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Compensatory Federalism: How California is Rewriting the Rules of Diplomacy for Global Health

Public Health * Ethics * Global Health

Introduction: The Davos Divergence on Global Health

On January 23, 2026, the architecture of international public health governance underwent a seismic structural fracture, realized simultaneously in the conference rooms of Davos, Switzerland, and the bureaucratic corridors of Washington, D.C. At the World Economic Forum, California Governor Gavin Newsom met with World Health Organization (WHO) Director-General Dr. Tedros Adhanom Ghebreyesus to formalize an unprecedented arrangement: California would become the first U.S. state to independently join the WHO-coordinated Global Outbreak Alert and Response Network (GOARN).[1][2] This technical accession was announced exactly one day after the U.S. Department of State and Department of Health and Human Services (HHS) confirmed the completion of the United States' formal withdrawal from the WHO, severing a multilateral anchor established in 1948.[6]

This "Davos Divergence" represents more than partisan polarization; it marks a structural transformation in American federalism and biosecurity intelligence. While the federal executive has pursued strategic retrenchment and bilateralism under an "America First" doctrine,[6][3] California -- wielding the world's fifth-largest economy -- has operationalized "compensatory federalism," constructing subnational diplomatic and epidemiological institutions to fill the vacuum left by federal retreat.[2][4] The resulting dual-sovereign posture raises profound questions regarding constitutional preemption, pathogen sample sharing, and national pandemic readiness.[4][6]

The Architecture of Federal Withdrawal vs. Subnational Paradiplomacy

The U.S. exit from the WHO, initiated via Executive Order on January 20, 2025, and finalized on January 22, 2026, following the statutory one-year notice period, was justified in a joint statement by Secretary of State Marco Rubio and HHS Secretary Robert F. Kennedy Jr.[6][8] Federal officials cited grievances over the WHO's early 2020 handling of SARS-CoV-2, alleging delayed emergency declarations, deference to Beijing, slow acknowledgment of airborne transmission, dismissal of laboratory origin hypotheses, and disproportionate U.S. financial assessments.[6] Operationally, the withdrawal left approximately $278 million in unpaid 2024-2025 membership arrears, recalled all HHS and CDC assignees from Geneva and regional WHO offices, and replaced multilateral participation with conditional "Bilateral Agreements on Global Health Cooperation" governing programs such as PEPFAR and malaria assistance.[6][3][8]

| Policy Dimension | | Federal Policy (The WHO Withdrawal) | | California Policy (The GOARN Accession) |

| Institutional Status | | Full termination of WHO Constitution membership.[6] | |

Technical partner membership in GOARN via CDPH.[2][14] |

| Core Rationale | | National sovereignty, bilateral leverage, COVID-19 grievances.[6][3] | | Multilateral outbreak intelligence, scientific continuity.[2] |

| Financial & Staffing | | Cessation of >200 million USD/yr dues (278 million USD arrears); CDC recall.[6][8] | | State-funded in-kind technical personnel & lab deployment.[2][13] |

| Legal Instrument | | Executive Order 14155 & Joint Departmental Notification.[6] | | Non-treaty technical partnership memorandum.[4][13] |

| Key Leadership | | Pres. Trump, Sec. Marco Rubio, Sec. Robert F. Kennedy Jr.[6] | | Gov. Gavin Newsom, Dr. Tedros, Dr. Susan Monarez (PHNIX).[2][10] |

California's counter-move represents the latest evolution of subnational "paradiplomacy," built atop two domestic institutions created in late 2025:

* The West Coast Health Alliance (September 2025): Launched on September 3, 2025, by California, Oregon, and Washington (and joined by Hawaii on September 4, 2025) to issue unified, evidence-based immunization guidelines for COVID-19, influenza, and RSV vaccines independently of the restructured federal CDC Advisory Committee on Immunization Practices (ACIP).[2][9]

* The Public Health Network Innovation Exchange (PHNIX, December 2025): A state-level public health modernization hub led by former CDC Director Dr. Susan Monarez and former CDC Chief Medical Officer Dr. Debra Houry.[10] By recruiting senior departed federal leadership, Sacramento established an operational command node capable of interpreting international surveillance signals without relying on Atlanta.[10]

The geopolitical friction was underscored at Davos when the official "USA House" venue canceled Governor Newsom's appearance, prompting him to frame California's WHO partnership as an institutional safeguard.[11][12]

The GOARN Mechanism and Constitutional Battlegrounds

To navigate the U.S. Constitution's prohibition on states entering into "any Treaty, Alliance, or Confederation" (Article I, Section 10), California structured its agreement through GOARN rather than the political organs of the World Health Assembly.[4][13] Established in 2000, GOARN is a technical "network of networks" linking over 300 public health institutes, academic laboratories, and nongovernmental organizations (including the Pasteur Network and university systems) to verify and respond to acute infectious outbreaks.[13][14][16] By joining as a technical institution, the California Department of Public Health (CDPH) gains direct access to real-time global outbreak alerts and commits state epidemiologists for international field deployment.[13][15]

Despite this careful structuring, four constitutional and regulatory doctrines define the impending legal confrontation between Washington and Sacramento:

* The Compact Clause (Article I, Section 10, Clause 3): Under Virginia v. Tennessee (1893) and U.S. Steel Corp. v. Multistate Tax Comm'n (1978), congressional consent

is required only for subnational agreements that "encroach upon or interfere with the just supremacy of the United States."[17] California contends that non-binding technical data sharing in a space vacated by the federal government does not aggrandize state power.[4][17]

* Foreign Affairs Preemption: Under Zschernig v. Miller (1968), Crosby v. National Foreign Trade Council (2000), and American Insurance Association v. Garamendi (2003), state actions are preempted if they frustrate the President's diplomatic leverage or sanctions.[18][4] The Department of Justice can argue that California's partnership undermines the federal strategy of isolating the WHO to compel institutional reform.[6][4]

* The United States v. California (2020) Precedent: In 2020, a federal district court upheld California's cap-and-trade climate policy linkage with Quebec after the first Trump administration exited the Paris Agreement, ruling that subnational technical coordination did not intrude upon an express federal foreign policy.[5][18]

* Genomic Data Export Controls (Executive Order 14117): DOJ regulations implementing EO 14117 restrict the transfer of bulk sensitive personal and genomic data to "countries of concern," including China.[19][20] If CDPH uploads pathogen sequencing or clinical metadata to multilateral repositories accessible to Chinese institutions, federal prosecutors could invoke national security export controls, pairing regulatory enforcement with fiscal retaliation against federal Medicaid or preparedness grants.[21][22][3]

Epidemiological Consequences: Fragmentation of the Biosecurity Grid

While GOARN preserves Sacramento's access to early outbreak intelligence, subnational paradiplomacy cannot fully replicate the legal and logistical infrastructure of a sovereign national health agency.[6][7]

| Surveillance Capability | | U.S. Federal Status (Post-WHO Exit) | | California Status (via GOARN & PHNIX) |

| Early Outbreak Alerts | | Severed from internal WHO EIS/IHR nodes.[6] | | Retained: Direct real-time GOARN alert feed.[2][15] |

| Physical Pathogen Sharing | | Disconnected from GISRS & PIP Frameworks.[6] | | Constrained: Lacks federal import permit authority.[6] |

| Genomic & Clinical Data | | Bilateral exchanges only; EO 14117 restrictions.[3][19] | | Vulnerable: Subject to federal export enforcement.[21] |

| Domestic Grid Integration | | Fragmented CDC syndromic & wastewater-based epidemiology.[7] | | Regionalized: High awareness on West Coast; blind spots inland.[7][9] |

The most acute vulnerability lies in the Global Influenza Surveillance and Response System (GISRS) and the Pandemic Influenza Preparedness (PIP) Framework.[6] Formulating seasonal influenza and pandemic vaccines requires importing live virus isolates across international borders. Because GOARN is an outbreak response network rather than a sample-sharing treaty -- and because federal agencies (CDC, FDA, and Customs) hold exclusive authority over biological import permits and vaccine

licensure -- California cannot independently import foreign viral strains for domestic vaccine manufacturing.[6] Furthermore, dividing the country into "connected" West Coast states and "isolated" interior or Gulf Coast states creates dangerous blind spots: a novel pathogen entering Texas or Florida could circulate undetected before triggering PHNIX sensors in California.[7]

Conclusion: One Nation, Two Voices in the Next Pandemic

California's January 2026 accession to GOARN marks a decisive shift from cooperative federalism to compensatory federalism in global health security.[2][4] Faced with a federal withdrawal that dismantled seven decades of multilateral epidemiological integration, Sacramento leveraged its economic scale and former CDC leadership to maintain a direct technical link to Geneva.[2][10] Yet subnational partnerships cannot replace a unified national biosecurity shield; in the next pandemic crisis, the Davos Divergence ensures that the United States will speak with two competing voices.[6][7]

Updates... (Nov 21, 2026): Clarified the September 3-4, 2025 West Coast Health Alliance launch sequence; standardized publication dates across all 22 references; and replaced restricted or bot-gated links with live KFF Global Health Policy Tracker, CalMatters, and Stanford Office of Research Administration sources.

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