

# WHY DO GLOBAL HEALTH (GH) ORGANIZATIONS FAIL THEIR MISSION?

*Pourquoi les organisations de santé  
mondiale échouent dans leur mission?*

*Conférence: Coup d'état sanitaire planétaire?*

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A truly functional GH organization could be a blessing!

- What would be wrong with a competent and transparent GH organization coordinating the fight against major and globally relevant health problems and harmonizing world-wide GH strategies?

# Insanity often starts with self-overestimation and unrealistic projections....

- “GH initiatives should accelerate the development, production, and equitable access to **COVID-19 tests, treatments, and vaccines.**” [global access] (<https://www.who.int/initiatives/act-accelerator/covax>)
- “If the WHO is **to take the lead** in expanding global vaccine manufacturing, **it needs the support of wealthy countries** and the cooperation of **large pharmaceutical companies that have the patents and know-how...**” ([http://www.who.int/influenza\\_vaccines\\_plan/news/gap3\\_Nov16/en/](http://www.who.int/influenza_vaccines_plan/news/gap3_Nov16/en/))\*
- “We could also allow voluntary vaccination (i.e., of high-risk groups and HCWs). Voluntary vaccination could produce larger-scale data on the safety and dosing of vaccines...”

\* ‘Key elements of sustainability for influenza vaccine manufacturing in low and middle income countries’

# Complete financial and operational dependence combined with artificial complexity only fosters insanity

- GH organizations don't have the financial capacity (donations) and/ or infrastructure and/ or hands-on expertise and/ or know-how and/ or patents to ensure scientific integrity and operational independence
- None of the above can be compensated by 'formalities', 'dogmas', 'complex' structures or 'divide and rule' strategies...

(titles/ academic CVs; institutionalization [complex hierarchical structures/ supportive bodies/nomenclature/meetings] and adherence to conservative principles [*'vaccines protect against disease and are major tool of pandemic preparedness'*])

# GH organizations suffer from biological ignorance and are detached from reality

- Industry makes naïve GH authorities believe that their modern vaccine technologies will enable pandemic preparedness. This gives Industry a unique opportunity to experimentally test therapeutic platforms (aimed at personalized vaccination) in large human populations
- In their incredibly naive belief that through technology, they can control biology, GH authorities and their world-class advisers have been seduced into pursuing sophisticated technologies without fully understanding their biological impact
- Poor understanding of population-level host-pathogen interactions and immunology as well as lack of pragmatism and intellectual versatility ('creativity'!) is a recipe for poor sound judgement
- GH authorities/ experts do not understand that - to have a meaningful public/ global health impact - immune interventions should move away from an empirical to a holistic (i.e., multidisciplinary) rational approach

# Own agendas and conflicts of interest ruin scientific and ethical integrity

- Corruption always and exclusively occurs at the very top of the organizations where influential individuals put their own self-interest above public interest
- But even at the level of the organization, GH bodies are not truly collaborating (lack of transparency and open debate/ communication) → divide and rule...
- Given the widespread disastrous consequences, it seems strange that GH organizations benefit from an incredibly high level of tolerance towards mistakes/ failure. Why are these organizations granted autonomy, freedom of action, privileges and immunity from jurisdiction????

# Scientific evidence of WHO's incompetence

- All of this explains why WHO and other GH institutions are dysfunctional and **not prepared at all to solve GH problems.**
- GH organizations not only miserably failed their 'global access' mission but have become notorious for making decisions/ recommendations that are detrimental to human health:
  - Two blatant examples of the incompetence of these organizations (WHO in particular):
    - Ebola vaccine trials using Merck's live attenuated rVSV-ZEBOV vaccine during the West Africa Ebola epidemic (2014-2016). WHO's vaccine initiative violated a fundamental rule in vaccinology, which is to *not vaccinate during the incubation time of a pathogenic infection* (<https://www.voiceforscienceandsolidarity.org/scientific-blog/guinea-the-ebola-vaccine-trial-and-the-reported-interim-results>)
    - Rapid and large-scale deployment of 'experimental' vaccines during SARS-CoV-2 pandemic (based on erroneous interpretation that this pandemic constituted a health emergency of international concern).  
Mass vaccination programs imposed by health authorities and policy makers violated another fundamental rule in vaccinology, which is to *not vaccinate during maturation of a virus-neutralizing immune response*. **This is a recipe to prevent herd immunity and to turn highly vaccinated populations into a breeding ground for immune escape variants**

# The Ebola vaccine trial and the reported interim results

(Lancet 2017; 389: 505–518)

- ALL of the Ebola cases that were diagnosed in vaccinees occurred shortly (i.e., within max 6 days) after vaccination regardless of whether the vaccination was immediate or delayed.
- *WHO has been asked for data on the case fatality rate of Ebola cases that occurred in the vaccinated compared to the nonvaccinated rings but this information has never become available.* The study reports 15 deaths resulting from Ebola disease and there is a sound scientific rationale to believe that a significant number of these deaths may have occurred in vaccinated cases

## **Conclusion:**

*The comparison between case fatality rates in vaccinated as compared to non-vaccinated cases included in the primary analysis remains our single best chance for further investigating whether ring vaccination with rVSV-ZEBOV in particular, and live viruses in general, is likely to result into exacerbation of Ebola disease in previously exposed contacts.*



# The Inescapable Immune Escape Pandemic

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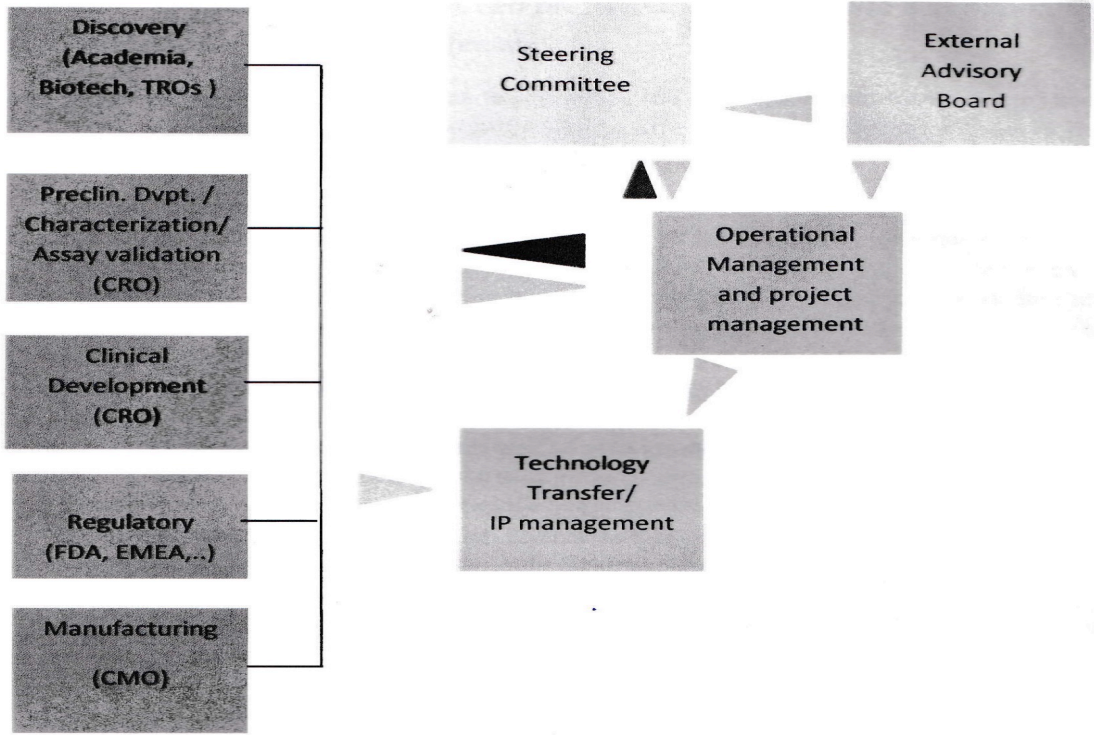
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**T**his book delves into various aspects of the evolutionary consequences stemming from the widespread COVID-19 vaccination program. It stands out by emphasizing the scientific intricacy of population-level interactions between the SARS-CoV-2 virus and the host immune system. These interactions are not only complicated but also varied, depending on the infectiousness of the circulating variant and the type of immunity induced (infection-based versus vaccine-based). The book demonstrates how mass vaccination influences these interactions, transforming a natural pandemic into one characterized by immune escape variants. I caution that the ramifications of this could lead to uncontrollable evolutionary viral dynamics due to insufficient herd immunity and potentially cause a massive rebound effect from the hasty and ill-advised deployment of new vaccine technologies (such as rapid mass vaccination during a pandemic). Additionally, I discuss how the adaptability of the human immune system has postponed the emergence of a more virulent variant, contrary to my initial predictions. While some sections may be challenging to comprehend, if the book aids in understanding the complexity of these issues and highlights nature's superiority over the overconfidence of technocrats, my primary objective for writing will be fulfilled.

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# There is only one GH emergency of international concern, which is to dismantle the WHO

- Given the huge negative impact on individual and global health, mistakes violating fundamental scientific concepts cannot be tolerated. Those who are responsible and refused to consider any type of debate with experts holding different science-based opinions should be held accountable for the consequences of their decisions.
- Who understands how WHO recommends mass vaccination with vaccines the target product profile of which is not suitable for fighting a CoV pandemic?
- Who wants to be ruled by WHO, a dysfunctional & incompetent organization? WHO is all about façade, not about content. They are not solving the real GH problems, they are the GH problem.
- Who approves WHO's role as a regulatory body?
- However, criticizing current GH structures, organizations and policies will fall on dead ears if no informed, constructive and credible alternatives are proposed.



Schematic overview of virtual GH vaccine 'company'

# Democratic harmonization is the way to go...

- When it comes to solving true health emergencies of global concern, I still believe that recommendations to harmonize life-saving health initiatives would be readily followed provided broad and sound scientific support and full transparency.
- As far as pandemics (of acute self-limiting infections/ diseases) are concerned, vaccine mandates shouldn't even be considered part of the solution.
- I maintain that childhood vaccinations of immunologically naïve subsets in populations which developed herd immunity is entirely justified to prevent gaps in herd immunity (e.g., M, M, R).  
However, we should strive to develop new immune interventions that enable training of innate immunity without using live attenuated childhood vaccines.