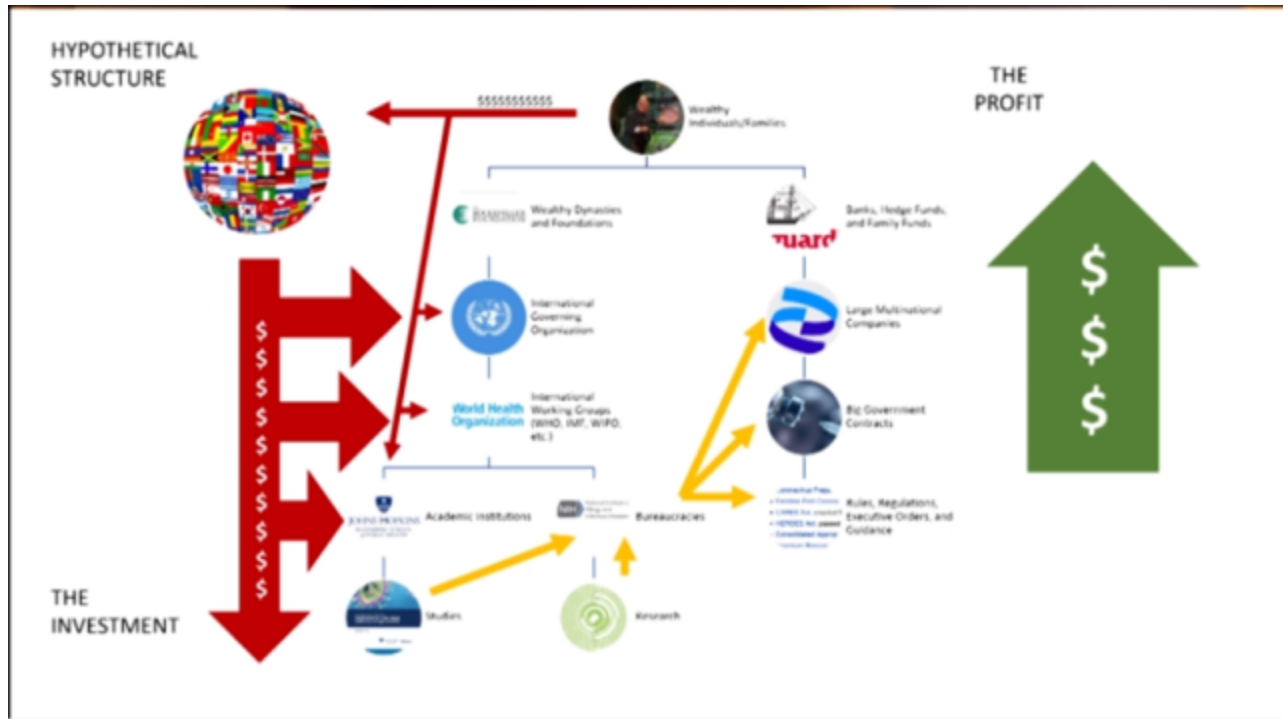
- [WHO, Bill Gates and Wellcome Trust's Global Vaccine Fund Lacks Transparency and Accountability](#)
- [How Bill Gates & Partners' money controlled the World's Draconian Covid Plan](#)
- [The Decade of Vaccination: WHO Estimates "Vaccines" Will Reduce the World's Population by 15%](#)
- [Covid Criminal Network Leads to the Gates of Hell](#)

Illustration of the Vaccine Regime Structure

Wealthy investors have created funds and foundations which then engage in various funding activities, while also being responsible for assisting politicians to be elected, or placed, into office. Once the political candidates are in office, they authorise funds to these international organisations to engage in studies, research and "collaborative" efforts.

At the same time, the foundations donate to the international organisations which gives the foundations access to and seems to help them steer the organisations toward certain conclusions.

The image below, using a hypothetical structure, illustrates how this network operates.



Shadow Government Architecture: The Vaccine Perspective, NIA Research, 22 August 2022
(timestamp 51:57)

This vaccine regime structure, as with other shadow government infrastructures, has been built using our money and our elected health officials are enabling it. They have weaponised our governments against us.

How do we stop this? One of the solutions is for national governments to stop funding and ban officials' participation in these international organisations' activities. And, those officials who have been involved in such activities should submit to a public civilian inquiry.



Shocking Investigation discovers a World-Wide Shadow Government has infiltrated "Elected" Governments and Public Health Institutions & built a Global Vaccine Regime