

INFORMATION SHEET

What is the Governor's Public Health Commission?

The public health commission was instituted in 2021 through an executive order by Gov. Holcomb to address public health in Indiana. The commission first met in September of 2021 outlining key areas of public health, including: Emergency Preparedness, Governance & Structure, Funding, Data & Information Integration, Healthcare & Public Health Workforces, and Childhood & Adolescent Health Integration. Monthly meetings drive the goal to develop "regionalized, equitable, and sustainable" legislative recommendations for public health to be presented during the 2023 session.

Why is it an EMERGENCY?

Generally, public health efforts are considered altruistic in nature, because the focus is to prevent illness, injury, and extend the lifespan.

Unfortunately, as Covid has exemplified, the guise of public health can be used to control and limit the freedoms granted by the constitution. Not all of the recommendations offered by the Governor's Public Health Commission appear dangerous. The commission has listed a few areas that sound beneficial. Such as:

- Improving Emergency Medical Services (EMS/Ambulance)
- Disaster Preparedness
- Data "Portability," and Removing Barriers to Care
- Meeting Needs of Underserved/Underprivileged
- Increased Public Health Funding

Digging a bit deeper concerns begin to rise. Specific threats include:

- **Centralization**- Government power becomes top down rather than bottom up. CDC makes recommendation, passes to the State and the State tells the County what to do. No diversity, no County input or accountability to citizens.
- **Disconnecting Local Accountability**- Health commissioners hands are tied because if they deviate from centralized recommendations they jeopardize their funding. Think masks, lockdowns, and school reopening. Schools are a perfect example related to ESSR funding. Schools accepting ESSR funds were required to meet certain expectations to reopen.
- **Coercive Means**- If counties don't participate in the program the county is INELIGIBLE for any IDOH funding including grants. Your county will have to completely fund your Public Health requirements. (Please see video)
- **Data Integrations**- Increased data sharing between local, state, national, and even global organizations. (World Health Treaty, International Health Regulations) Our state already has a vaccine registry and shares information with the national registry. You are automatically enrolled, but never told. Schools, doctor's offices and the State Department of Health have access to your vaccination record, contact information, and address. How much information do we want the government to have access to?
- **School Clinics**- Hidden threat, decreasing role of parent, more of your students information exchanged and shared. Schools functioning less as education provider and becoming the parent. Schools already complete assessments for height, weight, hearing, vision, and mental health in some cases. What else will they add?