

Free and Healthy Children International By-laws

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Chapter one: mission and purpose

This Organization shall be Free and Healthy Children International (FHCi), hereafter referred to as the "Organization." We shall be known by no other legal name. This Organization shall be not-for-profit for charitable, educational, and research activities. We are governed by the statutes and regulations of the state of Minnesota not-for-profit organizations and federal laws supervising registered 501(c)3 non-profit organizations. FHCi is dedicated to research, education, and public access to Homeoprophylaxis (HPx) and Homeopathic Protocols.

Free and Healthy Children International (FHCi):

Our mission and objectives include

- 1) overseeing the collection and analysis of data measuring the effectiveness of Homeoprophylaxis as it affects long-term health and
- 2) research into Homeoprophylaxis and Homeopathic protocols aimed at protecting children's and adult immune systems, educating parents, caregivers, and health practitioners about healthy immune system function and maturation, and ensuring a mechanism of access to the homeopathic remedies needed to fulfill these objectives.

The above will be termed "FHCi Work."

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FHCi works include research, education, and access to Homeoprophylaxis (HPx) and Homeopathic Protocols designed for Patrons of FHCi.

FHCi operates on a model of benevolence and service towards Patrons and the Board by working within the honor system of individual responsibility and integrity towards the mission and financial obligations described in these bylaws.

Chapter two: patronship and structure

FHCi is a public charity open to all. All who complete the Patron agreement with accompanying donation will gain access to an independent **Patron Portal** through which access to HPx Practitioners, HPx Programs, and HPx Program Research data is stored.

FHCi welcomes Patrons who are invested in HPx for the health of their families and children.

2.1 Patronship is open to:

1. **Certified HPx Practitioners:** HPx Practitioners who are practicing homeopaths and other practitioners with the minimum homeopathic education declared sufficient to be certified in HPx, who are residents of the USA, Canada, and international countries, will automatically maintain patronship with FHCi through their practitioner dues.
2. **Certified Associate Practitioners:** HPx Practitioners who are practicing homeopaths and other practitioners with the minimum homeopathic education declared sufficient to be certified in HPx, who are residents of the USA, Canada, and international countries will automatically maintain patronship with FHCi through their practitioner dues.
3. **General Patrons:** General Patronship is open to anyone whose consciousness aligns with the FHCi mission statement and is willing to serve and further the development of FHCi, either in a voluntary or a paid position. A General Patron may be recruited from the existing FHCi Patron pool or the public and must be approved by application and a board vote.
4. **FHCi Patrons:** An FHCi Patron is an individual or family supporting the Organization's work and desiring access to HPx programs. Upon donation and accepting the FHCi Patron Agreement, they can access the Patron Portal, HPx Practitioners, and HPx or homeopathic protocols via informed consent.

2.2: FHCi structure: is established such that:

- a) Its Board of Directors governs FHCi.
- b) FHCi develops and researches HPx Programs and Homeopathic Protocols.

- c) FHCi shall oversee and develop certification programs and ethics in research courses.
- d) FHCi will draw from and analyze data on the use and efficacy of HPx Nosode administration collected from affiliate platforms.
- e) FHCi will register and review Adverse Events relating to FHCi's research.

2.3: Patronship to FHCi: By registering and donating to FHCi, your patronship gives you access to HPx Practitioners and ongoing educational opportunities. Access to HPx is facilitated through a private agreement FHCi holds with the pharmacy that provides remedy kits. Finally, participation in HPx programs includes data collection for research purposes. FHCi continues to monitor the safety, effectiveness, and efficacy of HPx through ongoing research. As an FHCi Patron, you can access the **Patron Portal**, where all dosing records can be registered.

2.4 FHCi Patronship Benefits include:

- i. Public and practitioner educational programs
- ii. Access to HPx Practitioners, HPx Programs, and Homeopathic protocols.
- iii. Paid or volunteer positions on committees, projects, or research in HPx Programs and Homeopathic Protocols.
- iv. Potential to serve on the Board of FHCi.
- v. Financial investment in a holistic paradigm that encourages happy, healthy children and families.
- vi. Subscription to FHCi Patron Newsletters.
- vii. Access to the FHCi Annual report and FHCi Bylaws.
- viii. The opportunity to participate in strategic planning meetings.
- ix. The opportunity to participate in community gatherings, social media groups (Public or Private), educational activities, or symposiums to connect and relate with other Patron Members to share and discuss the use and experiences of HPx.
- x. Invitation to participate in FHCi research.
- xi. Right to report and review Adverse Events above and beyond normal immunological stimulation expected from the use of HPx Nosodes.
- xii. FHCi requests access to non-PHI from the Patron Portal for research purposes which FHCi may review for any research activity. FHCi guarantees that all non-PHI will remain a confidential holding of FHCi.
- xiii. Patronship FHCi will remain intact unless the Patron submits in writing their desire to withdraw Patronship, or it has been demonstrated there has been misuse of the Patron Portal or a violation of Patronship agreements.

Chapter three: FHCi Board

3.1 Qualifications of Board Members: members of the Organization are eligible to hold an office on the Board. All members of the Board must be aligned with the philosophies of

homeopathy and Homeoprophylaxis. At least two-thirds of the Board must be current or retired HPx Practitioners.

3.2 Structure of the FHCi Board: The Board shall include 12 Positions constructed into three tiers of service: **Apprentices, Advocates, and Coordinators**. Between the levels of service, there is a buddy system established for communication, mentorship, and monitoring of FHCi work to ensure all activities of the Board come to fruition. There are four members at each level of service, each with a 3-year term, organized into three tiers.

The Board shall consist of Twelve (12) members. The Board shall contain certified HPx Practitioners and persons who support and use HPx. All Board members shall have the right to vote. Coordinators shall determine and announce the time and place of regular meetings. Special meetings may be called by a Coordinator or by a request of three (3) members of the Board. A two-thirds vote shall constitute a quorum.

The FHCi Board oversees the administration and mechanism of HPx education and access to Programs and Homeopathic protocols, website listings, maintenance, accounting, and facilitates research and educational opportunities.

The Board Members are encouraged to communicate within a buddy system between tiers of service, so if one person must leave the Board, their role can be replicated by at least one other member. This system ensures a smooth transition and the continued work of FHCi.

Tiers of service:

- A. **Apprentice**, 1st year of service: Those coming onto the Board will serve as an Apprentice for one year. During that first year, they will learn what the Board does and become acquainted with the tasks of the individual's desired portfolio on the Board. By the end of the year, the Apprentice Board member will be ready to take on more responsibility for the second year of service.
- B. **Advocate**, 2nd year of service: Apprentices move into an Advocate position after their first year. During this second year, the portfolio (assignments) of the Board member is established, and attention turns to initiating and completing directives of that individual portfolio in collaboration with related Board positions. By the end of the second year, the Advocate Board member will be able to fulfill the responsibilities of the Coordinator's year of service, including serving as secretary.
- C. **Coordinator**, 3rd year of service: The Board Member's third year coordinates all activities, from chairing the Board meetings to following up and monitoring the different branches of governance needed to administer FHCiA while adhering to the calendar of events throughout the year. Each Coordinator will have the opportunity to chair the meetings

for at least four months before becoming the Chair and must be the Board secretary for at least three months.

The Chair may continue longer if it benefits continuity by a vote of the Board. The coordinators shall preside at the Organization's meetings and perform such duties as custom requires. They shall oversee the will of the Organization in all matters not in conflict with these bylaws. Board members will seek guidance from the coordinators for issues related to The Work of the Organization in conjunction with the Office Administrator(s) to ensure smooth functioning of the Organization. In the final six months of service, Coordinators shall remain in a mentorship position for the incoming coordinators and transfer duties and portfolio works to Advocates and Apprentices. At the end of their third year of service, a Coordinator may leave the Board or renew their term of service for new projects at the Board's discretion.

Subject to the provisions of these Bylaws, the Board shall be vested with complete authority to perform all acts and transact all affairs and business on behalf of the Organization. The Board will manage and conduct all FHCi work and activities of the Organization, fulfilling its purpose. This Board shall govern and control the Organization's financial affairs, authorize the officers to make contracts and leases, disburse the funds, and open and close bank accounts.

A Board Member may serve on the Board in various capacities such that all board members will be skilled and versed in multiple positions and purposes. Board members may also serve on various committees simultaneously

Suppose the mechanism for filling a vacancy is not addressed in these bylaws. In that case, the Board has the power to fill the vacancy by appointment until a special election can be held under conditions determined by the Board. FHCi Board members may act on various committees simultaneously.

3.3: Terms of Board Positions

Nominees will be voted on and appointed according to their natural skill sets. No more than four Board members can change at one time. If more than four members wish to leave the Board simultaneously, those who have served for a more extended period will be considered over newer Board Members.

If there should ever come a time when a Board Member is considered incapable of tending to their Board duties, they may be asked to step down by a vote of a simple majority of the Board.

Group leadership will be forever changing through the workings of the tiers of service, forming a living-evolving paradigm. By working in this realm of equality, human rights, and responsibilities, FHCi fosters consensus decision-making, exercising democratic rights through

the groups and committees which make up the life of FHCi, and working together from the Board to the community.

3.4: Board Positions:

- I. The Board must have one person assigned to these basic positions
 1. Office Administrator(s)
 2. Chair
 3. Secretary
 4. Treasurer
 5. Teacher

Other positions may include but are not limited to the following. A Board member may hold multiple offices as a part of their portfolio regardless of Tier of Service:

- II. Internal Communications Representative (within membership)
- III. Public Communications Representative (In the public)
- IV. Fundraising
- V. Editor of Documents
- VI. Canadian International Liaison
- VII. Outreach Coordinator
- VIII. International Development Coordinator
- IX. Committee oversight
- X. Volunteer recruitment and management
- XI. Ethics/Legal Representative
- XII. Adverse Events Review Representative
- XIII. Education Coordinator
- XIV. Tech/Web Oversight and Development Representative
- XV. Marketing
- XVI. Other

3.4.1: Office Administrator(s): To facilitate and accomplish office work, oversee documents and committees, renewal processes, communications, certification completion, and other clerical duties for the Organization in conjunction with the Treasurer, education coordinators, and other Board Members. Administration includes keeping records of the official transactions and business of the Organization and the Board and shall act as custodian of records of the Organization. Office Administration shall be overseen by the member(s) of the Board, employed by the Board, and receive a salary.

Office Administrator(s) shall be responsible for the general administrative operation of the Organization and shall move forward with day-to-day business in alignment with the mission of FHCi, without a requirement to get approval or a vote from the Board for these tasks. Should a

new task arise and there is a question as to if or how to proceed, an Office Administrator(s) should bring this new duty to the attention of one or more members of the Board for discussion or to the entire Board for a voted decision.

3.4.2: Chair: The Chair will be responsible for chairing board meetings. This duty includes keeping tabs on FHCi work, calling for agenda items, preparing the agendas, calling for votes, and chairing meetings and filing of agendas by date and time in dropbox and recordings of board meetings.

3.4.3: Secretary: The Secretary will be responsible for taking attendance and keeping the minutes during each Board meeting. They shall file minutes to the Organization's Dropbox for Board approval. Minutes will be filed by date and time.

3.4.4: Treasurer: The Treasurer shall bill for, receive, and deposit all dues and monies for the Organization. The Treasurer shall keep proper and adequate records of receipts and expenditures. The Treasurer will oversee all aspects of bank balancing and will work with at least one other Board member frequently to review cash flow, budgeting, and other issues. The account's status will be stated at each board meeting and be reflected in the meeting minutes. The Board may request an audit of said records by a certified public accountant selected by the Board of Directors. The Treasurer will be compensated at a rate approved by the Board. The annual budget will be reviewed at a special meeting at the end of January for the previous year.

3.4.5. Teacher(s): The Teacher(s) shall be responsible for developing training modules and curriculums for Certification, Continuing education, and a portion of the administration necessary for certification, competency evaluation, and supervision.

Chapter four: appointment processes for Board Members

4.1: Nominations: Existing Board Members, certified HPx Supervisor members, and Partons who support and use HPx may offer themselves or others for application to appointment to Board positions. Notice of application period will take place three months before the end of the term of any Board member.

4.2: Appointments: After receipt of an application, the FHCi Board will assess the applicants during one regularly scheduled meeting and vote accordingly on each available position. Applicants may attend a portion of that meeting. In the case of more applicants than open positions, applicants who gained the majority vote will be appointed.

4.3: Term of Appointment: Newly elected FHCi Board Members shall take office at the first Board meeting following the election or when the position is vacated. Each Board position will be set for a minimum of three years and may serve no more than three consecutive terms. The first year or in-coming year is an orientation year. If an applicant is accepted to the Board mid-

year, their three-year term will commence the following January. The first year or in-coming year is an orientation year. On January 1, each Board member will be asked to recommit for the coming year, and their position will be solidified.

The tiers of service are intended to create continuity on the Board and are fixed to keep the operations of the Board flowing; an individual's assignment can be modified as needed.

FHCi Board Members may serve more time with a quorum vote

4.4: End of Term: . If an FHCi Board Member wishes to relinquish their duties before the end of their term, they must submit, in writing, with three months' notice, a request to step down. Call for replacements will take place during those three months.

If one or more FHCi Board Members leave before completing their three years of service, the existing FHCi Board Members will be rearranged towards fulfilling the top tiers of service to leave the vacancy(s) in the first tier. Replacement FHCi Board Members will join on at the Apprentice level. No more than four FHCi Board Members can change at one time. Accordingly, if more than four wishes to leave the Board at the same time those who have served for a longer period will be given consideration over more recent additions to the Board. Senior FHCi Board Members may remain in an advisory role. It is the responsibility of resigning FHCi Board Members to transfer all aspects of their portfolio to other FHCi Board Members prior to stepping off the Board.

If there should ever come a time when a Board Member is considered incapable of tending to their Board duties or are absent for more than two meetings in a year, they may be asked to step down by a vote of the Board to open the position to new Board Member to facilitate FHCi work.

Chapter five: meetings

There shall be a minimum of 12 Board meetings a year. Meeting minutes are saved to the Board documents platform. Additional meetings may be scheduled for emerging issues by board vote. Bylaws of FHCi shall govern the deliberations of the Board. Board minutes will be available to Patrons and the public by request.

Chapter six: committees

6.1: Committees will be convened depending on needs and volunteers to fulfill specific duties. Board Members may work on committees as volunteers or in commission-based or salaried positions. Committees may be formed for any FHCi Work according to but not limited to the following:

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- I. Infectious disease epidemiology and monitoring
- II. Fundraising
- III. Documents
- IV. Web/tech support
- V. Ethics and legal issues
- VI. Adverse Events Reporting System.
- VII. Research
- VIII. Publications
- IX. HPx Program and Protocol development
- X. Education for Practitioners
- XI. Public Education
- XII. Social media
- XIII. Other

Chapter seven: funds, dues, assessments, and service remuneration.

FHCi is a public charity. All funding will be in the form of donations.

7.1 Donations for Education: FHCi will offer courses, including, but not limited to:

- i. Associate training
- ii. Full Certification training
- iii. Advanced education
- iv. Public education through:
 - a. online classes
 - b. conferences
 - c. symposiums
 - d. FHCi promoted and sponsored events

7.2 Donations for Public lectures: HPx education for the public may be developed by the Board, program coordinators, and HPx Practitioners. Donations received at FHCi-promoted events will be submitted to FHCi and distributed to paid or commissioned individuals based upon percentages or salary and mutual agreement.

7.3 Donations for Access to HPx Programs: Through Patronship donation, one gains access to the practitioner website for HPx program supervision, administration, data entry, and recordkeeping. Patron Families can then select programs of their choice per additional donation.

7.4 Publications: Includes earnings from sales and royalties from all publications of FHCi.

7.5 Fundraising: FHCi will actively seek out grants to fulfill its purposes. FHCi will embark on fundraising and marketing drives to meet financial obligations to its officers and stakeholders.

7.6 Donations FHCi will actively seek out donations to fulfill its purposes.

7.7 Donations received on behalf of other organizations: The Organization can receive money on behalf of other organizations and affiliate organizations that share a similar mission and purpose as the Organization. Once received, the Organization will transfer the funds, for a fee, to said organizations based on the contractual agreements established between the Organization and those organizations.

7.8 Fiscal year: FHCi works on a cash accounting method, and its fiscal year shall be from January 1 to December 31.

7.9 Remunerated Services Remuneration is based on funding potential and annual budget:

- Teaching
- Research
- Data entry
- Data analysis
- Travel
- Continuing education
- Fundraising
- Social media
- Supervision of program
- Committee work

7.10 Compensation of Officers: Compensation (stipends) may be paid to any or all Board members and Committee members for costs incurred for Board meetings or other expenses deemed appropriate by the Board. Compensation for specific jobs and titles will be determined by market trends, outlined by written descriptions of duties, economic initiatives developed by individual Board members, qualifications, and salaries, and approved by the Board.

Board Treasurer, Teacher, and Office Administrator(s) are compensated based on the budget and payment plan approved by the Board. Individual tasks may be paid based on budget and benefit. These also will be approved by the Board.

Chapter eight: powers and duties

8.1: Powers: The Organization shall have and may exercise all the powers and privileges expressly stated in the Articles of Incorporation and the Bylaws or reasonably implied therein.

By-laws shall be written and adopted by the Organization to carry out the Organization's Declaration of Purpose. The Organization shall promulgate and adopt By-laws. By-laws may be repealed and shall remain subject to change.

8.2: Official Publications: The Organization Website, Constant Contact Newsletters, other similar mediums, and Annual Reports are declared the Organization's official publications. Research publications and printed matter regarding HPx Programs and homeopathic protocols will belong to the Organization regardless of author. Notices of meetings (regular and special), hearings, minutes of Organization meetings, and Board minutes shall be posted on the website with proper notice. An annual report is to be published each February and can be found on the website, in mailings, or in printed form.

8.3: Official Seal: The official and corporate seal of the Organization shall carry the following words: "Free and Healthy Children International" or "FHCi."

8.4: Amendments: These Bylaws may be amended in whole or in part in the following manner: First, during a regular meeting of the Board, the proposals are to be discussed and amended. Second, at the next regular meeting, the bylaws will be approved by a two-thirds vote of the Board.

8.5: Adoption: By approving and adopting these amended By-laws, the Organization declares that these supersede and take the place of all previously existing bylaws.

8.6: Board Member Vacancies: In the case of vacant positions, the Board will proceed as usual until that position can be filled. During this time, there can be no significant changes to the Organization's, Constitution, or foundational work. Bylaws may be amended with a 2/3rds vote of current board members but no less than 7 consenting votes. There must be a minimum of 7 Board members for an election, and a minimum vote count of two-thirds affirmed to pass any other decision requiring the Board to vote. If there are sufficient voting members, new projects can proceed.

Chapter nine: rules of order

The Board deliberations of the Organization shall be governed by the parliamentary usage as contained in Demeter's Manual, except were modified by the Constitution or bylaws or unless suspended by a two-thirds vote of those members of the Organization whose number represents a quorum.

Chapter ten: research, data collection, and analysis

10.1: Research: In response to local, national, or international infectious disease incidence or with regards to any other condition affecting the human immune system, FHCi will strive to

seek opportunities to develop and implement research to determine the safety, efficacy, and effectiveness of HPx Programs and Homeopathic Protocols that have the potential to affect the health of the participants positively.

10.2: Conflict of Interest: FHCi seeks to do research in service to the betterment of health for humans through the use of HPx and Homeopathy. To avoid conflicts of interest, while recognition and earnings may be garnered from the process of participation in research design, application, data recovery, analysis, and publication of said research, no one individual or group of individuals, shall seek to personally gain economically or otherwise from the investment of their time, intellectual input, or outcomes of any research overseen by FHCi.

10.3: Research parameters: Each research project will state clearly defined research parameters, methods, and analysis. There will be an entrance and exit strategy clearly defined for any participant to register. All new programs will be established through a research program defined by set timelines, duration of study, and analysis and publication dates.

10.4: Research-informed consent and ethics: All participants undergo an extensive Informed Consent process through the **Patron Portal** which is a private data facility. All Personal Health Information (PHI) for the **Patron Portal** will be ethically collected and protected. All registrants have the opportunity to review and sign consent forms before meeting with their HPx Practitioner. Non-PHI will be available via request to FHCi for analysis.

10.5: Inclusion/Exclusion/Intake parameters: Parameters of the entrance to the research will be formulated before participation and commencement according to the parameters set by the research team.

10.6: Eligibility to participate in FHCi Research: will include but is not limited to:

- a. Patronship to FHCi
- b. A signed informed consent document.
- c. Release of information.
- d. They are satisfactorily meeting the inclusion parameters.
- e. Have completed registration with a qualified HPx Practitioner or Associate Practitioner.

10.7: Research Participation: All FHCi Patrons are eligible to participate in any FHCi research.

10.8: Research Registrant Supervision: All registrants will be overseen by credentialed HPx Practitioners or Associate Practitioners for the duration of the research from enrollment, during the dosing periods, and through data collection.

10.9: Data Collection and analysis: Will be supervised and overseen by the Principal Investigator(s) and data analysis teams.

10.10: Adverse Events Reporting System: All potential adverse events will be assessed and reviewed for reportable Adverse Events. A tally of Adverse Event Reports and Reviews will be

made public. After the review process if it is determined that in fact an Adverse Event has happened, non-PHI and details regarding the Adverse Event will be made public.

An Adverse Event is defined as a death, life-threatening Adverse drug or device experience, inpatient hospitalization or prolongation of existing hospitalization, a persistent disability/incapacity, or a congenital anomaly/birth defect.

10.11: Adverse Event Liability: FHCi Patron Research Registrants accept the responsibilities and liabilities of their relationship within their HPx Practitioner's Private practice which is outside of the jurisdiction of FHCi.

However, FHCi stands by the safety, efficacy, and reliability of HPx Programs and Homeopathic Protocols it develops. In addition, operates in transparency for any possible Adverse Event. Accordingly, in order to serve the public in transparency, if a Patron believes they or their children have adversely reacted to an HPx program or Homeopathic protocol in such a way that there may have been an Adverse Event then:

10.11.1 Procedure:

1. The Patron, or representative, is to contact their HPx Practitioner as soon as an Adverse Event occurs to seek out the appropriate homeopathic or medical intervention.
2. The HPx Practitioner is to work with the family to evaluate health status of them or their child to offer homeopathic support or referral for medical support if needed.
3. The HPx Practitioner is also to take a full written report of events leading up to an Adverse Event to evaluate if there could be other extraneous circumstance that may have led to Adverse Event, including but not limited to HPx nosode and potency given, gender and age of participant, dates of administration, previous responses to other nosodes, long-term health status of the person, previous vaccinations and reactions to vaccinations, recent illnesses that may be confounding factors, illnesses of other family members or possible contact with other contagious individuals, and/or other environmental, nutritional, or medicinal exposure in the same time frame. HPx Practitioner is to complete HP Supervisor Adverse Event Reporting Form within three months of said event and submit to the Review committee.
4. HPx Practitioners can seek supervision from program coordinators at any point in the process to assist the family in advising for remedial solutions.
5. After the consultation with the HPx Practitioner, the Patron is to use the FHCi Patron Adverse Event Reporting form to give a full written description of events that occurred and the medical treatment, homeopathic or otherwise, obtained to mitigate the event. A Patron up to three months after the supposed incidence to submit a written report to FHCi of such an event.
6. Both Patron Adverse Event form and HPx Practitioner Adverse Event forms are to be submitted to the FHCi the Adverse Event Review Committee for review. The review committee may contact both Patron and/or HPx Practitioner for clarification during the review process.
7. The Adverse Event Review Committee will review documents and write a full report to be submitted to the Board within one month of receipt of both documents.
8. If it is determined that in fact an HPx Program or Homeopathic Protocol did cause an Adverse Event, it will be logged and made public on the website, withholding PHI of the Patron and the name of the HPx Practitioner supervising the case.

10.12: Publications: Peer-reviewed written or audio-visual publications and presentations will be made public to bring recognition and awareness to the research. All data, analysis, exhibitions, and publications will be held under the intellectual property of FHCi and not belong to any person or group of people who may have authored the research or be used for personal gain.

Chapter eleven: promotion of access to HPx Programs and Homeopathic Protocols – education and international outreach

11.1: Access to HPx: To fulfill the above intentions, FHCi will also seek out avenues that will ensure public access to HPx wherever there is a need and desire from the local population. FHCi will work closely with international working groups of homeopaths and local leaders to ensure seamless access to and application of HPx programs relevant to the infectious disease incidence need, local legal parameters, culture, and customs of the population served.

11.2: Education: To fulfill this area of FHCi's purpose, members of the FHCi Board will actively pursue avenues to educate and disseminate information about Homeoprophylaxis and Homeopathy locally and globally.

11.2a Public education: FHCi shall strive to offer educational programs geared towards the public in HPx and Homeopathy that are focused on immune system health, children's immune systems, developing immune systems, restoration of immune systems, and more concerning infectious disease, childhood disease, tropical disease, epidemic disease, and vaccination disease. The focus will be on HPx and Homeopathic evaluation, support, treatment, and interventions.

Venues for education:

- i. Online classes: live or pre-recorded.
- ii. In-person classes, public lectures, conferences, or symposiums.
- iii. Written material.

11.2b Practitioner education: FHCi shall strive to offer educational programs geared towards practitioners in HPx and Homeopathy that are focused on immune system health, children's immune systems, developing immune systems, restoration of immune systems, and more about infectious disease, childhood disease, tropical disease, epidemic disease, and vaccination disease.

These educational programs will focus on homeopathic and adjunctive measures, including but not limited to nosodes, single remedies, remedies in series, and herbal and nutritional support to address identified conditions.

Types of education: online or in-person options:

- i. Associate Practitioner training: For single disease HPx Programs or research purposes.
- ii. Certification Training: For Full Certification to offer the All HPx Programs.
- iii. Advanced training: For up-to-date comprehensive philosophical and clinical applications based on our research or clinical experience.
- iv. Travel disease HPx applications specific to individual needs and locations
- v. Individual HPx Programs for college kids, adults, seniors, etc.
- vi. Research training and applications.
- vii. Chronic disease and Never-been -well since applications.
- viii. Vaccine detoxification programs.
- ix. Other: including but not limited to research results, membership issues, new insights, accommodation to public health programs
- x. Written material, publications, research, periodicals, and books

11.3: Relief organizations: FHCI will work with relief organizations, Non-Governmental Organizations (NGOs), affiliate and international organizations that share a similar vision of research and promotion of Homeoprophylaxis and homeopathy, and other motivations working towards individual's right to access HPx and homeopathy for disease prevention and immune system education based on current infectious disease incidence and needs.

