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**Committee on Economic, Social and Cultural Rights**

 Statement on the coronavirus disease (COVID-19) pandemic and economic, social and cultural rights

 Statement by the Committee on Economic, Social and Cultural Rights[[1]](#footnote-1)\*

 I. Introduction

1. The COVID-19 pandemic is threatening to overwhelm public health-care systems, and is having devastating impacts throughout the world on all spheres of life – the economy, social security, education and food production. Tens of thousands of lives have already been lost, including those of doctors and nurses providing front-line medical treatment. Jobs have been lost and livelihoods imperilled as a result of restrictions imposed to curb the transmission of the virus, such as lockdowns. Schools are closed in many affected countries, and people cannot gather for significant cultural and community events such as religious services, weddings or funerals. At the outset of its statement, the Committee extends its sympathy to all victims of the pandemic and their families, as well as the broader communities of which they are part.

2. The pandemic has profoundly negative impacts on the enjoyment of economic, social and cultural rights, especially the right to health of the most vulnerable groups in society. As explained below, States parties are under an obligation to take measures to prevent, or at least to mitigate, these impacts. Nevertheless, if States do not act within a human rights framework, there exists a clear risk that the measures taken might violate economic, social and cultural rights and increase the suffering of the most marginalized groups. No one should be left behind as a result of the measures it is necessary to take to combat this pandemic.[[2]](#footnote-2) These circumstances have led the Committee to issue the present statement to highlight the most important impacts of this pandemic on economic, social and cultural rights and to make some recommendations to States parties to combat the COVID-19 pandemic in a manner consistent with their obligations under the Covenant.

 II. Impacts of the pandemic on economic, social and cultural rights

3. The COVID-19 pandemic vividly illustrates the importance of the indivisibility and interdependence of all human rights. This pandemic is essentially a global health threat. Nevertheless, it has multiple implications for the enjoyment of civil and political rights because some of the measures taken by States to combat it impose severe restrictions on the freedom of movement and on other rights. Thus, it is essential that the measures adopted by States to combat this pandemic are reasonable and proportionate to ensure protection of all human rights.

4. Health-care systems and social programmes have been weakened by decades of underinvestment in public health services and other social programmes, accelerated by the global financial crisis of 2007–2008.[[3]](#footnote-3) Consequently, they are ill equipped to respond effectively and expeditiously to the intensity of the current pandemic.

5. Disadvantaged and marginalized groups are severely affected by the current crisis. Older persons, persons with pre-existing health conditions and those with compromised immune systems are particularly vulnerable to serious health consequences if infected by COVID-19. Other groups are at great risk of contagion, such as those in residential care facilities or communal living arrangements, prisoners and persons in detention facilities, and residents of informal settlements or other areas where adequate access to water, soap or sanitizer is lacking. Certain categories of workers, such as delivery workers, garbage collection workers, manual labourers and workers in the agricultural sector, are exposed to heightened risks of being infected, as the nature of their work does not allow them to take advantage of dispensations to work from home using digital technology. Many health-care workers, who are performing heroic work on the front lines, responding to the pandemic, are being infected as a result of inadequacies in or shortages of personal protective equipment and clothing. Several groups are severely disadvantaged by the economic consequences of measures adopted in a number of countries to contain the spread of COVID-19. These include precarious workers in the “gig economy” or the informal sector,[[4]](#footnote-4) along with other groups of workers who face retrenchments or loss of wages and social benefits, including domestic workers in many countries. Informal traders and a number of small businesses can no longer ply their trade or conduct business, resulting in profound economic insecurity for themselves and their dependants.

6. Inadequate public goods and social services also deepen global income and wealth inequalities. Those living in poverty cannot afford to purchase essential goods and social services in the private market, and they bear the disproportionate burden of the economic consequences of quarantines, lockdowns and the adverse national and international economic situation.

7. In countries where schools, technical colleges and higher educational institutions are closed, efforts are being made to continue teaching and learning online. These are important measures to mitigate the impact of the closures on the right to education. Nevertheless, they also carry the risk of deepening educational inequalities between rich and poor learners owing to unequal access to affordable Internet services and equipment such as computers, smart phones and tablets.

8. The COVID-19 pandemic also threatens to deepen gender inequalities as the burden of caring for children at home and for sick or older family members falls disproportionately on women, given the still deeply embedded gender stereotypes and roles in many societies. In circumstances where families are in lockdown or quarantine, women may be additionally vulnerable to domestic violence, and have limited recourse in these circumstances.

9. Indigenous peoples, refugees, asylum seekers and those living in conflict-affected countries or regions are particularly vulnerable during this pandemic. Many of them lack adequate access to water, soap or sanitizer, COVID-19 testing facilities, health-care services and information. These populations frequently suffer higher rates of chronic illnesses and underlying health conditions than others, which places them at greater risk of developing severe health complications from COVID-19.

 III. Recommendations

10. In order to ensure that Covenant rights and obligations are protected and fulfilled during this crisis, States parties should take a range of urgent measures. In particular, responses to the pandemic should be based on the best available scientific evidence to protect public health.[[5]](#footnote-5)

11. Where the measures adopted limit Covenant rights, the measures should comply with the conditions set out in article 4 of the Covenant. In essence, such measures must be necessary to combat the public health crisis posed by COVID-19, and be reasonable and proportionate. Emergency measures and powers adopted by States parties to address the pandemic should not be abused, and should be lifted as soon as they are no longer necessary for protecting public health.

12. In responding to the pandemic, the inherent dignity of all people[[6]](#footnote-6) must be respected and protected, and the minimum core obligations imposed by the Covenant should be prioritized.[[7]](#footnote-7) In this difficult context, access to justice and to effective legal remedies is not a luxury, but an essential element to protect economic, social and cultural rights, especially those of the most vulnerable and marginalized groups. Thus, for example, it is essential that law enforcement officials respond to cases of domestic violence, that domestic violence hotlines are operational, and that effective access to justice and legal remedies is accessible to women and children who are subject to domestic violence.

13. It is imperative that States parties adopt appropriate regulatory measures to ensure that health-care resources in both the public and the private sectors are mobilized and shared among the whole population to ensure a comprehensive, coordinated health-care response to the crisis.[[8]](#footnote-8) As the front-line responders to this crisis, all health-care workers must be provided with proper protective clothing and equipment against contagion. It is also essential that they are consulted by decision-makers, and that due regard is paid to their advice. Health-care workers play a critical role in providing early warning of the spread of diseases such as COVID-19 and in recommending effective measures of prevention and treatment.

14. States parties are under an obligation to devote their maximum available resources to the full realization of all economic, social and cultural rights, including the right to health. As this pandemic and the measures taken to combat it have had a disproportionately negative impact on the most marginalized groups, States must make every effort to mobilize the necessary resources to combat COVID-19 in the most equitable manner, in order to avoid imposing a further economic burden on these marginalized groups. Allocation of resources should prioritize the special needs of these groups.

15. All States parties should, as a matter of urgency, adopt special, targeted measures, including through international cooperation, to protect and mitigate the impact of the pandemic on vulnerable groups such as older persons, persons with disabilities, refugees and conflict-affected populations, as well as communities and groups subject to structural discrimination and disadvantage. Such measures include, among others, providing water, soap and sanitizer to communities that lack them; implementing targeted programmes to protect the jobs, wages and benefits of all workers, including undocumented migrant workers; imposing a moratorium on evictions or mortgage bond foreclosures against people’s homes during the pandemic; providing social relief and income-support programmes to ensure food and income security to all those in need; taking specially tailored measures to protect the health and livelihoods of vulnerable minority groups, such as the Roma, as well as those of indigenous peoples; and ensuring affordable and equitable access to Internet services by all for educational purposes.

16. All workers should be protected from the risks of contagion at work, and States parties should adopt appropriate regulatory measures to ensure that employers minimize the risks of contagion according to best practice public health standards. Until such measures are adopted, workers cannot be obliged to work and should be protected from disciplinary or other penalties for refusing to work without adequate protection. In addition, States parties should take immediate measures to protect the jobs, pensions and other social benefits of workers during the pandemic, and to mitigate its economic impacts through, for example, subsidizing wages, providing tax relief and establishing supplementary social security and income protection programmes.[[9]](#footnote-9)

17. Regulatory measures should also be adopted to prevent profiteering on foodstuffs, hygiene products and essential medicines and supplies. Recommended measures include lifting all value added tax on such supplies during the pandemic, and subsidizing the cost of essential foodstuffs and hygiene products to ensure that they are affordable to the poor.

18. Accurate and accessible information about the pandemic is essential both to reduce the risk of transmission of the virus and to protect the population against dangerous disinformation. Accurate and accessible information is also crucial in reducing the risk of stigmatizing, harmful conduct against vulnerable groups, including those infected by COVID-19. Such information should be provided on a regular basis, in an accessible format and in all local and indigenous languages. Measures should also be taken to expedite access to affordable Internet services and vital technical equipment for all students, particularly those in poorer communities and regions, so that they can benefit equally from online learning programmes while schools and higher education institutions are closed owing to the pandemic.

19. The COVID-19 pandemic is a global crisis, which highlights the crucial importance of international assistance and cooperation, a core principle enshrined in the Covenant.[[10]](#footnote-10) Such international assistance and cooperation include the sharing of research, medical equipment and supplies, and best practices in combating the virus; coordinated action to reduce the economic and social impacts of the crisis; and joint endeavours by all States to ensure an effective, equitable economic recovery. The needs of vulnerable and disadvantaged groups and fragile countries, including least developed countries, countries in conflict and post-conflict situations, should be at the centre of such international endeavours.

20. States parties have extraterritorial obligations related to global efforts to combat COVID-19. In particular, developed States should avoid taking decisions, such as imposing limits on the export of medical equipment, that result in obstructing access to vital equipment for the world’s poorest victims of the pandemic. Moreover, States parties should make sure that unilateral border measures do not hinder the flow of necessary and essential goods, particularly staple foods and health equipment. Any restriction based on the goal of securing national supply must be proportionate and take into consideration the urgent needs of other countries.

21. States parties should also use their voting powers in international financial institutions to alleviate the financial burden of developing countries in combating the pandemic, with measures such as granting these countries different mechanisms of debt relief. States parties should also promote flexibilities or other adjustments in applicable intellectual property regimes to allow universal access to the benefits of scientific advances relating to COVID-19 such as diagnostics, medicines and vaccines.

22. Unilateral sanctions of an economic and financial nature weaken health-care systems and could undermine efforts to combat COVID-19, especially in the context of the procurement of medical equipment and supplies. Such sanctions should be lifted to enable affected countries to have access to the resources they need to effectively combat the COVID-19 pandemic.[[11]](#footnote-11)

23. Pandemics are a crucial example of the need for scientific international cooperation to face transnational threats. Viruses and other pathogens do not respect borders. If adequate measures are not taken, a local epidemic can very quickly become a pandemic with devastating consequences. The role of the World Health Organization (WHO) in this field is fundamental and should be supported. Combating pandemics effectively requires stronger commitments from States to international cooperation, as national solutions are insufficient. Enhanced international cooperation should increase the preparedness of States and of international organizations, especially WHO, to respond to pandemics, for instance by sharing scientific information on potential pathogens. It should also improve early warning mechanisms, based on timely and transparent information provided by States on emerging epidemics that have the potential to become pandemics. This would allow early interventions, based on the best scientific evidence, aimed at controlling these epidemics and preventing them from becoming a pandemic. If a pandemic develops, sharing the best scientific knowledge and its applications, especially in the medical field, becomes crucial to mitigate the impact of the disease and to expedite the discovery of effective treatments and vaccines. Furthermore, in the aftermath of the pandemic, scientific research should be promoted to learn lessons and increase preparedness for possible pandemics in the future.

24. COVID-19 has highlighted the critical role of adequate investments in public health systems, comprehensive social protection programmes, decent work, housing, food, water and sanitations systems, and institutions to advance gender equality. Such investments are crucial in responding effectively to global health pandemics and in counteracting multiple, intersecting forms of inequality, including deep inequalities in income and wealth both within and among countries.[[12]](#footnote-12)

25. Lastly, the Committee calls upon all States parties to ensure that the extraordinary mobilization of resources to address the COVID-19 pandemic provides the impetus for long-term resource mobilization towards the full and equal enjoyment of the economic, social and cultural rights enshrined in the Covenant. In so doing, they will lay the foundation for achieving the ideal enshrined in the Universal Declaration of Human Rights of achieving a world of free human beings enjoying “freedom from fear and want”.[[13]](#footnote-13) Mechanisms to facilitate national and international cooperation and solidarity, and substantial investments in the institutions and programmes necessary for the realization of economic, social and cultural rights, will ensure that the world is better prepared for future pandemics and disasters. The Committee will continue to monitor the impact of the COVID-19 pandemic on economic, social and cultural rights through the fulfilment of its various mandates under the Covenant.

1. \* The present statement was adopted by the Committee on 6 April 2020. [↑](#footnote-ref-1)
2. See Committee on Economic, Social and Cultural Rights, statement on the pledge to leave no one behind: the International Covenant on Economic, Social and Cultural Rights and the 2030 Agenda for Sustainable Development (E/C.12/2019/1). [↑](#footnote-ref-2)
3. See the letter to States parties from the Chair of the Committee on Economic, Social and Cultural Rights, dated 16 March 2020; and Committee on Economic, Social and Cultural Rights, statement on public debt, austerity measures and the International Covenant on Economic, Social and Cultural Rights (E/C.12/2016/1). [↑](#footnote-ref-3)
4. See Committee on Economic, Social and Cultural Rights, general comments No. 18 (2005) on the right to work, No. 19 (2007) on the right to social security, and No. 23 (2016) on the right to just and favourable conditions of work. [↑](#footnote-ref-4)
5. See Committee on Economic, Social and Cultural Rights, general comment No. 25 (2020) on science and economic, social and cultural rights (forthcoming). [↑](#footnote-ref-5)
6. See the preamble to the International Covenant on Economic, Social and Cultural Rights. [↑](#footnote-ref-6)
7. See Committee on Economic, Social and Cultural Rights, general comment No. 3 (1990) on the nature of States parties’ obligations, paras. 10–11. [↑](#footnote-ref-7)
8. See Committee on Economic, Social and Cultural Rights, general comment No. 14 (2000) on the right to the highest attainable standard of health. [↑](#footnote-ref-8)
9. On protection of workers’ rights under the Covenant generally, see the Committee’s general comments No. 18, No. 19 and No. 23. [↑](#footnote-ref-9)
10. See, e.g., arts. 2 (1), 11 and 15 of the International Covenant on Economic, Social and Cultural Rights. [↑](#footnote-ref-10)
11. See Committee on Economic, Social and Cultural Rights, general comment No. 8 (1997) on the relationship between economic sanctions and respect for economic, social and cultural rights. [↑](#footnote-ref-11)
12. See Sustainable Development Goal 10. [↑](#footnote-ref-12)
13. This commitment is also recognized in the preamble to the International Covenant on Economic, Social and Cultural Rights. [↑](#footnote-ref-13)