

Grievance Registration No.: DHLTH/E/2023/0017989

**LAWYERS, DOCTORS and CITIZENS ACROSS INDIA  
WRITE TO THE MINISTER, HEALTH AND FAMILY WELFARE**

**THE DRAFT 'GLOBAL PANDEMIC ACCORD' OF THE 'WHO' IS ULTRA VIRES OF THE  
CONSTITUTION OF INDIA AND INDIA CANNOT BE A SIGNATORY TO IT**

**The Hon'ble Prime Minister of India  
Shri Narendra Modi**  
Prime Minister's Office, South Block,  
New Delhi- 110011

**The Hon'ble Minister of Health and Family  
Welfare**  
**Shri Mansukh L. Mandaviya**  
Ministry of Health & Family Welfare,  
Room No. 201-D, Nirman Bhawan,  
New Delhi – 110011

**16 Dec. 2023**

**Dear Shri Narendra Modi & Shri Mansukh Mandaviya,**

1. We<sup>1</sup> hasten to write to you on the above subject. We learn with deep anxiety that the World Health Organisation (WHO), released a Zero Draft of the WHO CA+ (Global Pandemic Treaty, now called an 'ACCORD') with 38 Articles on 1st February 2023 and subsequently, another draft of the 'Accord' with 41 Articles on 2nd June 2023.  
[https://apps.who.int/gb/inb/pdf\\_files/inb4/A\\_INB4\\_3-en.pdf](https://apps.who.int/gb/inb/pdf_files/inb4/A_INB4_3-en.pdf)
- 1.1. The proposed 'Accord' marks a fundamental change in how the WHO will function, as it seeks secretively, behind closed doors, sweeping powers under its Director General, to be in control of a global government on health, "in a *One Health approach*" (ref.26 & 27); and not just on health, but expanding into the food economy and environment as well. Therefore, the WHO can, at will, call a pandemic, 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, requiring vaccine passports (forced testing and vaccination), increased social media censorship etc. The proposed "*pandemic treaty*" would also operate as a "framework convention" that's on-going, year after year, indefinitely.
- 1.2. The language of the Treaty/Accord in some clauses appear to make the right 'noises' relating to human rights, national sovereignty/domestic laws. But, not only are there deep contradictions in the clauses, but the intention is clear when the Amendments to the IHR 2005 (International Health Regulations) are quietly written into the text of

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<sup>1</sup> **The Authors of the Letter-Doc:** Members of the CORE IBF group, principally, Dr Jacob Puliyeel, Dr Amitav Banerji, Narasimha Reddy Donthi, Aruna Rodrigues.

the 'Accord' (ref. 8 & 48). In so doing, the 'Accord' proceeds to facilitate a dictatorship role for the WHO, as it moves **to acquire unfettered power on the basis of the Amendments to the IHR 2005 (Ref.<sup>2</sup>)** <https://brownstone.org/articles/amendments-who-ihr-> In this connection, Sir, we alerted you by email on 29 Nov. 2023, with regard to a Citizens' of India rejection of the IHR Amendments (ref<sup>3</sup>)

1.3. **Totalitarian Powers & Unconstitutionality of the Two Instruments:** Therefore, the two instruments, the 'Accord' and the Amendments to the IHR 2005, have been planned to operate in parallel, precisely in order to give draconian powers to the WHO as the global 'health' authority. Both texts irremediably entail the transfer to the WHO of the power to threaten health freedom, there-by representing a fundamental threat to national, medical and bodily autonomy:

- The WHO can issue a binding advice to member states instead of a non-binding advice (art. 1).
- The binding recommendations can include a vaccination requirement (article 18)
- Implementation by an implementation Committee (article 53A) and a Compliance Committee (art. 53 bis-quarter)
- States can be required to counter false and unreliable information (art. 44 - 1h -2e)
- It is expected that the amendments will include a digital vaccination passport for international travel.

[https://apps.who.int/gb/wgihhr/pdf\\_files/wgihhr1/WGIHR\\_Compilation-en.pdf](https://apps.who.int/gb/wgihhr/pdf_files/wgihhr1/WGIHR_Compilation-en.pdf)[https://apps.who.int/gb/ebwha/pdf\\_files/WHA75/A75\\_R12-en.pdf](https://apps.who.int/gb/ebwha/pdf_files/WHA75/A75_R12-en.pdf)

1.4. The WHO is an external, unelected body, which may not and cannot be appointed to such a 'dictatorship' position. All these powers are sought to be usurped in the wake of the WHO's abject failure and disastrous handling of the SARS-CoV-2 crisis, where it advocated enforced lockdowns, which destroyed the livelihoods of millions in India and across the world and a surge in mental health problems. It shut down schools putting back education of a generation and promoted incompletely tested and unapproved vaccines under EUA (Emergency Use Authorisation) that did nothing to stop person to person spread and caused a sharp rise in spike protein-induced heart and brain disease. Therefore, the WHO stands disqualified per se, even from its past mandate as the WHO in 2005.

1.5. If adopted at the 77<sup>th</sup> WHA in May 2024 by a simple majority vote and given the scope of Art. 21 of the Constitution of the WHO<sup>[4]</sup> (WHOC), the amendments to the IHR will come into force within 12 months for all countries, unless it proactively files rejections or reservations within a 10-month period in accordance with the new versions of Arts.

<sup>2</sup> **Bell D. Amendments to WHO's International Health Regulations: An Annotated Guide.** Brownstone Institute. February 2023).

<sup>3</sup> **Citizens of India** write to the Minister of Health ( **Grievance Registration Number: DHLTH/E/2023/0016961**) and the WHO rejecting the Amendments to the IHR 2005 - <https://awakenindiamovement.com/urgent-rejection-of-ihr-amendments-wha75-12/>

<sup>4</sup> <https://apps.who.int/gb/bd/PDF/bd47/EN/constitution-en.pdf?ua=1>

59, 61 and 62 IHR which have been revised in 2022<sup>[5]</sup> and will enter into force in **November 2023/1 Dec 2023**. This fast-track procedure for the entry into force of amendments will accelerate the revision process further.

- 1.6. **The core issue:** The ‘Accord’ and the IHR are manifestly violative of Fundamental Rights of the citizens of India and therefore, Ultra Vires of the Indian Constitution. In their very intent, they cancel the fundamental right to bodily autonomy and integrity, through mandating medical procedures, coercion, and further grossly illegal acts. This is a breath-taking and terrifying onslaught on fundamental civil liberties. It must be understood as fundamental, that the negation of bodily integrity of any human being means the loss of all human rights.
- 1.7. As doctors and medical scientists, any coercion runs counter to an inviolate bio-medical ethic and the Hippocratic Oath of “*do no harm*”, both of which do not allow a doctor to forcibly administer a drug to, or into any person. They contravene both the Nuremberg Code and Geneva international agreements. As citizens of democratic India, we strongly oppose any medical procedure that is forced. We quote these profound codes of medical bio-ethics, which must be kept before us:

**Nuremberg Code (1947):** “The consent of the human subject is absolutely essential. The International Covenant on Civil and Political Rights resumed this ban against unintentional experimentation, in its 1966 text, which states: no one may be subjected without his consent to medical or scientific experiment”.

**Geneva statement for doctors (1948):** “I will respect the autonomy and dignity of my patient. I will not use my medical knowledge to infringe human rights and civil liberties, even under force. I will keep absolute respect for human life, from conception. I will consider my patient’s health as my first concern”

Sir, you are sworn to the Constitution. There is little alternative, but to jettison the WHO from our National life, including its negotiating process.

We hope and trust you will examine these issues and act to uphold the sovereignty of our nation and rights of every citizen.

Thank you  
Yours sincerely,

Signatories:

**Dr. Jacob Puliyeel**, Delhi, MD,  
MRCP, MPhil, Paediatrician and  
Visiting Faculty International

**Prashant Bhushan**, New Delhi,  
Senior Advocate, Supreme Court  
of India

**Colin Gonsalves**, New Delhi,  
Senior Advocate, Supreme Court  
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<sup>5</sup> [https://apps.who.int/gb/ebwha/pdf\\_files/WHA75/A75\\_R12-en.pdf](https://apps.who.int/gb/ebwha/pdf_files/WHA75/A75_R12-en.pdf)

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**Rossamma Thomas**, Pala,  
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**Advocate L Shunondo  
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## APPENDIX 1

### FACTS JUSTIFYING SAYING “NO” TO THE WHO PANDEMIC ‘ACCORD’/IHR

#### 1. Background

- 1.1. 194 countries form the membership of the WHO. The amendments to the International Health Regulation (IHR) were adopted by the World Health Assembly on 27 May 2022 and the deadline to reject these amendments is 18 months from this date, i.e. **01 Dec 2023**. On 30 Sept. 2022, 300 amendments to the 74-page document of the International Health Regulation (IHR) 2005 were submitted and are being secretly negotiated with a view to submit it to the IHR Review Committee on 15 December 2023. The outcome of these processes has the potential to affect the livelihoods, lives, health and human rights of individuals around the world, *inter alia* because amendments proposed will, if adopted, give unique ‘emergency’ powers to the WHO and in particular its Director-General (DG), thereby entrenching the securitised approaches to managing infectious disease outbreaks embodied in the so-called Global Health Security (GHS) doctrine<sup>6</sup> that has dominated the WHO-led global response to Covid-19 into international health law.
- 1.2. The aim is to have both the treaty text and the amendments to the IHR ready for adoption at the 77<sup>th</sup> WHA in May 2024 (see para. 2(a) and 5 respectively)<sup>7</sup>. Negotiating a new multilateral treaty in less than three years is highly unusual. If adopted at the 77<sup>th</sup> WHA in May 2024 by a simple majority vote and given the scope of Art. 21 of the Constitution of the WHO<sup>8</sup> (WHOC), the amendments to the IHR will come into force within 12 months for all states, unless a state proactively files rejections or reservations within a 10-month period in accordance with the new versions of Arts. 59, 61 and 62 IHR which have been revised in 2022<sup>9</sup> and will enter into force in November 2023. Before the 2022 revision, states had 18 months to opt out of IHR amendments. This fast-track procedure for the entry into force of amendments will accelerate the revision process further.  
<https://opiniojuris.org/2023/02/27/the-proposed-amendments-to-the-international-health-regulations-an-analysis/>
- 1.3. What makes it sinister is that there has been no release of any revised version 2.0, no public comments, no debate in Parliament and no mention in the news about these amendments. Unelected, unaccountable and largely unknown delegates from 194 countries meet in Geneva during World Health Assembly meetings as they did in 2022 when they adopted amendments to the IHR, giving it a false assumption of acceptance, by all these 194 nations. The process is fraught with secrecy, autocracy and impending tyranny, blatantly devoid of any transparent, democratic process.

<sup>6</sup> <https://elibrary.duncker-humboldt.com/article/69843/do-we-need-to-protect-the-entire-world-population-from-health-threats-through-one-global-biomedical-surveillance-and-response-system>

<sup>7</sup> [https://apps.who.int/gb/ebwha/pdf\\_files/WHA75/A75\(9\)-en.pdf](https://apps.who.int/gb/ebwha/pdf_files/WHA75/A75(9)-en.pdf)

<sup>8</sup> <https://apps.who.int/gb/bd/PDF/bd47/EN/constitution-en.pdf?ua=1>

<sup>9</sup> [https://apps.who.int/gb/ebwha/pdf\\_files/WHA75/A75\\_R12-en.pdf](https://apps.who.int/gb/ebwha/pdf_files/WHA75/A75_R12-en.pdf)

These country delegates are unelected and do not represent the people of their country. How can they negotiate on behalf of Nations, let alone, an international/global health regulation binding on 194 countries?

1.4. This negligence by the leaders of the world can have serious consequences. If any world leader of a Country fails to reject the amendments to the IHR by 01 Dec 2023, that nation will by default, surrender autonomy to the unelected, unaccountable WHO in case of any future “pandemics.” One fall out among many, is that the amendments can lead to perpetual lockdowns, a permanent feature of the pandemic response. Corporate interests will dominate. It will impact in a real sense, the autonomy of nations. During a “*declared pandemic*” it will take away the right of citizens to make their own decisions. Pandemics will become self-sustaining by creating a bureaucracy whose “*existence will depend on them.*” In such a scenario, the people will be at the mercy of the police and bureaucrats who will be immune to any penalty for any acts carried out in “*good faith.*” The amendments will promote a police state. Mandatory medical procedures, forced entry into premises, forced isolation and quarantine, have all been proposed in the larger interest of humanity! It is noteworthy that India has a Supreme Court Order of “No Mandates”: (Ref <sup>10</sup>).

- In the recent pandemic even without any amendments to the IHR, most citizens of the world did undergo such experiences. It is frightening to imagine the depths of depravity one may witness when the amendments give legal sanction to such acts.

Dr David Bell, a former WHO scientist, has said that the pandemic preparedness will **pave the way to International Fascism.**

1.5. The two instruments are dangerous, terrifying power-grab tools that give the WHO a central “directing” role and monopoly power in global health governance. To clarify: via the two instruments (the ‘Accord’ and the IHR ‘Amendments’) the WHO will be granted the right to suspend National Governments, Parliament and Constitutions, in an absolute, totalitarian abuse of power, global and national; to enforce its measures with complete immunity, without accountability or liability. The main points – its powers will include:

- WHO will have sole, extensive power to declare Health Emergencies (Public Health Emergencies of International Concern PHEIC) for any POTENTIAL or real threats for extended areas, biological, climate or environment related, without any proof, and to solely decide measures & medical substances to be imposed on the public for these emergencies, without informed consent. It will include the power to censor information, including free speech, (of views opposing the official narrative put out by WHO), to be accountable to no national Parliament, or be limited by any Constitutional safeguards.

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<sup>10</sup> **Jacob Puliyeel Petitioner:** Writ Petition (Civil) No. **607 of 2021:**  
[https://www.livelaw.in/pdf\\_upload/vaccinemandate-416470](https://www.livelaw.in/pdf_upload/vaccinemandate-416470)

- 'AUTOMATISM' is being used to bypass voting by Domestic Parliaments to bring in IHR amendments that make all WHO recommendations binding, supervised & enforced.
  - **'Automatism' means: only a simple majority vote will suffice to pass the IHR in the World Health Assembly's (WHA) 77<sup>th</sup> session, May 2024. Only Governments may send a note of rejection to this WHA vote, by-passing the Rights of Citizens**
- It requires member nations to support WHO's proposed global supply network and essentially nations will have to agree to WHO's allocation of resources distribution
- It bypasses Member States' Intellectual Property Laws and would require patent holders to waive any royalty payments.

## 2. The Dismal Failure, even Fraud of the WHO's Response to SARS-CoV-2

We highlight 5 issues:

- A. The fraudulent RT-PCR:** It is very widely held by independent experts that the PCR tests grossly overestimated the prevalence of truly infected 'cases'. In testing worldwide, high Cts (Cycle thresholds) ensured false positive rates with some experts' estimates of these of up to 97%. The genesis of the flawed COVID-19 RT-PCR rests with the WHO. It agreed to the DROSTEN RT-PCR @45Cts on 13 Jan 2020, (ref. in pg. 3 of the report), even before the detection of the SARS CoV2 virus. [Protocol 13 Jan \(who.int\)](https://www.who.int/publications/m/item/protocol-13-jan-2020). The FDA withdrew its approval from all RT-PCR tests for the detection of SARS-CoV-2 infection because the virus could not be identified by the tests. [https://www.cdc.gov/csels/dls/locs/2021/07-21-2021-lab-alert-changes CDC RT-PCR SARS-CoV-2 Testing 1.html](https://www.cdc.gov/csels/dls/locs/2021/07-21-2021-lab-alert-changes-cdc-rt-pcr-sars-cov-2-testing-1.html)
- B. Overall IFR (Infection Fatality Rate):** The Infection Fatality Rate for SARS-CoV-2 is [very low](#)<sup>11</sup>. Yet, the WHO gave a wrong projection of mortality, the exaggeration causing panic in the population and paving the way for mass vaccination.
- C. The Synthetic Spike Protein of the Vaccines:** The Spike protein, on its own is the cause of the vascular, (clotting, bleeding, heart problems, and brain blood clotting) and neurodegenerative, problems, not the virus. All the Indian vaccines have the synthetic spike protein in them.
- D. Blatant Conflict of Interest**<sup>12</sup>: The WHO is entrenched in a massive Conflict of Interest, whose revenue streams accrue from 000s of vaccine patents held by them. It operates within a biopharmaceutical complex, a complicated syndicate that has formed over

<sup>11</sup> <https://www.medrxiv.org/content/10.1101/2022.10.11.22280963v1>

<sup>12</sup> **CONFLICT of INTEREST:** Letter to the PM dated 30 Dec. 2021 (Para F: pgs. 41 -48): <https://awakenindiamovement.com/the-truth-of-covid-19-the-india-statement/>

time. This means that the bio-pharmaceutical complex is in control, and instructs world health policies.

Health Agencies of National governments including India, the US, and the UK, private institutions (the WEF/B&MG Foundation/Welcome group/Pharma complex/others), and International Institutions (eg) of the WHO/UN, FAO /WTO, are involved together. Revolving door arrangements between these organizations have resulted in regulatory capture.

#### E. **Non-vaccine** therapeutic measures have been ignored.

##### 2.1. **This address<sup>13</sup> to the EU Parliament on 13 Sept. 2023** by the eminent medical scientist **Dr Peter McCullough**, authoritatively clarifies and concludes similarly:

There have been two waves of injury to the world; the 1st the SARS COVID-2 infection with its lockdowns; and the 2nd, the Covid 19 vaccines. The role of the WHO appears to be adverse in both. It has operated within a biopharmaceutical complex, a complicated syndicate that involves Non-governmental organisations and National health agencies operating as a coordinated unit. This massive conflict of interest disqualifies it from any role in World health.

### 3. **Violative of Fundamental Rights of All Countries AND the Citizens of India**

3.1. **This is the core issue.** The 'Accord' and the IHR are straightforwardly violative of Fundamental Rights of the citizens of India and therefore, Ultra Vires of the Indian Constitution. Strangely, these two instruments in their very intent, cancel 'the fundamental right to bodily autonomy and integrity, through mandating medical procedures, and with coercion, and further grossly illegal acts. This is a breath-taking and terrifying onslaught on fundamental civil liberties. **It must be understood as fundamental, that the negation of bodily integrity of any human being means the loss of all human rights.**

3.2. It runs counter to our federal structure where Health is a State subject and it is likely to be disastrous.

3.3. They are violative of **Articles 14, 19 and 21** of the Constitution of India and against the binding precedents of the Constitution Bench in **Common Cause Vs. Union of India (2018) 5 SCC 1. Article 13** of the Constitution of India says that the Government cannot make any law which is violative of **Articles 14, 21**, etc. of the constitution. The 'Accord' and the IHR are violative of **Article 7 of the International Covenant on Civil and Political Rights (ICCPR)** prepared by United Nations, which is ratified by the Government of India. It is also against the provisions of the United Nations, **Universal**

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<sup>13</sup> **Dr Peter McCullough:** Internist, the most cited cardiologist in the world, Covid expert and author/protagonist of the 'Early Treatment Protocols' for Covid, which saved hundreds of thousands of lives in the US, <https://www.bitchute.com/video/RDByBIWCd0LF/>



**Declaration on Bioethics and Human Rights, 2005 (UDBHR).** It is against the law of Informed Consent as has been laid down by the Government of India under the **Disaster Management Act, 2005**. This 'Accord' will thus effectively repeal the Epidemic Act, of 1897 which means, repeal of Section 2, which has a provision for granting compensation to every citizen if any measures such as lockdown, night curfew or restrictions are taken by the State.

- 3.4. The two WHO provisions are directly contrary to the decision of the 2017 Constitution Bench of the Supreme Court of India, wherein Justice KS Puttaswami declared that the Right to Privacy is a FUNDAMENTAL RIGHT, as well as the 2018 decision of the Constitution Bench of the Supreme Court in the case of Navtej Singh Johar, which held that the Constitution protected an individual's autonomy and choice.
- 3.5. As stated earlier, they also contravene several International Treaties and Conventions including the Nuremberg Treaty of 1947, which was enacted to ensure that no country would repeat such inhuman medical atrocities on fellow human beings. It is worth recalling that the atrocities of Nazi Germany were enabled because the *"leaders of the German judicial system, consciously and deliberately suppressed the law, engaged in an unholy masquerade of tyranny disguised as justice, and converted the German judicial system to an engine of despotism, conquest, pillage and slaughter"*.
- 3.6. This is the direction that the 'Accord' and the IHR are pointing to, the logical outcome of the provisions, for every nation that accedes to it, including by default. Membership in international organisations like the WHO may not prevent us from complying with the duties to respect, protect and fulfil human rights, (see. [para. 67](#)<sup>14</sup>, [para. 144](#)<sup>15</sup> and [Art. 61](#)<sup>16</sup>); and ensuring compliance by the WHO with their own responsibilities for human rights under its Constitution, the current Art. 3(1) IHR and [customary human rights law](#)<sup>17</sup>, which the amendments will ignore. It is unimaginable that we could be facing a threat of these proportions by the WHO IHR Amendments and Pandemic agenda, without broad support across Nations, among the higher levels of national governments.
- 3.7. We reiterate that its impacts on the Indian Nation will affect all aspects of National life. Public health for example in India, is particular and specific to the conditions in our Country. Two examples suffice -- 1400, mostly young people, die every day pf malnutrition and the Number for Tuberculosis is about the same. This dimension of our health problems was ignored in the SARS-CoV-2 pandemic. It was very imprudent to have allocated **Rs 35,000 crores** for covid-19 vaccination, which is almost 50% of

<sup>14</sup> <https://hudoc.echr.coe.int/eng#%7B%22itemid%22:%5B%22001-58912%22%5D%7D>

<sup>15</sup> <https://hudoc.echr.coe.int/eng#%7B%22itemid%22:%5B%22001-138948%22%5D%7D>

<sup>16</sup> [https://legal.un.org/ilc/texts/instruments/english/draft\\_articles/9\\_11\\_2011.pdf](https://legal.un.org/ilc/texts/instruments/english/draft_articles/9_11_2011.pdf)

<sup>17</sup> <https://www.icj-cij.org/public/files/case-related/65/065-19801220-ADV-01-00-EN.pdf>

India's health budget of **Rs 71,269 crore** allocated to the DHFW (Department of Health and Family Welfare)<sup>18</sup> -- ([here](#)).

### References:

1. The Zero Draft Pandemic Treaty: [https://apps.who.int/gb/inb/pdf\\_files/inb4/A\\_INB4\\_3-en.pdf](https://apps.who.int/gb/inb/pdf_files/inb4/A_INB4_3-en.pdf)
2. Seventh Meeting of the Intergovernmental Negotiating Body to Draft and Negotiate a WHO Convention, Agreement or Other International Instrument on Pandemic Prevention, Preparedness and Response, A/INB/7/x October 2023
3. Resumed Fifth Meeting and Drafting Group of the Intergovernmental Negotiating Body to Draft and Negotiate a WHO Convention, Agreement or Other International Instrument on Pandemic Prevention, Preparedness and Response, A/INB/5/6 2 June 2023
4. Drafting Group of the Intergovernmental Negotiating Body to Draft and Negotiate a WHO Convention, Agreement or Other International Instrument on Pandemic Prevention, Preparedness and Response, A/INB/X/X 22 May, 2023

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<sup>18</sup> <https://www.downtoearth.org.in/news/health/union-budget-2021-22-how-good-is-the-hike-in-allocation-for-health--75310>