

Reggie Littlejohn, J.D., M.Div.

Founder and President reggielittlejohn@gmail.com +1-310-592-5722 www.AntiGlobalist.net 722 Dulaney Valley Road, Suite 325 Towson, MD 21204

WHO'S AMENDED INTERNATIONAL HEALTH REGULATIONS -- ISSUES AND CONCERNS

The IHR Amendments, passed into law by the World Health Organization on June 1, 2024, constitute a significant step toward a global, totalitarian bio-tech surveillance police state. Their adoption just hours after their disclosure is invalid and must be rejected.

- 1) **Violation of Article 55.** The manner in which these were passed flagrantly violates the WHO's own rules. Under Article 55 of the International Health Regulations, "The text of any proposed amendment shall be communicated to all States Parties by the Director-General **at least four months** before the Health Assembly at which it is proposed for consideration." That deadline passed on January 27, 2024. In defiance of this requirement, the WHO negotiated the draft Amendments until the last minute, releasing the final text **just hours** before the final vote. This violation prevented governments and civil society from being able to analyze this document and discern its implications. The WHO's tossing out of its own rule indicates its disregard for the rule of law. For this reason, The Amendments to the IHR are **invalid and should be rejected.**
- 2) **Violation of National Sovereignty.** Article 4, "Responsible Authorities," requires all State Parties to create one or two entities, the "National IHR Authority" and "National IHR Focal Point." These entites "shall coordinate the **implementation** of these Regulations within the jurisdicaion of the State Party." This implementation shall include "adjusting their domestic legislative and/or administrative arrangements."
 - Requiring the U.S. to enact legislation consistent with the implementation of WHO directives violates the <u>1948 Joint Resolution</u> by which the United States joined the WHO. Section 5 states: "In adopting this joint resolution, the Congress does so with the understanding that nothing in the Constitution of the World Health Organization in any manner commits the United States to enact any specific legislative program regarding any matters referred to in said Constitution."
- 3) **Surveillance and Censorship.** Annex 1,A.2.c. requires State Parties to "develop, strengthen and maintain core capacities... in relation to... **surveillance**... and risk communication, including addressing **misinformation and disinformation**."

The requirement that nations "address" "misinformation and disinformation" is fraught with opportunities for abuse. None of these terms is defined in the document. Does "addressing" it mean censoring it, and possibly punishing those who have offered divergent opinions?

The "surveillance" requirement does not specify what is to be surveilled. The IHR amendments, however, should be read together with the proposed Pandemic Treaty,

which the WHO is continuing to negotiate. Article 5 of the most recent draft of the Treaty sets forth the "One Health Approach," which connects and balances human, animal, plant and environmental health, giving a pretext for surveillance on all these fronts.

Further, Article 4 of the draft Treaty, "Pandemic Prevention and Public Health Surveillance," states at 2 bis: "The Parties recognize **that environmental, climatic, social, anthropogenic [climate change caused by people], and economic factors** increase the risk of pandemics and endeavor to identify these factors and take them into consideration in the development and implementation of relevant policies . . ."

Through the "One Health" approach -- set forth in the Pandemic Treaty, which is to be interpreted together with the IHR Amendments -- the WHO is asserting its authority over all aspects of life on earth, all of which will be surveilled.

4) **Health Documents Leading to Digital IDs**. Article 35 of the Amended IHR details the requirements of "Health Documents," including those in digital format. The system of digital health documents is consistent with, and in my opinion a precursor to, the Digital IDs described by the <u>World Economic Forum</u>.

According to a <u>WEF Chart</u>, people will need a Digital ID to: access healthcare insurance and treatment; open bank accounts and carry out online transactions; travel; access humanitarian services; shop and conduct business transactions; participate in social media; pay taxes, vote, collect government benefits; and own a communication device [such as a cell phone or a computer].

In other words, individuals will need Digital IDs to access almost every aspect of civilized society. All of our actions, taken with the use of Digital IDs, will be tracked and traced. If we step out of line, we can be punished by, for example, being severed from our bank accounts and credit cards – similar to what happened to the Canadian Truckers. Digital IDs are a form of mass surveillance and totalitarian control. These Digital IDs are currently being rolled out by the World Health Organization in collaboration with the European Union.

5) **Perpetual Authority Between Pandemics.** It is concerning that the IHR Amendments mention "pandemic emergency" 16 times. "Pandemic emergency" is a euphemism for a potential pandemic. See Article 1, Definitions. The Amendments to the IHR expand the WHO's authority beyond actual pandemics to *potential* pandemics – as decided by the Director General.

It is also troubling that the words, "prepare" or "preparedness" are used nine additional times in the Amended IHRs as compared with the 2005 IHRs. This repeated emphasis on preparedness expands the authority of the WHO from response during a pandemic to times between pandemics. Since nations must always be in a state of preparedness, the WHO will be exercising its expanded authority in perpetuity.