Global Standards for Rights-Based State Responses to the COVID-19 Pandemic

The COVID-19 pandemic has elicited a range of responses from states around the globe. Some countries have taken proactive measures to ensure widespread testing, access to healthcare, and personal protective equipment. Many others, however, have been slow or even reluctant to put in place measures to protect their populations from COVID-19 and its associated threats to public health and human rights.

In the words of the United Nations secretary-general, Antonio Guterres, the pandemic presents “the greatest test that we have faced together since the formation of the United Nations” after the Second World War. The international human rights regime emerged in response to that crisis as a key pillar for international order and cooperation. These norms must be at the center of states’ responses to this new test we face globally today.

Working at the intersection of medicine, science, and human rights, Physicians for Human Rights (PHR) calls for states to adopt rights-based responses to COVID-19, driven by science and respect for human rights and public health directives. To this end, PHR recommends that states adopt the following measures as areas of priority:

**Respect and promote the rights and safety of health workers**

The inadequate supply of personal protective equipment (PPE), including basic surgical masks and N95 respirators, for health workers on the front lines of the COVID-19 pandemic is a global crisis. To ensure effective prevention and treatment, states must ensure that health workers and facilities are adequately resourced, including adequate training, PPE, and testing kits, to protect all health workers, covering a breadth of professions, ranging from doctors and nurses to technicians and cleaning staff who are exposed to SARS-CoV-2, the virus which causes COVID-19.

In response to inadequate safety conditions, many health workers have spoken out publicly and then faced threats and retaliation for having expressed their concerns. State-, regional- and international-level responses must actively protect the rights of health workers and offer them a safe platform to raise concerns. In addition, PHR calls for all health workers to have access to transparent and accurate information about the coronavirus threat level and associated health impacts in their community and workplace and to have the guarantee that they are able to perform their duties safe from physical attacks and verbal abuse from any source that threatens their work, safety, and well-being.

**Ensure that accessible, acceptable, quality health care is available to all**

To ensure an effective, rights-based response to the health threats of coronavirus, states must ensure that health care and public health responses are available, accessible, acceptable, and of sufficient quality, particularly for at-risk populations, in keeping with international human rights standards. The Committee on Economic, Social and Cultural Rights provides essential guidance on implementation of the right to the highest attainable standard of health. States must recognize, measure, and accurately account for disparities in access to health care. To this
end, states must collect data disaggregated by demographics, such as gender, age, race, ethnicity, religion, and socio-economic status. A human rights lens is essential to ensuring an equitable response to the pandemic, including any steps towards providing universal access to treatments, vaccines, and tests.

Particular populations have been put in situations that make them especially vulnerable to the threat of the coronavirus, requiring close monitoring and proactive measures to prevent outbreaks and guarantee the right to health. Prisoners and detainees across the world are among those most vulnerable to coronavirus infection, given conditions of detention, typically poor hygiene, often dramatic overcrowding, and poor health care infrastructure. Refugees and internally displaced persons (IDP) living in camps face exceptionally high risks: many are living in cramped, densely populated areas without adequate access to health care, sanitation, and information. It is therefore of critical importance that states assess the health and prevention needs of all communities and consider those most at risk in their national and regional response plans.

**Abide by humanitarian principles and ensure a robust humanitarian response in conflict settings**

A vast number of the world’s population lives in conflict-affected areas, and a record 168 million people required humanitarian assistance and protection prior to the COVID-19 pandemic. In light of the unique dangers to these populations, states, regional, and multilateral bodies must ensure that their health and broader humanitarian needs are met at this time. As an immediate priority, attacks on health care – which PHR has documented across conflict zones – must cease immediately, and belligerents must commit to abiding by the laws of armed conflict without reservation. All parties must abide by international humanitarian law and cease all attacks on civilians and civilian infrastructure. State and local actors must guarantee full, safe, immediate, and unhindered access for humanitarian and medical personnel, their equipment, and supplies to areas at high risk.

**Recognize and mitigate the adverse impacts of COVID-19 responses on human rights**

States have invoked “emergency powers” that can suppress basic human rights. These include unnecessary use of force, excessive militarization of civilian spaces, draconian and sweeping application of curfews and quarantines, suppression of freedom of movement, and undermining of the right to seek asylum. The Siracusa Principles on the Limitation and Derogation of Provisions in the International Covenant on Civil and Political Rights (1984) provide essential standards by which states’ responses can be legally assessed. When imposing any necessary restrictions on basic freedoms and services, states must consider and mitigate any subsequent human rights impacts or human rights violations committed against those at increased risk in this context. For example, there is an alarming rise in sexual and gender-based violence across the world, including intimate partner violence, and in violence used to “enforce” curfews and social distancing measures. Such second order impacts, if unaddressed, may give rise to serious violations of human rights of especially marginalized populations.

Emergency situations, particularly in relation to public health, require both the protection of basic human rights and an enhancement of state reliance on human rights approaches and frameworks. For countries across the world, effective responses will rest on commitments to accountability, public oversight, transparency, and cooperation.