

Published on: 8 February 2023

## **We do not need more International Health Regulations - It is the WHO that needs to reform**

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We read with interest the suggestions of Jackson and colleagues (1) in the context of the revision of the International Health Regulation and the WHO's proposed pandemic treaty. By narrowly framing the acrimony around the COVID-19 pandemic responses, as a dispute between resource-poor countries (LMICs) on the one hand and industrially developed countries on the other, the authors seem to be missing the woods for the trees.

The lockdowns, vaccine mandates and restrictions on the freedom of movement of the unvaccinated, were violations of the Nuremberg Code (2) and an assault on the freedoms enshrined in the Universal Declaration of Human Rights (3). People from both rich and poor nations were adversely affected.

The prescriptions were irrational as they were unreasonable. Children were kept out of schools although the majority were not at risk of harm from contracting COVID-19 and they had the potential to safely increase herd immunity if only the vulnerable were isolated. Vaccine passports, which allowed vaccinated persons travel privileges, were perpetuated even after it was known that the vaccine would not stop the person-to-person spread of the disease.

The public protested these encroachments on their freedoms and rights in many industrialised countries, in both democratically elected countries like Canada (4) France (5) Australia (6) New Zealand (7) and also in China with its draconian laws (8). In the end, even China was forced to bow down to public pressure (9).

The WHO must take responsibility for its part in all this mayhem.

Article 37 of the WHO's constitution states: "In the performance of their duties the Director-General and the staff shall not seek or receive instructions from any government or from any authority external to the Organization. They shall refrain from any action which might reflect on their position as international officers. Each Member of the Organization on its part undertakes to respect the exclusively international character of the Director-General and the staff and not to seek to influence them (10).

Yet today the WHO's program direction seems to be dictated by private entities who make voluntary contributions, constituting up to 80% of its budget. These voluntary donors include the Bill and Melinda Gates Foundation and pharmaceutical companies with vested interests, who are allowed to earmark their contributions for specific projects (11).

In the face of waning credibility, the WHO is seeking more powers for the WHO Director-General to declare a Public Health Emergency of International Concern (PHEIC) and then take over the authority

of national governments to detain its citizens, restrict their travel and force testing and vaccination (12).

Jackson et al have suggested that poor nations can play hardball using their clout in numbers, but there is little unity of purpose among these nations (1). It is also suggested that scientists from developing countries must be given a place on the table, but understanding how beholden they are to charities and pharma for funding their laboratories, this seems a futile exercise.

To stay true to its constitutional obligations, the WHO must accept only voluntary contributions it can use by its priorities not donations for specific programmes. Unless this happens the WHO will not retain credibility as a scientific body or trust as an advisor on matters of health. On the other hand, if it happens there will be no need for coercive pandemic laws because people will follow its advice from self-interest. Notwithstanding this, if the WHO frames new rules to arrogate more powers to itself, the public has demonstrated that they can wrest their freedoms no matter how powerful the forces are against them.

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