#StopTheWHO: How You Can Take a Stand Against International Health Regulation Amendments

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#StopTheWHO

The WHO is making a power grab over our health sovereignty by changing the International Health Regulations

In May 2022, World Health Organization (WHO) intends to amend the International Health Regulations to give greater control to itself and Tedros Ghebreyesus, Director-General of WHO. This pushes our world towards a centralized governance model of worldwide health surveillance, reporting, and management, where the people have no say.

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Open Letter – #StoptheWHO Call to Action: Oppose International Health Regulation Amendments this May 2022

WORLD COUNCIL FOR HEALTH

TO: The People of Our World and all Sovereign Nations

CC: World Health Assembly representatives

CC: The WHO and the United Nations

Background

The <u>International Health Regulations</u> (IHR) was adopted by 194 member states of the World Health Organization (WHO) in 2005. They enable the WHO to declare a Public Health Emergency of International Concern (PHEIC) if it decides that an infectious disease outbreak has occurred in a member state, but with the consent of the member state. The <u>World Council for Health</u> (WCH) acknowledges this aspect of the *current* regulations because it recognizes the sovereignty of nations that adopted the IHR. *But that is about to change.*

Key Issues to Understand

On January 18th 2022, the United States Department of Health and Human Services proposed amendments to the IHR. These amendments give control over the declaration of a public health emergency in any member state to the WHO Director-General – even over the objection of the member state. The Director-General communicated the text of the proposed amendments on 20 January 2022, via a circular letter to State Parties.

The proposed IHR amendments also cede control to WHO "regional directors," who are given the authority to declare a Public Health Emergency of Regional Concern (PHERC). Moreover, the proposed amendments allow the Director-General to ring an international alarm bell, by unilaterally issuing an "Intermediate Public Health Alert (IPHA)."

Properly understood, the proposed IHR amendments are directed towards establishing a globalist architecture of worldwide health surveillance, reporting, and management. Consistent with a top-down view of governance, the public will not have opportunities to provide input or criticism concerning the amendments. This, of course, is a direct violation of the basic tenets of democracy and can be compared to the *separate* new pandemic treaty.

Summary of Selected Proposed Amendments to the IHR

The WHO intends to amend <u>13 IHR articles:</u> 5, 6, 9, 10, 11, 12, 13, 15, 18, 48, 49, 53, 59

1. Increased surveillance: Under Article 5, the WHO will develop early warning criteria that will allow it to establish a risk assessment for a member state, which means that it can use the type of modeling, simulation, and predictions that exaggerated the risk from Covid-19 over two years ago. Once the WHO creates its assessment, it will communicate it to inter-governmental organizations and other member states.

- 2. **48-hour deadline:** Under Articles 6, 10, 11, and 13, a member state is given 48 hours to respond to a WHO risk assessment and accept or reject on-site assistance. However, in practice, this timeline can be reduced to hours, forcing it to comply or face international disapproval lead by the WHO and potentially unfriendly member states.
- 3. Secret sources: Under Article 9, the WHO can rely on undisclosed sources for information leading it to declare a public health emergency. Those sources could include Big Pharma, WHO funders such as the Gates Foundation and the Gatesfounded-and-funded GAVI Alliance, as well as others seeking to monopolize power.
- 4. Weakened Sovereignty: Under Article 12, when the WHO receives undisclosed information concerning a purported public health threat in a member state, the Director-General may (not must) consult with the WHO Emergency Committee and the member state. However, s/he can unilaterally declare a potential or actual public health emergency of international concern. The Director General's authority replaces national sovereign authority. This can later be used to enforce sanctions on nations.
- 5. **Rejecting the amendments:** Under Article 59, after the amendments are adopted by the World Health Assembly, a member state has *six months* to reject them. *This means November, this year.* If the member state fails to act, it will be deemed to have accepted the amendments in full. Any rejection or reservation received by the Director-General after the expiry of that period *shall have no force and effect.*

The World Council for Health's Position On Proposed IHR Amendments

The WCH opposes the unnecessary and dystopian move toward centralized control of public health. This proven harmful model assumes that only one entity, WHO, understands how to manage the health policy of every state – and by implication, the health of each and every individual. It also assumes, incorrectly, that Big Pharma's controversial model of medicine which is the WHO's preferred model – is the expert guide to better health and wellness.

These proposed IHR amendments will be voted upon at the next World Health Assembly, which will take place in Geneva, May 22 to 28, 2022. The <u>official agenda</u> item is 16.2. It is not clear if the event will be broadcast for transparency. Thus, the WCH believes that it is essential to campaign against the proposed amendments and to build alternative pathways.

Why People Must Take Action Together

Due to the <u>influence of private money</u> at the WHO, a review in the Journal of Integrative Medicine & Therapy stated that the corruption of the WHO is the "biggest threat to the world's public health of our time." This is particularly true in relation to WHO drug recommendations, including its "list of essential medicines," which a growing number of people believe is biased and unreliable.

Moreover, even though WHO's <u>documents</u> highlight voice, agency, and social participation as drivers of equity and democracy, it is unknown World Health Assembly delegates who get to make decisions for us. To date, 13 days away from the World Health Assembly 75, the secretive list of each <u>country's delegates</u> has been not been published. This is censorship.

Given consistent evidence that WHO is <u>heavily conflicted</u> and controlled by various industries, its usefulness as a guide to public health must be critically re-evaluated, while alternative paradigms and models for ethical health guidance and human rights are built.

Global #StopTheWho Campaign Activated

It is going to take each and all of us to campaign against the power grab through the IHR Amendments, this May, and onwards to November – just six months away. In the best campaigns for human rights, multi-pronged strategies are effective. *Here are some ideas:*

- 1. Speak: Raise awareness on the ground and online. Use articles, posters, videos
- 2. Act: Campaign through rallies, political mobilization, legal notices, and cases, etc.
- 3. Collaborate with health freedom coalitions such as the World Council for Health
- 4. Explore activist toolboxes such as: www.dontyoudare.info and stopthewho.com
- 5. Engage global indigenous leadership to take a united stand against the WHO's IHR
- 6. Notify World Health Assembly country delegates to oppose the IHR amendments
- 7. Activate people's parliaments, legislatures or referendums to oppose power grabs

You will also find #StopTheWho campaign resources uploaded to the World Council for Health website in the next few days.

Collectively, we are in the greatest awakening in history. Given our experiences the last 2 years, we know that we are the ones we have been waiting for. If not us, then who? If not now, then when? Let us join hands in taking back our health, our freedom, and our power. In Unity for Health, Freedom, and Sovereignty,

World Council for Health (www.worldcouncilforhealth.org)

Document prepared by: Law and Activism Committee (LAC)

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