

BACKGROUND PAPER ON THE PROPOSED TRANSFORMATION OF THE W.H.O.

With the active support of the Chinese Communist Party, the World Economic Forum, the European Union, Bill Gates, Big Pharma, and the Biden administration, two accords are being finalized that would give the World Health Organization (WHO) wholly unprecedented *and actually unconstitutional* powers over the United States and her people.

If adopted, these two proposed governing protocols – a package of major amendments to the WHO's existing International Health Regulations (IHRs) and a new treaty being described as the Pandemic Agreement – could threaten national sovereignty, undermine states' rights, and imperil constitutional freedoms and basic individual liberties.

Specifically, the WHO and its unelected officials would be granted the authority to restrict U.S. citizens' rights to freedom of speech, privacy, movement (especially travel across borders), choice of medical care and informed consent. The WHO would also be empowered to ignore intellectual property rights and impose a massive and unaccountable surveillance system on the world. Most significantly, the proposed instruments would violate Americans' basic civil rights under the First, Fourth, Fifth, Tenth and Fourteenth Amendments.

The following are of particular concern:

1. If the two proposed governing protocols are adopted, the WHO would be transformed from an advisory, charitable organization into the world's governor of public health, whose orders must be obeyed.

The World Health Organization was founded in 1948 as a specialized agency of the United Nations with a mandate to coordinate international health issues. The WHO carries out its mandate issuing guidance, making recommendations, and establishing protocols for dealing with medical emergencies. Currently, the World Health Organization (WHO) is in the final stages of considerably amending its existing International Health Regulations (IHR) and negotiating an international Pandemic Treaty. The ostensible purpose is to enable a global response to "Public Health Emergencies of International Concern" (PHEICs).

Although the WHO does not presently have the authority to enforce its recommendations, under the proposed IHR amendments and new Pandemic agreement, both of which would be binding, the WHO would gain the authority to issue mandates, not simply give advice, transforming its role from an advisory and charitable agency to one that will govern public health worldwide.

During a declaration of an actual or potential PHEIC, the IHRs would be in force. The Treaty would always be in force.

2. The proposed IHR amendments and Pandemic Treaty confer essentially unlimited powers over public health globally to the WHO's Director-General.

The IHR amendments would require states parties to surrender sovereignty over public health to the WHO's unelected and unaccountable Director-General, who would – among other things – be empowered to direct nations as to what laws they must pass and enforce. For example, the IHR amendments insert the word “shall” a total of 168 times. The clear intent and meaning of these changes is to establish that such dictates will be mandatory for member countries to follow, especially during a declared “emergency.” (Note that the protocols establish compliance and implementation committees, as well as a “focal point” in each country to report back to the WHO on compliance. Moreover, the defined scope of the proposed IHR has been expanded to include “all risks with a *potential* to impact public health” (*Article 2, Scope and purpose*).¹

Moreover, if the proposed IHR changes and Pandemic Treaty are adopted in late May 2024, America's elected representatives would no longer solely set our public health policies. Instead, they could be dictated by the WHO's Director-General, who would be authorized to declare unilaterally public health emergencies of regional or international concern. Such declarations can include perceived or potential emergencies other than pandemics, including for example: climate change, immigration, gun violence or even emergencies involving plants, animals, or ecosystems. And, under the WHO's proposed agreements, American citizens would be obliged to comply with whatever the Director-General says must be done about these emergencies.

3. Both the proposed Pandemic Treaty and IHR indicate a disconcerting intent to suppress free speech criticism of public health concerns, establish global surveillance, and support the proliferation of potential biological weapons.

Other problems abound with the WHO's Pandemic Treaty and International Health Regulations amendments. For example, they would require the establishment of a global surveillance state that threatens the basic privacy rights of all Americans and reflects the organization and its partners' determination to suppress free speech that is at odds with the WHO's public health policies. While nominally promoting “unhindered” access to information (*Treaty Article 3. General principles and approaches*),² there is a contradictory requirement for nations to “combat false, misleading, misinformation or disinformation” (*Treaty Article 18, Communication, and public awareness*).³ Notably, under these protocols, social media could be

¹ https://apps.who.int/gb/wgihhr/pdf_files/wgihhr2/A_WGIHR2_7-en.pdf. (page 3)

² https://apps.who.int/gb/inb/pdf_files/inb7/A_INB7_3-en.pdf. (page 7)

³ https://apps.who.int/gb/inb/pdf_files/inb7/A_INB7_3-en.pdf. (page 22). The Treaty defines “infodemic” as “too much information, false or misleading information, in digital and physical environments during a disease outbreak. It causes confusion and risk-taking behaviors that can harm health.” It then requires “Parties” to engage in “infodemic management at local, national, regional and international levels.” Treaty at pp. 5, 13. The Treaty also requires that Parties “harmonize ... regulatory requirements” (p. 20) so it contemplates that each government will bind private parties, including any that contribute to the “infodemic.” The First Amendment prohibits this kind of speech control.

monitored and censored; citizens could be inoculated and subjected to lockdowns at the sole discretion of the WHO; and Americans' medical data, from birth to death, could be shared globally.

Both documents also support the proliferation of potential biological weapons. While the stated goal of the Pandemic Treaty is to reduce pandemics, it establishes a "Pathogen Access and Benefit-Sharing System" (*Treaty Article 12, Access and benefit sharing*)⁴ that requires nations to share "potential pandemic pathogens" – a formula for proliferating potential biological weapons, which increases the risk of pandemics.⁵

Furthermore, the WHO's Director-General would appoint experts to supervise genetic engineering and Gain-of-Function research on potential pandemic pathogens (*Article 24, Scientific Advisory Committee*), which appeared in the February 14, 2024, draft of the Pandemic Treaty.⁶ Such research will further increase the risk of escape of highly pathogenic microorganisms. A serious effort to prevent pandemics would require the WHO to end such dangerous research.

4. Implementation of public healthcare policy is a state, not federal, responsibility.

The responsibility to define and implement public health policies is not an enumerated power in the U.S. Constitution, and therefore is an authority reserved to the states. The federal government cannot transfer authority for U.S. public health policy to the WHO because it is not, in fact, entitled to exercise such authority, let alone relinquish it to a foreign entity.

The Biden administration is, nonetheless, strongly supportive of both of the proposed WHO accords. The U.S. State Department has indicated that it does not intend to request Senate advice and consent on the IHR amendments or the Treaty. And the U.S. Senate has, to date, refused to agree to require either or both to be submitted pursuant to its constitutional role in the ratification of such accords.^{7 8}

It falls, therefore, to the states' Attorneys General to stand against these agreements and thereby safeguard such state prerogatives and their constituents' medical freedom, lest one or both be irreparably harmed.

Resources:

<https://SovereigntyCoalition.org>

<https://DoortoFreedom.org>

<https://State-Shield.org>

⁴ https://apps.who.int/gb/inb/pdf_files/inb7/A_INB7_3-en.pdf. (page 16)

⁵ <https://brownstone.org/articles/who-amendments-increase-man-made-pandemics/>

⁶ https://doortofreedom.org/wp-content/uploads/2024/02/INB8_Chapter-III.pdf

⁷ <https://www.ronjohnson.senate.gov/2023/2/sen-johnson-leads-colleagues-in-effort-to-protect-american-sovereignty-against-world-health-organization>

⁸ <https://oversight.house.gov/hearing/reforming-the-who-ensuring-global-health-security-and-accountability/>

