

## **OPEN LETTER TO THE SECRETARY GENERAL OF THE UNITED NATIONS**

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### **REGARDING THE RISKS OF THE COVID-19 VACCINE AND THE VIOLATION OF FUNDAMENTAL FREEDOMS**

Mr. Secretary General,

On February 22, 2021, you stated that « *Using the pandemic as a pretext, authorities in some countries had deployed heavy-handed security responses and emergency measures to crush dissent* »<sup>1</sup>.

Indeed, in order to face the international sanitary emergency (voted by the World Health Organization on January 30, 2020), a certain number of States have implemented solutions, most of which have been dictated by the emergency, without consideration of a balance of benefits and risks weighed with discernment.

In real terms, generalized confinement measures were adopted, decisions of forced quarantine were imposed on populations, prohibitions of gathering were legion.

On the individual level, the generalized wearing of masks, containment measures, forced isolation, mass vaccination, have certain consequences, and the signatories of this letter are surprised that these consequences are denied or minimized, while the literature abounds as to them.

However, the benefit of these decisions is notoriously insufficient to be able to imagine controlling their very real risks.

The authors of this letter, scientists and lawyers, fully understand the need to prioritize public health to the detriment, without a doubt, of individual liberties or at least some of them.

But in addition to the search for strict proportionality, they intend to argue that the measures thus enacted have, for many, no scientific basis, no health legitimacy, as their benefits have never been demonstrated, while their risks have been clearly identified, and can be judged as colossal on the individual and collective level.

For this reason, the signatories of this letter first approached the WHO to call for the implementation of a number of measures, including: making decisions based on risks and benefits in an equitable society; debating accepted choices that benefit the group and protect minorities and freedom.

The authors intend to open a dialogue, but this is not the case despite the urgency always used to apply restrictive and weakening measures.

They wonder whether the pandemic has not just served as a pretext for states to lay the new foundations of a social contract, which, if unbalanced, would make it possible to restrict public freedoms.

### **ON THE NON-PROPORTIONALITY OF THE MEASURES IN THE PANDEMIC EVOLUTION AND THE INFRINGEMENT OF THE INTERNATIONAL COVENANT ON CIVIL AND POLITICAL RIGHTS (ICCPR)**

Emergency powers must be used within the parameters of international human rights law, including the ICCPR, which recognizes that states may need additional powers to deal with exceptional situations.<sup>2</sup>

Indeed, the state of health emergency when it is not strictly constituted proposes the weakening of the promotion and protection of guaranteed freedoms.

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<sup>1</sup> <https://www.ohchr.org/FR/HRBodies/HRC/Pages/NewsDetail.aspx?NewsID=26771&LangID=F>

<sup>2</sup> « Emergency measures and covid-19: guidance », 27 avril 2020”

The proportionality of the measures adopted must be analyzed on a case-by-case basis and obviously when they are pronounced in the context of this exceptional period.

These powers should be limited in time and should only be exercised on a temporary basis with the goal of restoring a state of normalcy as soon as possible<sup>3</sup>.

Limitations on human rights in a health crisis must not be excessive. However, they must not be insufficient either: the State has an international obligation to take all necessary measures to safeguard the rights.

Thus, with regard to the right to life, the State must not only refrain from arbitrarily infringing it, but must also take all necessary measures to protect it with regard to both a specific individual and a population as a whole

In this case, it is important for the State to find the right balance<sup>4</sup>.

According to article 4 of the ICCPR:

#### *Article 4*

*1. In time of public emergency which threatens the life of the nation and the existence of which is officially proclaimed, the States Parties to the present Covenant may take measures derogating from their obligations under the present Covenant to the extent strictly required by the exigencies of the situation, provided that such measures are not inconsistent with their other obligations under international law and do not involve discrimination solely on the ground of race, colour, sex, language, religion or social origin.*

*2. No derogation from articles 6, 7, 8 (paragraphs 1 and 2), 11, 15, 16 and 18 may be made under this provision.*

*3. Any State Party to the present Covenant availing itself of the right of derogation shall immediately inform the other States Parties to the present Covenant, through the intermediary of the Secretary-General of the United Nations, of the provisions from which it has derogated and of the reasons by which it was actuated. A further communication shall be made, through the same intermediary, on the date on which it terminates such derogation.*

Thus, "the right to life" and the prohibition "to subject a person without his free consent to a medical or scientific experiment" are not debatable.

The specific nature of the right to life in international human rights conventions tends to guide state policy in health crises. Considered as the "highest value in the scale of international human rights"<sup>5</sup> and "the necessary condition for the exercise of all other rights", it has an intangible character; it is indeed "the first of human rights"<sup>6</sup>.

The National Consultative Commission on Human Rights (CNCDDH), in its opinion of May 3, 2020, reminds us that if measures restricting rights and freedoms can be taken, taking into account exceptional situations, it is on the condition that they respect the principles of strict necessity, adaptation and proportionality<sup>7</sup>.

The principle of proportionality has the same purpose everywhere: to moderate the power of public authorities in order to guarantee the rights and autonomy of individuals and to avoid infringements

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<sup>3</sup> *Idem.*

<sup>4</sup> European Court of Human Rights, Judgment 18 september 2014, *Bljakaj c. Croatie*, req. n° 74448/12, sec. 120 et 121.

<sup>5</sup> European Court of Human Rights, Judgment 22 march 2001, *Case Strelitz, Kessler et Krenz a. Allemagne*, Req. n° 34044/96, 35532/97 and 44801/98, sec. 72.

<sup>6</sup> Frédéric Sudre, Laure Millano, Hélène Surrel, *European and international human rights law*, Paris, PUF, 2019, 14<sup>th</sup> edition, p. 458.

<sup>7</sup> CNCDDH. Notice State of health emergency and rule of law. NOR : CDHX2011093V. [JORF n°0108 3 may 2020](#). Text n° 49

which, by being excessive or too radical, would be likely to undermine the very substance of rights and freedoms. However, it takes various forms: it is usually a simple contentious mechanism allowing the judge to arbitrate between competing legal principles; it is sometimes also set up as a true general principle.

A group of 31 leading international law experts, convened by the International Commission of Jurists, the International Association of Criminal Law, the American Association of the International Commission of Jurists, the Urban Morgan Institute of Human Rights, and the International Institute of Higher Studies in Criminal Sciences, met in Siracusa, Sicily, in April and May 1984 to consider the provisions of the International Covenant on Civil and Political Rights that allow for limitations or derogations from that instrument. This document states that:

*C. "Strictly required by the exigencies of the situation"*

*51. The severity, duration and geographic scope of any derogation measure shall be such only as are strictly necessary to deal with the threat to the life of the nation and are proportionate to its nature and extent.*

*52. The competent national authorities shall have a duty to assess individually the necessity of any derogation measure taken or proposed to deal with the specific dangers posed by the emergency.*

*53. A measure is not strictly required by the exigencies of the situation where ordinary measures permissible under the specific limitation clauses of the Covenant would be adequate to deal with the threat to the life of the nation.*

*54. The principle of strict necessity shall be applied in an objective manner. Each measure shall be directed to an actual, clear, present or imminent danger and may not be imposed merely because of an apprehension of potential danger.*

*55. The national constitution and laws governing states of emergency shall provide for prompt and periodic independent review by the legislature of the necessity for derogation measures.*

*56. Effective remedies shall be available to persons claiming that derogation measures affecting them are not strictly required by the exigencies of the situation.*

*57. In determining whether derogation measures are strictly required by the exigencies of the situation, the judgement of the national authorities cannot be accepted as conclusive.*

As far as international human rights law is concerned, it is clear and evident that any kind of measure taken within the framework of a state of emergency must be done in an objective and clear manner.

However, this principle has not been respected.

We have seen a clear violation of fundamental freedoms by the States.

Below is a table summarizing the points to be discussed from the WHO letter, a copy of which is attached. We invite you to read it in detail as it contains the scientific literature justifying this summary, which we wish to submit to dialogue and debate in order to adopt solutions adapted to each group.

Comparing actions and interventions using same standards of evidence and criteria

	<u>STRENGTH OF EVIDENCE</u>	<u>SHORT TERM BENEFITS</u>	<u>LONG TERM BENEFITS</u>	<u>SHORT TERM RISKS</u>	<u>LONG TERM RISKS</u>	<u>In many countries</u>
<u>Obesity, sports and nutrition</u>	<u>6</u>	<u>5</u>	<u>6</u>	<u>2</u>	<u>2</u>	<u>Neglected</u> / <u>Restricted</u>
<u>Nutraceuticals and Vitamin D correction</u>	<u>5</u>	<u>5</u>	<u>6</u>	<u>2</u>	<u>2</u>	<u>Neglected</u> / <u>Restricted</u>
<u>Aeration and encouraging activity in open air settings</u>	<u>6</u>	<u>5</u>	<u>5</u>	<u>2</u>	<u>2</u>	<u>Neglected</u> / <u>Restricted</u>
<u>Universal masks in open air and for children</u>	<u>2</u>	<u>2</u>	<u>1</u>	<u>4</u>	<u>5</u>	<u>Mandatory</u> / <u>Recommended</u>
<u>Massive vaccination</u>	<u>3</u>	<u>3</u>	<u>2</u>	<u>5</u>	<u>6</u>	<u>Pressured</u> / <u>Marketed</u>
<u>Vaccinal passport or any similar document paper or electronic</u>	<u>2</u>	<u>2</u>	<u>1</u>	<u>6</u>	<u>6</u>	<u>Pushed by many</u>
<u>Treatment with Ivermectin</u>	<u>5</u>	<u>5</u>	<u>5</u>	<u>2</u>	<u>2</u>	<u>Blocked</u> / <u>Restricted</u>
<u>Early outpatient multi-drug therapy as per clinical directions</u>	<u>5</u>	<u>5</u>	<u>5</u>	<u>2</u>	<u>2</u>	<u>Studies stopped before conclusion</u> / <u>Lancet Gate</u>
<u>Fear propagation</u>	<u>4</u>	<u>2</u>	<u>1</u>	<u>5</u>	<u>6</u>	<u>Promoted by many</u>

The States ignore these solutions and apply massive vaccination.

In view of the above, we ask you, Mr. Secretary General, within the framework of your competence and powers:

- To call on all states that have observed excess mortality coinciding with vaccination to conduct a survey in each country explaining the cause of this excess mortality coinciding with the vaccination campaign;
- To call on states to communicate clearly in light of the above requested investigations of all known or suspected vaccine risks and to clearly state that the safety and long-term risks of vaccines are unknown for free, informed, fair consent without temptation or pressure;
- To call on states to make decisions based on the risks and benefits in an equitable society; to debate accepted choices that benefit the group and protect minorities and freedom;
- To call on states to actively monitor all vaccinated persons for eight years after vaccination and to publicly report all data from their vaccination campaign on a daily basis with a comparison of unvaccinated persons, as the long-term effects will need to be known for a full and fair final benefit-risk balance;
- To call on state to strengthen the hospital system;
- To call on states to promotes Vitamin D correction campaign; investment campaign on the improvement of ventilation; and campaign against obesity;
- To call on states to open a debate on treatments; on the benefit/risk of vaccines by category, especially the young and those already naturally immunized;
- To call on states to promote a learning to better manage conflicts of interest;
- To call on states to conduct additional safety studies of certain vaccines;
- To call on states to promote actions of hope to support the psychology of the population by acting on multiple fronts with multiple tools.

Thank you for your interest in this letter. Please accept, Mr. Secretary General of the United Nations, our expressed gratitude.

Signed

By lawyers, scientists and doctors from 21 countries and 5 continents

Signatories' list has been sent to the UN