

Fighting “Recolonization”

The new World Health Organization (WHO) pandemic treaty

The core issue: The WHO is currently negotiating two instruments designed to provide it with new and bigger powers. This includes: (1) amendments to the International Health Regulations (IHR); and (2) a new treaty. These instruments would give the WHO Director General (DG) authority to personally declare a Public Health Emergency of International Concern (PHEIC). Both are particularly aimed at disease outbreaks, considered by WHO to be higher in the African context of Low-Income Countries.

The listed DG’s recommendations that African countries will “undertake” to follow include border closures, lockdown of individuals (as happened with Covid-19), and mandated medical examinations and vaccination, against the principles of informed medical consent and ethics (as happened with Covid-19). Under this move, African countries will also agree to suppress information and opinion contrary to WHO’s advice. They will be inspected to ensure compliance with WHO’s directives; they will be asked to contribute financially to “pandemic preparedness” to help wealthy countries, diverting resources from their own major health needs such as malaria, TB and malnutrition.

The Covid-19 response centralized control, and further concentrated wealth in high income countries. It expanded an increasingly colonialist agenda in Africa with substantial economic, human rights, socio-cultural and political consequences. The lockdown regulations were a class- based and unscientific instrument, harmful to lower-income people and useless for crowded informal settings as in urban parts of Africa. At the same time, and as predictable, the indigenous national response was stifled and rendered inoperable.

This new agenda will institutionalize loss of health sovereignty and of economic independence. **The two WHO instruments will be discussed, and probably voted upon, at the World Health Assembly in May this year.**

Great Concerns & Consequences:

- WHO is significantly privately funded by corporations and individuals based in wealthy countries who directly benefit from the pharmaceutical and digital health aspects of these proposals.
- Most WHO funding is now determined by its largest funders – wealthy countries with strong Pharma sectors (US and Germany), and the Bill and Melinda Gates Foundation.
- WHO’s track record in the Covid-19 response is poor, including promotion of:

- Policies that have been previously acknowledged by WHO to cause significant collateral harm, and disproportionately impacting low-income populations and countries in Africa.
- Mass vaccination against Covid-19 of African populations known to be very low risk due to young age and already having immunity, diverting resources from malaria, TB, HIV and other urgent health challenges.
- Disruption of economies and education, entrenching future poverty and multi-generational inequality, and expanding national debt directly correlated to the debt crisis in Africa today.

The Way out:

Great caution is needed. These new powers should not be considered. Instead, an Africa-sensitive approach should replace the increasingly colonialist approach of those who now control WHO's agenda. African governments must demand the right to review the role of Western-based international health entities, and to re-orient international public health to a population-based and disease burden-based approach. **Such a review needs to be driven and managed primarily by African countries themselves, as they are the bearers of the major health burdens, not by those that house the beneficiaries of the new approach. The loss of health sovereignty by African nations might be the precursor to loss of national and political sovereignty!** Opportunities now exploited by African nations post-COVID for national development and competitiveness may be slowed or even lost if the “interests” of this sweeping power are not properly held to account.

What to Do Now:

- 1 – Circulate this message on WhatsApp
- 2 – Lobby your representatives: municipal, parliamentary, ministerial
- 3 – Tell everyone you know
- 4 – Follow us on X/Twitter: @Africahealth24

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