



Wednesday 22<sup>st</sup> January, 2025

To: The Trump Administration

**Dear President Trump and Mr. Robert F Kennedy Jr.,**

**Re: Exiting the WHO and cancelling USA WHO Collaborating Center agreements**

Congratulations on withdrawing the United States of America from the World Health Organization.

To truly exit the World Health Organization, it will be essential to have both awareness and transparent knowledge of the binding agreements made with the USA WHO Collaborating Centres and USA GOARN Partner Institutions with the World Health Organization, as a matter of urgency and priority.

World Council for Health is calling for an Urgent Independent Global Review and Investigation of the World Health Organization and its established collaborations and binding agreements with so-called WHO Collaborating Centres.

This is an essential requirement to assess an honest and transparent benefit and risk of the WHO policies being deployed in sovereign nations through these established WHO networks.

The WHO's objective as stated in its Constitution, is *the attainment by all peoples of the highest possible level of health*. During the Covid-19 crisis, the WHO clearly failed to uphold this objective.

**What are WHO Collaborating Centres and what are their functions?**

Directly quoted from the WHO website:

***Definition***

*By definition, a WHO collaborating centre is an institution designated by the Director-General of WHO to form part of an international collaborative network set up by WHO in support of its programme at the country, intercountry, regional, interregional and global levels. In line with the WHO policy and strategy of technical cooperation, a WHO collaborating centre also participates in the strengthening of country resources, in terms of information, services, research and training, in support of national health development.*

*Designation is made with the agreement of the head of the establishment to which the institution is attached or with that of the director of the institution, if it is independent, and after consultation with the national government. An institution is designated initially for a term of four years; the designation may be renewed for the same or a shorter period.*

*Designation is independent of financial support being given to the institution by WHO. Grants may be made to any institution that is able to perform a specific task connected with WHO's programme but this has no relevance to the eligibility or ineligibility of an institution for designation.*

*Not eligible for designation as WHO collaborating centres are, for example, networks, working groups, partnerships and programmes; or nongovernmental organizations and similar bodies with a membership structure, including professional associations or foundations. For collaboration with nongovernmental organizations, please refer to the Principles governing relations between WHO and Nongovernmental organizations contained in the Basic Documents.*

### **Functions and role**

*The functions of the WHO collaborating centres are diverse, and may include the following:*

- *collection, collation and dissemination of information;*
- *standardization of terminology and nomenclature, of technology, of diagnostic, therapeutic and prophylactic substances, and of methods and procedures;*
- *development and application of appropriate technology;*
- *provision of reference substances and other services;*
- *participation in collaborative research developed under the Organization's leadership, including the planning, conduct, monitoring and evaluation of research, as well as promotion of the application of the results of research;*
- *training, including research training; and*
- *the coordination of activities carried out by several institutions on a given subject.*

*The WHO collaborating centres are an essential and cost-effective cooperation mechanism, which enables the Organization to fulfill its mandated activities and to harness resources far exceeding its own.*

*WHO gains access to top centres worldwide and the institutional capacity to ensure the scientific validity of global health work. Through these global networks, the Organization is able exercise leadership in shaping the international health agenda.*

*Conversely, designation as a WHO collaborating centre provides institutions with enhanced visibility and recognition by national authorities, calling public attention to the health issues on which they work. It opens up improved opportunities for them to exchange information and develop technical cooperation with other institutions, in particular at international level, and to mobilize additional and sometimes important resources from funding partners.*

*The main role of the WHO collaborating centres is to provide strategic support to the Organization to meet two main needs:*

- *Implementing WHO's mandated work and programme objectives*
- *Developing and strengthening institutional capacity in countries and regions.”*  
[Collaborating centres](#)

*“the term “institution” means the part (e.g. department, division, unit, etc.) of the institution (e.g. university, research institute, hospital or academy) or Government.”*

*“the term “WHO CC” means the institution designated as a WHO collaborating centre while performing the agreed terms of reference and workplan with WHO (as opposed to the institution performing other activities outside the agreed terms of reference and workplan).”*

*“A WHO CC is not a legal entity. The legal entity which controls and is responsible for the WHO CC is the institution or the ministry, academy, university, established research institute or hospital of which the institution forms part”. (WHO Terms and conditions for WHO collaborating centres Version 2022) [terms-and-conditions-for-whoccs.pdf](#)*

WHO states there are “over 800 institutions in over 80 countries supporting WHO programmes”. [Collaborating centres](#)

As of the 20<sup>th</sup> January 2025, the numbers of some countries active WHO Collaborating Centres are as follows; [WHOCC - WHO Collaborating Centres](#)

USA

72



CHINA	58
INDIA	58
UK	48
AUSTRALIA	44
JAPAN	33
CANADA	26
GERMANY	26
ITALY	26
THAILAND	25
REPUBLIC OF KOREA	24
RUSSIAN FEDERATION	21
BRAZIL	20
SWITZERLAND	18
NETHERLANDS	18
FRANCE	16
SOUTH AFRICA	12
ARGENTINA	11
MEXICO	10
SPAIN	10
SWEDEN	8
BELGIUM	8
NEW ZEALAND	4
DENMARK	3



The **first WHO CC** was in **Denmark**, Copenhagen, 1948.

DEN – 1 Department of Biological Standardization Statens Serum Institute

WHO Collaborating Centre International Laboratory for Biological Standards

Date of Designation: 01/Jan/1948

Date of Discontinuation: 20/Sep/1999

The **USA's first WHO CC** was in 1950 at **John Hopkins University**.

USA-1 Department of Molecular Biology & Genetic School of Medicine John Hopkins University [WHOCC - WHO Collaborating Centres](#)

WHO Collaborating Centre for Reference and Research in Treponematoses (Syphilis)

Date of Designation: 01/Jan/1950

Date of Discontinuation: 31/Oct/1994

The **second USA WHOCC** was in 1958 and was at the Department of Pathology, Armed Forces Institute of Pathology, **Department of Defense**.

USA-2 Department of Pathology Armed Forces Institute of Pathology Department of Defense [WHOCC - WHO Collaborating Centres](#)

WHO Collaborating Centre for the Histological Classification of Soft Tissue Tumours

Date of Designation: 01/Jan/1958

Date of Discontinuation: 07/Jun/1994

USA – 204 was the WHO Collaborating Centre for **Acquired Immuno-Deficiency Syndrome (AIDS)** at the NIH and the director / head of this WHO CC was **Dr Anthony Fauci**. [WHOCC - WHO Collaborating Centres](#)

Date of Designation: 18/Dec/1987

Date of Discontinuation: 21/Jun/2004

Over the period January 1950 to January 2010, the USA Department of Defense has had 10 active WHOCC's that are now all discontinued.

USA – 2, USA – 33, USA – 175, USA – 124, USA – 125, USA – 153, USA – 156, USA – 271, USA – 284, USA – 293

From 1950 to date, there have been 326 discontinued USA WHO Collaborating Centres.

Over this time there have been several public agencies that had been designated as WHO Collaborating Centres. 46 CDC- WHO CC's, 27 NIH - WHO CC's, 9 FDA - WHO CC's, 2 US Department of Agriculture - WHO CC's, 1 US Environmental Protection Agency - WHOCC, 1 US National Bureau of Standards and the 10 DOD WHO CC's listed above.

John Hopkins University has had 10 discontinued WHO CC's and the University of North Carolina Chappel Hill has had 5 discontinued WHO CC's.

**As of the 20<sup>th</sup> January, 2025, the USA has 72 active WHO Collaborating Centres. Of these centres. 18 active CDC, WHOCC's, 3 active NIH WHOCC's and 1 active FDA, WHO CC.**

**John Hopkins University** has 8 active WHO CC's and the **University of North Carolina Chappel Hill** has 2 active WHO CC's.

The WHO Guide to WHO collaborating centres 2018, states that *“WHO CC's are institutions that have been solid WHO allies for years, helping WHO to implement its mandated work and achieve its current goals”*. [Microsoft Word - Guide\\_for\\_WHO\\_collaborating\\_centres\\_2018\\_FINAL.doc](#)

*“The designation both recognizes a history of collaboration with WHO and provides a formal framework for future joint activities. It is a time-limited agreement of collaboration between WHO and the designated institution, through which the latter agrees to implement a series of concrete activities specifically developed or designed with WHO”*. (Page 6)

The vision is *“WHO CCs are key institutions with relevant expertise distributed throughout the world. They represent a valuable resource as an extended and integral arm of WHO's capacity to implement its mandated work”*. (Page7)

*“Eligibility and other criteria for designation – After at least two years of successful collaboration with WHO in carrying out jointly planned activities, and if warranted by WHO technical programme requirements, WHO may propose to formalize a successful*

*collaborative relationship by designating an eligible institution as a WHO CC. Spontaneous applications or self-nominations by institutions are not accepted”. (Page 7)*

**Some questions arise within the functional scope of the WHO CCs based on the following information:**

*“The collaborating centres help WHO to implement its mandated work. Thus, all activities an institution conducts under its designation as a WHO CC must be jointly planned and implemented with WHO, clearly linked to WHO strategic plans, and reflected in the workplans of the WHO technical programmes to which they contribute.”*

*“Typical functions of WHO CCs include:*

*...*

*(f) participation in collaborative research developed under WHO’s leadership, including the planning, conducting, monitoring and evaluation of research; evaluation of WHO interventions in countries; and promotion of the application of the results of the research;”. (Page 8)*

*“While a WHO CC may participate in collaborative research under WHO’s leadership, the centre should not undertake research involving human participants or clinical trials of its own accord as of its workplan. Any research activity involving human participants included in the terms of reference (TOR) or workplan of the WHO CC may require the approval of the WHO Research Ethics Review Committee (ERC)”.*

*“Clinical trials included in the workplan must be conducted as WHO clinical trials, following WHO procedures and rules, with WHO support”.*

*“A WHO health information product containing recommendations may be considered a WHO guideline. WHO has established policies, rules and procedures for guideline development; these ensure that WHO guidelines are consistent with internationally accepted best practices, including the appropriate use of evidence. Any activity of a WHO CC aimed at supporting the development of a WHO guideline must therefore conform with WHO’s policies, rules and procedures for guideline development”. (Page 9)*

**“Intellectual Property Rights**



*Certain deliverables of the activities of the workplan (e.g. a publication, toolkit, report or training module) may require an agreement between the designated institution and WHO about the intellectual property rights”.*

*“When planning joint activities leading to such deliverables, the responsible officer and the proposed institution should identify what type of intellectual property right is applicable (for example, copyrights apply to publications, and patents may apply to other types of deliverables), and whether these rights will be owned by the designated institution giving a license to WHO (in this case, the deliverable will be the institution’s product), or by WHO (in which case, the deliverable will be a WHO product).” (Page 15)*

### **“The designation form**

*Upon designation of an institution as a WHO CC, the designation form serves as a binding agreement with WHO. By submitting this document, the institution commits to implementing the agreed workplan in line with its TOR and the Terms and Conditions of WHO Collaborating Centres.” (Page 20)*

*“The designation form consists of three sections – Institutional Profile, Terms of Reference and Workplan.”*

The terms of reference can be accessed VIA the who website – WHO Collaborating Centres Database and Portal [WHOCC - WHO Collaborating Centres](#).

*“The Terms of Reference are short, one-sentence points providing a general high-level overview of the area of future collaboration. They must reflect the future collaboration between WHO and the proposed institution, rather than the usual work of the institution. No details about the activities should be included.” (Page 20)*

### **“Workplan**

*The workplan is the list of detailed activities that the proposed institution will implement if it is designated as a WHO CC.” (Page 21)*

*For each proposed activity in the workplan, the proposed institution and the responsible officer should discuss and provide the required items listed below.*

- (a) Activity Title ...*
- (b) Link to TOR...*



- (c) Name(s) of responsible staff at the institution...
- (d) Type of activity...
- (e) Why WHO is asking for this activity and how WHO will use the deliverables?...
- (f) What concrete actions will be taken by the designated Institution?...
- (g) What will be WHO's role in this activity?...
- (h) Expected deliverables...
- (i) Deliverables listed above are subject to intellectual property (IP) rights... This attribution of IP right's ownership should be determined at the occasion of the submission of the proposal for designation
- (j) WHO Deliverable Code
- (k) Name(s) of funding sources
- (l) Activity Timeframe". (Page 22.23) [Microsoft Word - Guide for WHO collaborating centres 2018 FINAL.doc](#)

**There are several WHO CC's of concern regarding the COVID 19 Pandemic Response. It is imperative that WHO CC workplans, intellectual property, patents and funding sources are requested and reviewed as an urgent priority.**

Please find PDF copies of all the listed documents and WHO CCs listed below.

Please note the discontinued USA and China WHO CC's listed were still active during the COVID 19 period, hence their inclusion.

### **Emerging Infectious Disease Response Research and Preparedness**

- 1) USA – 447 Centre for Emerging Infectious Disease Response Research and Preparedness (NIH) Period 6/2/2020 – 29/4/2024 (Discontinued)
- 2) USA – 491 Centre for Emerging Infectious Disease Response Research and Preparedness (NIH) Period 17/1/2025 – 17/1/2029

### **Standardization and Evaluation of Biologicals**

- 1) CHI – 117 Centre For Standardization and Evaluation of Biologicals (Discontinued)
- 2) USA – 289 Centre For Biological Standardization (FDA)
- 3) KOR – 90 Centre For Standardization and Evaluation of Biologicals

- 4) DEU – 133 Centre For Standardization and Evaluation of Biologicals
- 5) CAN – 94 Centre For Standardization and Evaluation of Biologicals
- 6) UNK – 102 Centre and International Laboratory for Biological Standards
- 7) JPN – 28 Centre For Standardization and Evaluation of Biologicals
- 8) AUS – 42 Quality Assurance of Vaccines and other Biologicals
- 9) CHI – 148 Centre For Standardization and Evaluation of Biologicals

### **Pharmacovigilance**

- 1) SPA – 52 Centre for Vaccine Safety
- 2) SWE – 28 Centre for International Drug Monitoring
- 3) IND – 145 Centre for Pharmacovigilance in Public Health Programmes and Regulatory Services
- 4) MOR – 13 Centre for Strengthening Pharmacovigilance Practices  
(Discontinued)

### **WHO CCs of Special Interest with COVID 19 Pandemic Response**

- 1) USA – 367 Centre for Vaccine Epidemiology and Evaluation (John Hopkins University)
- 2) USA – 453 Centre for Global Health Security (John Hopkins University)
- 3) USA - 437 Centre for Research and Policy Guidance in Humanitarian Health Assistance (John Hopkins University)
- 4) DEU – 140 Centre for Global Outbreak Alert and Response (GOARN)
- 5) RUS – 138 Centre for the GOARN Rapid Response Capacities
- 6) SWI – 72 Centre for Laboratory Strengthening and Diagnostic Technology Evaluation
- 7) CAN – 105 Centre for Infectious Diseases, Research Methods and Recommendations (period 15/1/2020 – 5/2/2024) (Discontinued)

### **Another vast WHO network that needs to be acknowledged and investigated is the WHO GOARN (Global Outbreak Alert Response Network) Partner Institutions.**

*About GOARN – “We are a WHO network of over 310 technical institutions and networks globally that respond to acute public health events with the deployment of staff and resources to affected countries. Coordinated by an Operational Support Team based at the WHO headquarters in Geneva and governed by a Steering committee, we aim to*



*deliver rapid and effective support to prevent and control infectious diseases outbreaks and public health emergencies when requested.” [GOARN](#)*

There are 327 listed GOARN Partner Institutions and again, many are public agencies. [GOARN](#)

**USA has 32 listed GOARN Partner Institutions.** Centers for Disease Control and Prevention (CDC), Armed Forces Health Surveillance Branch (AFHSB), Association of Public Health Laboratories (APHL), John Hopkins University and U.S Army Medical Research Institute of Infectious Diseases (USAMRIID) are some listed. [GOARN](#)

## **Conclusion**

To effectively exit the WHO, one has to acknowledge the vast network and reach of the designated WHO Collaborating Centres and GOARN Partner Institutions and investigate the potential conflicts of interest in public / private collaborations that may exist and affect the delivery of the ultimate healthcare available for the people and the planet.

As stated in the Guide for WHO Collaborating Centres 2018, a WHO CC may revoke its designation, by providing a notice of intention to terminate with at least three months’ notice in advance. World Council for Health suggests that the US government take active steps to terminate these WHO CC agreements.

Please note that there are many other aspects and established WHO networks that require exploration and review such as the WHO CC Bioethics Network and the WHO CC Nursing Network.

If you require any further information, please do not hesitate to contact myself on the below email.

In Honesty, Integrity, Compassion and Respect,

Yours Sincerely,

A handwritten signature in black ink that reads "Lucinda van Buuren".

Lucinda van Buuren RN



WCH Australia Co Ordinator, on behalf of the World Council for Health

WCH Nursing Founder and WCH Oceania Representative 2024

Contact: [lucinda@wch-australia.org](mailto:lucinda@wch-australia.org)