

Associations:

**Comilva ODV,  
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They send to:

**President of the Italian Republic  
President of the Council and Honorable Members of the Italian  
Government President of the Chamber of Deputies and  
Honorable Deputies;  
President of the Senate and Honorable  
Senators; Presidents of Italian Regional  
Councils;  
Presidents of Italian Regions and members of Regional Councils;  
Presidents of Autonomous Provinces and members of Provincial  
Councils;**

**Subject: Rejection of the International Pandemic Treaty and the amendments to the International Health Regulations under discussion at the World Health Organization.**

### [Foreword](#)

WHO is preparing two documents: a package of amendments to the current International Health Regulations, which date back to 2005 (IHR); and a proposal for a new Pandemic Treaty.

Different names were used for the treaty over time as new drafts were produced (e.g., "Pandemic Treaty," "Agreement on Pandemics," etc.). The negotiations for the development of these texts took place mostly in secrecy, with no transparency to the public or, apparently, even to democratically elected governments. Both documents are expected to be adopted at the 77<sup>a</sup> World Health Assembly, whose work will begin on May 27, 2024.

Adoption of the Treaty requires a two-thirds vote of the 194 member states of the World Health Assembly, and the Treaty is binding only on those states that ratify it. Amendments to the International Health Regulations, on the other hand, require a simple majority vote and become binding on all WHO member states except those that reject them or express reservations within defined time limits.

### [A threat on many fronts](#)

With the current formulations, consequences of accession would be:

- Transfer sovereignty and decision-making power in health matters to the Director-General (and the Directors of the six Regions) of WHO;
- use the concept of "One Health" to bind humans, animals, plants, and ecosystems, including climate change, into a single basket under the authority of WHO: an external direction, divorced from the

democratic mechanisms of each country, it would become the holder of the power to regulate all aspects of daily life, productive activities, and land and wildlife management;

- allow continuous pandemics (even potential or presumed ones) and other types of emergencies to be declared in a totally discretionary manner: this would justify the spread of new vaccines, vaccine or other passports, digital currencies and, in general, almost total control over populations;
- impose vaccines obtained by "fast track" procedures, insufficiently tested and approved by emergency procedures, relieving those who produce them and those who (paid) administer them of all responsibility, even in the face of evidence of poor efficacy and safety;
- restricting the ability of physicians to practice their profession to the best of their knowledge through the imposition of health protocols and mandatory rules on patient care (such as prohibitions on visiting patients in their presence or at their homes ...);
- justify censorship and propaganda in the media, on the Internet, in schools and universities, in workplaces, etc., in the name of health;
- disproportionately increase WHO's costs.

#### What are the specific problems with WHO's proposed amendments?

- Article 3 of the proposed amendments to the CSRs **ELIMINATED** protections for human rights, personal freedoms and dignity, and-after criticism-it is still unclear whether there is any intention to restore them;
- Article 43(4) of the proposed amendments to the IHR stipulates that **WHO may impose or prohibit the use of certain drugs or other measures** in a pandemic, and that its "recommendations" become binding.

#### States' obligations under the proposed amendments to the CSRs include:

- **Proliferation of biolaboratories** classified BLS3 and BLS4 (in Italy one per region!), despite the fact that it is still unclear whether the SARS-CoV-2 pandemic originated from the escape of biological material from a laboratory. As well as **transfer of samples and genetic sequence data for "pathogens capable of causing pandemics and epidemics or other high-risk situations" to WHO and third parties**, despite the dangers involved (Art. 44.1(f), new), even in light of the technologies used to enhance microorganisms (e.g. GOF, *Gain of Function*, technology) and the possible admixture with the development of real biological weapons (often these laboratories do not provide any possibility of control by the public security authorities of the host country);
- **Handing over a blank check to WHO to create new rules in the future:** a Conference of the Parties and a new Secretariat will set the rules for the operation of pandemic prevention and response; declaring a state of emergency in certain countries, in certain geographic areas or across the board, with regard to isolated events that are determined ("at the table") to have an impact on global health. In effect, this is a license to affect the social, economic and productive life of each country;
- **Censorship of "false (disinformation) and unreliable information"** on public health threats established by WHO (Art. 44.1(h), new), with surveillance on social media, widespread censorship of expressions/information not aligned with WHO (or EU ...) narrative.

#### Disinformation and Censorship

The treaty calls for protecting against "infodemics" (i.e., information overload) and preventing misinformation and disinformation, to counter "disinformation" and "incitement to hatred and violence." This is, however, a specious pairing of concepts that should be kept quite distinct.

Already "incitement to hatred" itself has ambiguous boundaries, lends itself to exploitation, and should be distinguished from actual incitement to physical violence. The latter, however, should by no means be juxtaposed with "disinformation," a lemma as misleading as it is tendentious. In fact, information by its very nature requires dialectical confrontation in order for documentary evidence to prevail over unsupported opinions, even if these constitute entrenched and widespread prejudices.

This a fortiori should apply in science, where reference must be made to data, and open discussion in their interpretation (debate). The undue coupling of "incitement to violence" and "disinformation" is just a ploy to gag debate and censor non-aligned information.

The Digital Services Act<sup>1</sup> ) has been in effect since August 2023, but now censors smaller platforms as well. The European Commission welcomed<sup>2</sup> that "*the responsibilities of users, platforms and public authorities have been rebalanced according to European values.*"

But who decides what the responsibilities and "European values" are?

What about the fundamental rights guaranteed by our Constitution? First and foremost, the freedom of opinion and manifestation of thought, the right to nondiscrimination, the right to work, the right to care (often traded off for a supposed "duty of therapy")...

This framework ultimately represents a blatant authoritarian drift that aims to impose EU "values" in place of the rights underlying the constitutions of individual member states.

#### The conflict of interest

It should be emphasized that WHO, nowadays, is a structure that benefits from "mixed" funding, coming from both "public" actors (governments ...) and private organizations.

On the one hand, funding from states is uneven among them, with some countries contributing much more than others; on the other hand, the so-called private "benefactors" mostly coincide with the owners of substantial shares in companies and firms producing drugs and medical devices, including vaccines. This intermingling of public and private interests does not guarantee the necessary neutrality in the decisions of this international organization: the WHO ultimately cannot be considered a *super partes* institution at present.

#### What we ask

For all of the above, we call for concrete commitments from the institutions at hand, each for the parts within its competence, on the following points:

1. **Not adhering to the so-called Pandemic Treaty nor to amendments to the International Health Regulations** (sticking to those in force since 2005), consistent with the line announced by Minister Schillaci regarding the conversion of the Decree-Law of February 26, 2024, in the sense of the deletion of all references to the global green-pass system proposed by the WHO and all references to concrete sovereignty cessions;
2. **Immediately dismiss the government's delegate to the INB**, Intergovernmental Negotiating Body, at the WHO, Mr. Ghebremedhin Ghebregzabiher, appointed by the previous Draghi government,

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<sup>1</sup> <https://digital-strategy.ec.europa.eu/en/policies/digital-services-act-package>

<sup>2</sup> [https://commission.europa.eu/strategy-and-policy/priorities-2019-2024/europe-fit-digital-age/digital-services-act\\_en#what-are-the-key-goals-of-the-digital-services-act](https://commission.europa.eu/strategy-and-policy/priorities-2019-2024/europe-fit-digital-age/digital-services-act_en#what-are-the-key-goals-of-the-digital-services-act)

replacing him with a new delegate aligned with the current government's policy; or simply withdraw the delegate since Italy will not join the Treaty;

3. **Review as a whole the first circulated draft of the National Respiratory Pandemic Preparedness and Response Plan**, which would commit Italy to do in essence what WHO is trying to impose on us in May. Approval of the text, to be redrafted with input from independent experts not implicated in past pandemic management, should be preceded by a broad public debate.
4. **Initiate a commission of inquiry into the activities of BLS3 and BLS4 class biolaboratories in the country**, in order to ascertain what pathogens are being processed there, for what purposes, through what funding, and with what safety measures to protect the public.

Finally, it is strongly urged that we reaffirm our commitment to guarantee **FREEDOM OF EXPRESSION, INFORMATION AND CARE**, and to promote open scientific comparisons, opposing national and international norms (from whatever source: WHO, Europe or other bodies) that hinder them under the pretext of preventing so-called "disinformation."

Certain that issues of such importance are a priority for all, we look forward to your kind feedback.

there, April 23, 2024

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