

# US quits the World Health Organization and sabotages international public health

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One of the first actions taken by Donald Trump after his inauguration Monday was to issue an executive order withdrawing the United States from the World Health Organization. The order stated as among the reasons this abrupt departure, the “WHO’s mishandling of the COVID-19 pandemic (and other global crises), failure to adopt urgently needed reforms, and its inability to demonstrate independence from the inappropriate political influence of WHO member states,” a reference to China.

Trump also cited the US’s disproportionate funding of WHO compared to China, although the assessed contributions are based on a country’s gross domestic product, and the US actually provides about 18 percent of WHO’s overall funding, well below its 27 percent share of the world economy.

Lawrence Gostin, a professor of global health at Georgetown University in Washington DC and director of the WHO Collaborating Center on National and Global Health Law, said of Trump’s executive action, “This is the darkest day for global health I’ve ever experienced. Trump could be sowing the seeds for the next pandemic.”

The day after the signing of the executive order to withdraw, the WHO offered a meekly worded reply:

The World Health Organization regrets the announcement that the United States of America intends to withdraw from the Organization.

WHO plays a crucial role in protecting the health and security of the world’s people, including Americans, by addressing the root causes of disease, building stronger health systems, and detecting, preventing and responding to health emergencies, including disease outbreaks, often in dangerous places where others cannot go.

The United States was a founding member of WHO in 1948 and has participated in shaping and governing WHO’s work ever since, alongside 193 other Member States, including through its active participation in the World Health Assembly and Executive Board. For over seven decades, WHO and the USA have saved countless lives and protected Americans and all people from health threats. Together, we ended smallpox, and together we have brought polio to the brink of eradication. American institutions have contributed to and benefited from membership in WHO.

With the participation of the United States and other Member States, WHO has over the past 7 years implemented the largest set of reforms in its history, to transform our accountability, cost-effectiveness, and impact in countries. This work continues.

We hope the United States will reconsider and we look forward to engaging in constructive dialogue to maintain the partnership between the USA and WHO, for the benefit of the health and well-being of millions of people around the globe.

The US pullout is taking place five years to the week since WHO Director-General Dr. Tedros Adhanom Ghebreyesus declared a Public Health Emergency of International Concern (PHEIC) when COVID first erupted in Wuhan, China. It is the imperialist powers, and above all the United States, which bear responsibility for the 27 million excess deaths globally attributable to the pandemic since then, including 1.5 million excess deaths in the US. It is they who did far more than “mishandle” COVID-19. They pursued a policy of deliberate mass infection, “living with the virus,” which has made this lethal illness a seemingly permanent affliction.

The US cutoff of ties with the WHO will only make more likely the emergence of new viruses, potentially even more lethal than SARS-CoV-2, such as H5N1 (bird flu) whose lethality could be 50 times as great unless urgent measures are taken to prevent mutations that make human-to-human transmission possible.

Lack of funding for the WHO means many of the programs that have controlled the spread of disease like tuberculosis, HIV and measles will see these previously checked pathogens emerge, in particular low to middle-income countries (Africa, Middle East, and Asia) reliant on the programs provided by the WHO. Additionally, viruses like Ebola and Marburg virus which have recently erupted could find their way into dense urban populations and spread unchecked across the globe.

Global immunization efforts that have saved at least 154 million lives over the past 50 years are under threat. In that time, vaccinations against 14 diseases (diphtheria, Hemophilus influenzae type B, hepatitis B, Japanese encephalitis, measles, meningitis A, pertussis, invasive pneumococcal disease, polio, rotavirus, rubella, tetanus, tuberculosis and yellow fever) have seen a reduction in infant deaths by 40 percent globally, and by more than 50 percent across the continent of Africa.

A Lancet study from 2024 bears quoting. The report said:

The vaccines modelled in this study are estimated to have saved 154 million lives since 1974, 95 percent of these in children younger than five years. This equates to nine billion life-years saved and, further considering the added benefit of reduced morbidity, 10.2 billion healthy years of life have been gained due to vaccination. Measles vaccination has been the single greatest contributor and is likely to remain so. Vaccination has accounted for close to half the total global reduction in infant mortality, and in some regions to the majority of these gains (appendix p 8). As a result of 50 years of vaccination, a child born today has a 40 percent increase in survival for each year of infancy and childhood. The survival benefits of infant vaccination extend to beyond 50 years of age, a remarkable finding considering the exclusion of smallpox and the exclusion of the anticipated benefits of human papillomavirus (HPV), influenza, SARS-CoV-2, Ebola, mpox and other vaccines affecting adult mortality.

However, one in five children lack access to lifesaving vaccines. According to the Centers for Disease Control and Prevention (CDC), in 2023, over 14.3 million children under the age of one did not receive their recommended vaccines. This is 2.7 million more than in 2019, the year before the pandemic. Almost all these children live in low and middle-income countries, mainly in Africa and South-East Asia. They include Angola, Afghanistan, Democratic republic of the Congo, Ethiopia, India, Indonesia, Nigeria, Pakistan, Sudan and Yemen. One must add Gaza and all of Palestine to this list.

### **Elevating RFK Jr. and witch-hunting of Dr. Peter Daszak**

Any US contribution to research, training, and collaboration on the development and distribution of vaccines will likely become a thing of the past with Trump's elevation of the anti-vaxxer and professional wrecker of public health Robert F Kennedy Jr. to head the Department of Health and Human Services. Public health, instead of a global instrument for the betterment of the population's well-being, will be turned into a weapon for US national security policy, with vaccines, medicines and even viruses treated as levers for coercion.

In this regard, strong-arming the entire academic infrastructure is not a farfetched thought. One should recall the comments made by David Feith, deputy assistant secretary of state for East Asian and Pacific Affairs in the first Trump administration, speaking to the Heritage Foundation in July 2024. After condemning government funding of international research as national security threat, speaking to how such collaboration can be brought under check, he added:

It can be done through Congress and the executive branch through various ways, for the US government to perform an audit on all US government funded biomedical and related research in China, and that this audit place a strict one-year deadline establishing a presumption that this research, because of the nature of the Chinese political system is going to be nontransparent and unsafe, and a net negative for international scientific cooperation ... it would establish essentially an audit and a rebuttable presumption that would hopefully have a very dramatic effect in cutting down on research cooperation with China which the US government and the US universities and also US corporations have shown not to be able to properly monitor.

A key element of this anti-China campaign is the McCarthyite witch-hunting of scientists like Dr. Peter Daszak, formerly head of the EcoHealth Alliance, for their principled work on pandemic prevention with China. It is shameful that so many scientists have stood on the sideline and kept silent. Working people and young people must come to the defense of Daszak and the critical work he and others are carrying out.

### **The origins of the WHO**

Presently, the WHO has offices across the entire globe divided into six WHO Regional Offices—Washington DC (Pan American Health Organization), Copenhagen (Regional Office for Europe), Cairo (Regional Office for the Eastern Mediterranean), Brazzaville (Regional Office for

Africa), New Delhi (Regional Office for South-East Asia) and Manila (Regional Office for the Western Pacific). Although it has been the most enduring international public health agency, it wasn't the first.

The emergence of public health as a discipline was intimately connected with the growing class struggle in the milieu of the Industrial Revolution of the late 18th and early 19th centuries. This period saw centers of population growing rapidly, intensifying the impact of communicable diseases that left the poorest sections of workers facing high rates of infant mortality and despondency.

In 1851, the first of the International Sanitary Conferences was held in Paris. Twelve countries participated in the meeting sending physicians and diplomats to discuss how to stop the spread of yellow fever, cholera and plague. In particular, the national policies in place had failed to contain the epidemics of cholera that swept across Europe in the first half of that century severely disrupting commerce. Many of the merchants who bore the brunt of the quarantine measures urged their government to support international action.

By the end of the 19th century, advances in germ theory and medicine paved the way for application of more effective forms of disease prevention. Publications about diseases assumed international classification systems that aided front-line health workers. By 1902, the Pan American Health Organization was established in response to yellow fever epidemics in the Western hemisphere.

The initial development of public health education as a planned discipline fell to the charity of the well-to-do, as with the Rockefeller Foundation, established in 1913, which helped establish the public health departments at Harvard and Johns Hopkins. After World War I and the 1918 influenza pandemic that killed more than 50 million people and infected more than 500 million across the globe, the League of Nations Health Committee and Health section were established in 1920.

By 1928, the first antibiotics had been discovered, with widespread use as treatments for infections beginning in 1942, in the first years of World War II. It was at this time that the first form of immunodeficiency virus was transmitted from simians to humans in central Africa. A mutated form of this virus was later identified as a human immunodeficiency virus.

In the aftermath of the war, the United Nations Relief and Rehabilitation which was founded in 1943 to address the needs of war victims. UNICEF was established in 1946 to address the needs of children whose countries were destroyed by the war. Two years later, the WHO was founded under the auspices of the UN.

The year before the WHO was established, a horrific cholera outbreak in Egypt that claimed more than 20,000 lives spurred an international response. At the same time, the US established a National Malaria Eradication Program to eradicate the disease that was prevalent in the Southeastern states.

The WHO emerged during the zenith of capitalist achievements, in the postwar period when fear of world socialist revolution gripped the ruling classes. The development of a broad-based international public health organization seemed a prudent investment against the dangers posed by the international working class.

The evolution to the founding of the WHO was seen by many of its participants as an inevitable and necessary expression of the global development of science and public health. However, its efforts remained within the confines of the imperialism and the nation-state system which is inseparable from capitalism. Although the progressive work that the organization undertook has seen smallpox eradicated and polio on the verge of extinction, it has fallen victim to the contradictions of world capitalism.



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