



# **LSE Student Union Youth Model United Nations**

**26-28 February 2021**

## **Human Rights Council**

**Evaluating the access to human rights during the COVID era, especially the right to education and movement**

# Chair Biographies

## Anna Kokla

Hello everyone! I hope you are keeping safe during these challenging times. My name is Anna Kokla, I am from Greece and I am a second year law student at the LSE. It is my pleasure and honour to be serving as the head chair of the Human Rights Council.

This will be my seventh year overall participating in MUN conferences, and my sixth time as a chair, however my first time in a conference in London! During my MUN career, I have managed to serve as a chair in The Hague International Model United Nations conference, and as the Secretary General in my high school's conference. For me, MUN has been a way to keep up with current political, economic, social or legal developments, as well as meet new people from around the globe! In my spare time, I enjoy literature and traveling, as well as playing (and watching) tennis! I look forward to meeting you all in February! I am sure that YouthMUN will be a wonderful conference offering many opportunities to every participant.



## Imogen Rickman

Hi - my name's Imogen! I'm currently in my first year, studying BSc Politics and International Relations. In my free time, I love cooking and playing piano, and just joined the UCL rugby society. You can probably find me walking around London looking lost, although I'm generally inside reading and pretending to study. I've participated in many conferences in my four years of MUN experience, and have taken much interest in online MUN during the pandemic as well. Included in the conferences I've been to is YouthMUN, as the US in Year 12 and Kuwait at the last conference. Over the last few



years, I've really enjoyed gaining more experience as a chair, and YouthMUN 2021 will be my 16th time chairing at an MUN conference. I can't wait to come to YouthMUN for a third year, just in a different role! I look forward to seeing you all working - hopefully together - to come up with innovative solutions to the problems you'll face. See you in February, and good luck with your preparation!

## Letter from the Chairs

Dear Delegates,

Welcome to the Human Rights Council and welcome to YouthMUN 2021! We are living during very interesting, but challenging times, in terms of public health and security. Human rights have been at the core of debate during this pandemic, so that is why the topic we chose HRC plays and should continue to play a vital role in promoting and protecting human rights, not only during the pandemic, but also after its end.

As a team, we are greatly looking forward to watching and helping you debate this important topic, and we hope that you will enjoy the committee and find this background guide useful. We chose this topic because we feel that it is especially crucial at the moment, as we try to live in and navigate life in these unprecedented times.

Over the duration of the conference, we look forward to intense and fruitful debate, the main theme of the conference being "Evaluating the evolving nature of emerging crises and their implications on global governance". For a strong and a productive debate, in depth research and preparation is essential. We strongly urge you to go through the study guide we have created, since it contains very important information. This should be your core resource, you should not be restricted to the study guide. We have provided you with the resources we used to compose the study guide, as well as further reading resources, if you wish to deepen your understanding. Please try to conduct your own research, too, since independent research can make the difference and help you stand out in the debate!

If you have any questions with regard to the committee, the topic, the procedure or anything, do not hesitate to contact us. We are sure that it is going to be a memorable conference for all of us, despite the challenging times.

Kindest regards and good luck,

Anna Kokla ([xuanzihan1@gmail.com](mailto:xuanzihan1@gmail.com))

Imogen Rickman ([H.Aggarwal2@lse.ac.uk](mailto:H.Aggarwal2@lse.ac.uk))



# Introduction to the Committee

The Human Rights Council is an inter-governmental body within the United Nations system made up of 47 States responsible for the promotion and protection of all human rights around the globe. It has the ability to discuss all thematic human rights issues and situations that require its attention throughout the year, meeting at the UN Office at Geneva.

The Council investigates allegations of breaches of human rights in United Nations member states, and addresses important human rights issues such as freedom of association and assembly, freedom of expression, freedom of belief and religion, women's rights, LGBT rights and rights of racial and ethnic minorities.

It was established by the United Nations General Assembly on March 15 March 2006 to replace the UN Commission on Human Rights<sup>1</sup>, which had been heavily criticised for allowing the membership of countries with poor human rights records. The Human Rights Council collaborates with the Office of the High Commissioner of Human Rights

The members of the Council are elected by the majority of members of the General Assembly of the United Nations through direct and secret ballot. The General Assembly takes into account the candidate States' contribution to the promotion and protection of human rights, as well as their voluntary pledges and commitments in this regard. The Council's Membership is based on equitable geographical distribution. Seats are distributed as follows: African States: 13 seats, Asia-Pacific States: 13 seats, Latin American and Caribbean States: 8 seats, Western European and other States: 7 seats, Eastern European States: 6 seats. Members of the Council serve for a period of three years and are not eligible for immediate re-election after serving two consecutive terms.

The last session of Human Rights Council (45th session, 14 September - 2 October 2020)<sup>2</sup> discussed human rights implications of the Covid-19 pandemic, the situation of human rights in the Bolivarian Republic of Venezuela, the promotion and protection of human rights in Nicaragua, the situation of human rights in Myanmar, the human rights situation in Yemen, the question of the death penalty, the right to development, the right to privacy in the digital age, the question of racism, discrimination, xenophobia and related intolerance,

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<sup>1</sup> "HRC Home." OHCHR, [www.ohchr.org/en/hrbodies/hrc/pages/home.aspx](http://www.ohchr.org/en/hrbodies/hrc/pages/home.aspx).

<sup>2</sup> "Human Rights Council." Human Rights Watch, [www.hrw.org/topic/united-nations/human-rights-council](http://www.hrw.org/topic/united-nations/human-rights-council).



the human rights to safe drinking water and sanitation etc. The next session, 46th Regular Session, will take place from 22 February 2021 to 19 March 2021.

The Human Rights Council dwells on international human rights law, which has been inspired by the Universal Declaration of Human Rights, adopted in 1948 (although itself having no legal effect). Building on the achievements of the UDHR, the International Covenant on Civil and Political Rights, and the International Covenant on Economic, Social and Cultural Rights entered into force in 1976. The two Covenants have developed most of the rights already enshrined in the UDHR, making them effectively binding on States that have ratified them. They set forth everyday rights such as the right to life, equality before the law, freedom of expression, the rights to work, social security and education. Together with the UDHR, the Covenants comprise the International Bill of Human Rights.

## Introduction to the Topic

Right now, human rights are at stake almost every day. We can argue that human rights are violated in the pandemic, for example due to enforced lockdowns and therefore restricting freedom of movement. However, the maintenance, or lack thereof, of human rights is key in shaping the pandemic response, both for the public health emergency and the broader impact on people's lives and livelihoods.

The world is facing an unprecedented crisis. At its core is a global public health emergency on a scale not seen for a century, requiring a global response with far-reaching consequences for our economic, social and political lives. The priority is to save lives. In view of the exceptional situation and to preserve life, countries have no choice but to adopt extraordinary measures. Extensive lockdowns, adopted to slow transmission of the virus, restrict by necessity freedom of movement and, in the process, freedom to enjoy many other human rights. Therefore, some member states are justifying the reduction in some human rights but claiming this is the only way to protect others, for example the right to life.

It became clear early on that the pandemic was more than a health crisis; it is a socio-economic crisis, a humanitarian crisis, a security crisis, and a human rights crisis.

The COVID-19 crisis has exacerbated the vulnerability of the least protected in society. It underlines deep economic and social inequalities and inadequate health and social protection systems that require urgent attention as part of the public health response. Women and men, children, youth and older persons, refugees and migrants, the poor, people with disabilities, persons in detention, indigenous persons, religious, ethnic and other minorities and LGBTQIAAP+ people are all being affected differently. We have an obligation to ensure



everyone is protected and included in the response to this crisis, and that no group is affected worse than another due to prejudice against them.

Human rights guidelines state that in member states' responses to crises, especially this pandemic, they must use their power for the benefit of the people and not to harm them. However, human rights law also recognizes that national emergencies may require limits to be placed on the exercise of certain human rights. Therefore, the scale and severity of COVID-19 reaches a level where the majority of restrictions imposed by countries are justified on public health grounds under human rights guidelines.

This background guide and the debate in your committee will be focusing on the right to education and the freedom of movement during this pandemic, and potentially after its effects have reduced.

Education is a fundamental right enshrined in Article 26 of the Universal Declaration of Human Rights (UDHR) and Articles 13 and 14 of the International Covenant on Economic, Social and Cultural Rights (ICESCR), two of the core United Nations human rights treaties. As a result of the pandemic and the need to practice 'social distancing', 186 countries have closed down all schools and universities. According to UNESCO, over 1.2 billion students are affected by nationwide and localised school closures, representing around 73% of the total of enrolled students worldwide. Unfortunately, as schools shut down and classes move online, social and economic inequalities are exacerbated. While the transition to online education has been rather smooth in developed countries, which largely benefit from the necessary infrastructure and technology to ensure academic continuity, this is far from true in developing countries with education systems that are lagging behind.

Freedom of movement is also a right enshrined clearly in the Universal Declaration of Human Rights. Article 13 of the declaration states:

“1. Everyone has the right to freedom of movement and residence within the borders of each state.

2. Everyone has the right to leave any country, including his (or her, their, xer, faer, etc) own, and to return to his country.”

However, these rights are often not respected, even outside a pandemic - for example in refugee camps or in laws to ban specific demographics from certain member nations. These violations are, nevertheless, often refuted, and member nations, especially states which have more power internationally and may be in violation of the idea of freedom of movement themselves, tend to be highly reluctant to acknowledge claims that Article 13 has been breached.



During the pandemic, freedom of movement has been highly reduced. Regarding the first clause, national lockdowns have been enforced in many member states, the amount citizens are permitted to travel, and the times at which this occurs have been heavily controlled. Some states imposed curfews on their citizens, as well as limiting the distance they were allowed to travel from their homes. Many states also halted public transportation services, greatly reducing the ease of movement and the ability of people to travel.

With note to the second clause, some member states ban citizens from other countries from entering their state due to the high risk of COVID infection posed by people from other member states in contrast to their own. More, perhaps in a way that better avoids breaching the article precisely, has imposed strict quarantine legislation for those traveling between countries, which may involve staying entirely isolated for several days or weeks.

## History of the Topic

Human rights are rights inherent to all human beings, regardless of race, sex, nationality, ethnicity, language, religion, or any other status. Human rights include the right to life and liberty, freedom from slavery and torture, freedom of opinion and expression, the right to work and education, and many more. Everyone is entitled to these rights, without discrimination.

Human rights issues are tackled through international human rights law, which lays down the obligations of Governments to act in certain ways or to refrain from certain acts, in order to promote and protect human rights and fundamental freedoms of individuals or groups. The foundations of this body of law are the Charter of the United Nations and the Universal Declaration of Human Rights, adopted by the General Assembly in 1945 and 1948, respectively. Since then, the United Nations has gradually expanded human rights law to encompass specific standards for women, children, persons with disabilities, minorities and other vulnerable groups, who now possess rights that protect them from discrimination that had long been common in many societies.

The International Covenant on Civil and Political Rights and its First Optional Protocol entered into force in 1976. The Second Optional Protocol was adopted in 1989. The Covenant deals with such rights as freedom of movement; equality before the law; the right to a fair trial and presumption of innocence; freedom of thought, conscience and religion; freedom of opinion and expression; peaceful assembly; freedom of association; participation in public affairs and elections; and protection of minority rights. It prohibits arbitrary deprivation of life; torture, cruel or degrading treatment or punishment; slavery and forced la



bour; arbitrary arrest or detention; arbitrary interference with privacy; war propaganda; discrimination; and advocacy of racial or religious hatred.

### A 3-point UN response to Covid

1. A large-scale, coordinated and comprehensive health response, guided by the World Health Organization (WHO) and its Strategic Preparedness and Response Plan, which aims to mobilize all sectors and communities in the response, control and suppression of the transmission of the virus, reduce mortality by providing care for those affected, and develop safe and effective vaccines and therapeutics that can be delivered at scale and that are accessible based on need. A world where COVID-19 is no longer a threat to humanity requires the most massive public health effort in history, that recognizes universal access to health as a critical global public good. Part of this response is a new global collaboration – the Access to COVID-19 Tools (ACT) Accelerator– the aim of which is to accelerate development, production, and equitable access to COVID-19 tests, treatments, and vaccines. The UN has also provided international coordination and operational support at the global, regional and country level, and supported the scaling up of country preparedness and response operations.
2. A wide-ranging effort to safeguard lives and livelihoods by addressing the devastating near-term socio-economic, humanitarian and human rights aspects of the crisis with attention to those hit hardest. The focus is on saving lives, keeping vital services accessible, households afloat, businesses solvent, supply chains functioning, institutions strong, public services delivering and human rights at the forefront. This is achieved through immediate humanitarian support to the hardest-hit population in the most vulnerable 63 countries with life-saving assistance through a Global Humanitarian Response Plan (GHRP), as well as support to more than 120 countries for an immediate socio-economic response guided by the UN development system framework. At global level, it includes the policy agenda contained in the series of policy briefs, as well as strong advocacy for support to developing countries, including a debt standstill, debt restructuring and greater support through the international financial institutions. Preventing and responding to the increased levels of violence against women and girls is also a critical feature.
3. A transformative recovery process that leads to a better post-COVID-19 world by addressing underlying fragilities and identifying opportunities for transformative change towards more just, equal and resilient societies and economies. Emerging from this crisis is an opportunity to address the climate crisis, inequalities, exclusion, gaps in social protection systems and the many other injustices that have been exposed and exacer-



bated. Instead of going back to unsustainable systems and approaches, we need to transition to renewable energy, sustainable food systems, gender equality, stronger social safety nets, universal health coverage and an international system that can deliver consistently, effectively and universally – with the Sustainable Development Agenda as our guide.

Misinformation and disinformation have complicated the health response. ‘Verified’ is a UN initiative to combat COVID-19 misinformation by increasing the volume and reach of trusted, accurate information.

The policy brief on Education during COVID-19 and beyond was issued on 4 August. It conveys the need to support educators, learners and communities in the near term while investing in more equitable and inclusive education and training systems for the longer term. It offers four sets of recommendations. First, governments need to focus on suppressing virus transmission and look to reopen schools safely, listening to the voices of key stakeholders and coordinating with relevant actors. Second, governments need to protect the education budget in national budgets, in international development assistance and through greater cooperation on debt. Third, governments should build resilient education systems with equitable and sustainable development. Fourth, changes in learning and teaching should be further accelerated by continuing efforts to ensure that education systems are more flexible, equitable, and inclusive – especially bridging the severe digital divide.

The United Nations’s policy on freedom of movement has become significantly more fluid over the COVID-19 pandemic. The UN has officially acknowledged the necessity of restricting this freedom laid out in Article 13 of the Declaration of Human Rights, noting that member states may need to specifically waive this right in order to reduce the risk of the transmission of COVID-19.

In a document published in the April of this year, the UN states:

“In view of the exceptional situation and to preserve life, countries have no choice but to adopt extraordinary measures. Extensive lockdowns, adopted to slow transmission of the virus, restrict by necessity freedom of movement and, in the process, freedom to enjoy many other human rights. Such measures can inadvertently affect people’s livelihoods and security, their access to health care (not only for COVID-19), to food, water and sanitation, work, education – as well as to leisure. Measures need to be taken to mitigate any such unintended consequences.”

As the UN points out, restricting the right of freedom of movement significantly limits other vital human rights, and this has been marked as a key issue. The United Nations mentions



that the problem of other human rights being diminished due to reduced freedom of movement as a result of the COVID-19 pandemic is one that needs to be addressed in order to prevent, or at least significantly reduce, the negative effects of breaching Article 13.

## Bloc positions

### United States of America

The first report of a COVID-19 case in the U.S. came on January 20, in a man who returned on January 15 from visiting family in Wuhan, China, to his home in Snohomish County, Washington.

On January 29, President Trump established the White House Coronavirus Task Force, led by Secretary Azar, to coordinate and oversee efforts to "monitor, prevent, contain, and mitigate the spread" of COVID-19 in the United States. On February 26, Trump appointed Vice President Mike Pence to take charge of the nation's response to the virus.

On March 13, President Trump declared a national emergency. The Trump administration largely waited until mid-March to start purchasing large quantities of medical equipment.

On 9 August, the US passed the five million mark in cases of covid-19, representing slightly more than a quarter of all global cases.

Situation has been mostly handled by the states' administration, rather than through a centralised national response. State and local responses to the outbreak have included prohibitions and cancellation of large-scale gatherings (including festivals and sporting events), stay-at-home orders, and the closure of schools<sup>3</sup>.

### New Zealand

New Zealand, a modern small island nation, has become an emblematic champion of proper prevention and response to the coronavirus 2019 (COVID-19) pandemic. The first case of the disease in New Zealand was reported on 28 February 2020.

The Ministry of Health set up the National Health Coordination Centre (NHCC) on 28 January. On 30 January, an "Infectious and Notifiable Diseases" came into effect, which required health practitioners to report any suspected cases under the Health Act 1956.

In total, New Zealand has reported 2,008 cases and 25 deaths.

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<sup>3</sup> Altman, Drew. "Understanding the US Failure on Coronavirus-an Essay by Drew Altman." The BMJ, British Medical Journal Publishing Group, 14 Sept. 2020, [www.bmj.com/content/370/bmj.m3417](http://www.bmj.com/content/370/bmj.m3417).



A countrywide lockdown was implemented on March 26.

There are takeaways from the early and immediate successes of the New Zealand response<sup>5</sup>. The authors credited the combination of immediate risk assessment driven by science, with the decisive actions of the government. Additionally, the country's border-control strategies, as well as both community-based and individual case-based control measures, were overall effective in eliminating the virus' presence when mitigation was no longer feasible.

## Australia

Under the leadership of Tony Abbott, many Australians were confused by guidelines and regulations, and a somewhat large online movement was created, ridiculing the government's stance and inactivity on COVID-19. Australia suffered particularly due to other instabilities such as the vast wildfires.

Doing their largest amount of damage between July 2019 and March 2020, these fires killed huge scores of wildlife and Australian bush, as well as causing over 400 human lives and destroying nearly 10,000 buildings<sup>6</sup>. Dealing with these two huge crises at the same time proved a significant challenge.

Australia began to see its first cases of the COVID-19 virus in mid-March of 2020. A large COVID spike was seen in late March, however - despite significant criticism of the government and Tony Abbott in particular, the virus' infection rate had greatly reduced by late April, having gone from 485 new cases on the 28th March 2020 to just 4 on the 22nd April.

However, as fears of the virus reduced and policy relaxed, Australia saw another spike beginning to rise in late June and later being reduced and flattening out in early September. This second wave of COVID-19, which peaked in the last few days of July and the beginning of August, was significantly higher than the first. Overall, as of 18th November 2020, Australia has seen 27,784 cases of COVID-19 and 907 deaths due to the virus<sup>7</sup>.

## United Kingdom

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<sup>5</sup>"How Did New Zealand Control COVID-19?" Contagion Live, [www.contagionlive.com/view/how-did-new-zealand-control-covid19](http://www.contagionlive.com/view/how-did-new-zealand-control-covid19).

<sup>6</sup> Givetash, Linda. "Australian Wildfires Declared among the 'Worst Wildlife Disasters in Modern History'." NBCNews.com, NBCUniversal News Group, 28 July 2020, [www.nbcnews.com/news/world/australian-wildfires-declared-among-worst-wildlife-disasters-modern-history-n1235071](http://www.nbcnews.com/news/world/australian-wildfires-declared-among-worst-wildlife-disasters-modern-history-n1235071).

<sup>7</sup> Australian Government Department of Health. "Coronavirus (COVID-19) Current Situation and Case Numbers." Australian Government Department of Health, Australian Government Department of Health, 22 Nov. 2020,



The virus reached the country in late January 2020. As of 2 November 2020, there have been 1,256,725 confirmed cases and 50,365 deaths, the world's eighth-highest death rate per hundred thousand population.

Because of devolution, following the arrival of coronavirus disease 2019 on 31 January 2020, the different home nations' administrative responses to the pandemic have been different to one another; the Scottish Government, the Welsh Government, and the Northern Ireland Executive have produced different policies to those that apply in England.

The Department of Health and Social Care (DHSC) for England launched a public health information campaign to help slow the virus's spread, and began posting daily updates in early February.

In February, the Health Secretary introduced the Health Protection (Coronavirus) Regulations 2020 for England, and hospitals set up drive-through screening.

In March, the UK government imposed a stay-at-home order, dubbed "Stay Home, Protect the NHS, Save Lives", banning all non-essential travel and contact with people outside one's home (including family and partners), and shutting almost all schools, business, venues, facilities, amenities and places of worship. Those with symptoms, and their households, were told to self-isolate, while those with certain illnesses were told to shield themselves<sup>8</sup>.

Cases rose significantly from late August onwards. The government responded with a "tiered" regional lockdown in England, and the devolved governments introduced similar restrictions.

On 31 October, Prime Minister Boris Johnson announced that England would enter a four-week national lockdown on 5 November, when pubs, restaurants, leisure centres and non-essential shops would close. Unlike in March, schools, colleges and universities would remain open.

The COVID Symptom Study app is an independent initiative led by Professor Tim Spector of King's College, London and endorsed by the Scottish, Irish and Northern Ireland governments but not the UK government. It was released on the App Store and Google Play on 24 March, and as of 18 September had 4,214,516 contributors who had downloaded the app. It shows the estimated current active infections by local council areas updated daily.

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<sup>8</sup> "COVID-19 Situation Update for the EU/EEA and the UK, as of 23 November 2020." European Centre for Disease Prevention and Control, 23 Nov. 2020, [www.ecdc.europa.eu/en/cases-2019-ncov-eueea](http://www.ecdc.europa.eu/en/cases-2019-ncov-eueea).



## China

COVID-19's first case was in China, and reports say it can be traced back to the 17th November 2019. Many of the Chinese reports on the deadly virus were unpublicised, with the country not giving the rest of the world an entirely complete account of the situation. While most of the reports have now been shared with the rest of the world, many governments and citizens around the world have criticised China about not letting the global community know about COVID-19 as soon as possible to allow for them to make preparations and reduce the death toll.

China has widely refuted or ignored these criticisms of their handling of the virus. The first large global reports of COVID-19 centred around the outbreak in the capital city of the Hubei province, Wuhan. The government implemented a rapid and strict lockdown in the area, which was effective in reducing the death toll of the virus within the city<sup>9</sup>. Despite the horrific effects of COVID-19 after it had travelled outside China, the country's efforts to contain it were relatively successful. By October 4th 2020, in the country of 1.4 billion people, 90,604 cases of the virus have been registered, and 4739 deaths as a result of it.

## Russia

On the 17th March 2020, Russia reported 21 cases of COVID-19. All days thereafter have had a higher number of new cases, and since the 7th April 2020, no day has seen a reporting of any less than one thousand cases of the virus. Initially, the government's policy was that they had everything under control. Their closing of the Russian-Chinese border on January 30th 2020 seemingly proved the fast and effective steps the nation was taking to reduce the effects of the virus.

With the statistics, it also appeared the government was minimising the projected effects of COVID-19. A country not known for transparency, many reports demonstrated that the method used in Russia to assign a cause of death has potentially meant that as many as half of COVID deaths in the state go unreported, being assigned an invalid cause of death. Therefore death counts in Russia according to reported statistics must be treated with caution.

The policy produced by the Kremlin has been called confusing by journalists, however Vla

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<sup>9</sup> Burki, Talha. "China's successful control of COVID-19" The Lancet. The Lancet. 08 October 2020.  
[https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(20\)30800-8/fulltext](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(20)30800-8/fulltext)

<sup>10</sup> Berdy, Michele. "How Russia's coronavirus crisis got so bad." Politico, Politico, 24 May 2020.  
<https://www.politico.eu/article/how-russias-coronavirus-crisis-got-so-bad-vladimir-putin-covid19/>



dimir Putin may have other concerns; the virus has all but stopped his grand plans for constitutional reform in 2020<sup>10</sup>. Votes to set his years as the country's leader back to zero, allowing him to stay in his position until 2036, have had to be cancelled due to COVID-19 and the risk of infection.

As of the 25th November 2020, Russia has 2.19 million (2,190,000) cases of COVID-19 and has reported a death toll of 38,062 due to the virus.

### South Africa

Despite even the most positive and optimistic models predicting South Africa being quickly overwhelmed by COVID-19, and their hospitals being insufficient to deal with such a horrific virus, the country has seen a surprisingly low rate of COVID-19 infection. As of the 25th of November 2020, South Africa has reported a total of 776 thousand (776,000) cases of the virus, with 21,201 deaths.

The first cases of COVID-19 in South Africa were documented on the 18th March 2020, however the rise in cases in the UN member state was significantly slower and far less steep than in many other countries tackling the virus. However, the number of cases reported began to climb quickly in June, and the state reached its peak during the month of July 2020. COVID-19 cases in South Africa began to rapidly decline in August of 2020, and have mostly flattened out for the last few months as of November.

Scientists and many specialists have shown confusion at how South Africa, and African countries in general, have survived unexpectedly well throughout the COVID-19 pandemic. Initial projections showed significant suffering, and while the virus has certainly affected thousands in South Africa and its neighbours, its effects have been significantly less awful than predicted. Theories on why this has occurred have touched on Africa's younger population, climate and altitude have all been suggested though have little support. Professor Salim Karim, a highly regarded academic on the topic of pandemics in Africa, admits "most African countries don't have a peak. I don't understand why. I'm completely at sea." (<https://www.bbc.co.uk/news/world-africa-53998374>) However, leading academics are still concerned. Many warn of the risk of a large-scale outbreak happening in Africa many months after the rest of the world experienced one.

### World Health Organization

The World Health Organization (WHO) is a specialized agency of the United Nations responsible for international public health. The WHO Constitution, which establishes the agency's governing structure and principles, states its main objective as "the attainment by all peoples of the highest possible level of health."



Throughout the pandemic, WHO has been providing information to the public through its website, publications, social media, as well as press conferences. It has also been offering expertise to national governments in their response to the disease.

It has also been launching a Covid-response fund, where everyone can donate in order to raise resources which will be used to implement priority public health measures in support of countries to prepare and respond to coronavirus outbreaks, as well as to ensure continuation of essential health services<sup>11</sup>.

WHO has also published a strategic preparedness and response plan which outlines the public health measures that the international community stands ready to provide to support all countries to prepare for and respond to COVID-19. The document takes what we have learned so far about the virus and translates that knowledge into strategic action that can guide the efforts of all national and international partners when developing context-specific national and regional operational plans.

## **European Union**

The European Commission is coordinating a common European response to the coronavirus outbreak.

The EU funded member states to organise repatriation flights.

The European Commission proposed to activate the EU's Emergency Support Instrument on 2 April to directly support the Member States' healthcare systems in their fight against the pandemic<sup>12</sup>.

EU Civil Protection Mechanism: Assistance made available via the Union Mechanism can consist of operational assets, relief items (in-kind assistance) and experts. The latter can be deployed for needs assessment and coordination missions as well as to provide advice to a requesting country on prevention and preparedness measures.

In the Joint Communication, the Commission and the EU High Representative analysed the immediate response and proposed concrete actions that can be quickly set in motion to fight disinformation around the coronavirus pandemic.

The Commission approved a fourth contract with pharmaceutical companies BioNTech

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<sup>11</sup> "Strategy and Planning." World Health Organization, World Health Organization, [www.who.int/emergencies/diseases/novel-coronavirus-2019/strategies-and-plans](http://www.who.int/emergencies/diseases/novel-coronavirus-2019/strategies-and-plans).

<sup>12</sup> "Timeline of EU Action." European Commission - European Commission, 23 Nov. 2020, [ec.europa.eu/info/live-work-travel-eu/coronavirus-response/timeline-eu-action\\_en](http://ec.europa.eu/info/live-work-travel-eu/coronavirus-response/timeline-eu-action_en).



and Pfizer, which provides for the initial purchase of 200 million doses on behalf of all EU Member States, plus an option to request up to a further 100 million doses, to be supplied once a vaccine has proven to be safe and effective against COVID-19.

### European Centre for Disease Prevention and Control

It is an independent organ of the European Union, whose mission is to strengthen Europe's defences against infectious diseases.

ECDC publishes numerous scientific and technical reports covering various issues related to the prevention and control of infectious diseases, especially the COVID-19 pandemic.

During the Covid pandemic, involved in the European Union response to the COVID-19 pandemic the ECDC published data related to Covid 19 such as the number of people affected in the European Union.

## Points a Resolution Should Address

No country can do this alone; with globalisation, one move by one country can impact another country very soon (see the way the virus travelled from China to all around the globe) so collaboration between the member states is needed to beat the virus and this human rights challenge. But until the virus leaves us, coordination is needed to protect human rights during the pandemic.

1. Have the already existing solutions by the UN and other institutions such as the EU been successful?
2. To what extent can we ensure the full protection of human rights, especially the right to freedom of movement and the right to education, until the virus is eradicated?
3. What is role of technology in the efforts of states and organisations to tackle the epidemic while catering for human rights?
4. Can a cost-benefit analysis (undermine our right to education and freedom of movement to protect our right to health) justify the infringement of fundamental rights? If so, is there a hierarchy of rights?



5. How can international law and more specifically international human rights law be involved in the effort to protect human rights during the pandemic?
6. Is comparing the different countries' responses a useful technique to assess the implications of the measures/restrictions in the area of human rights? What can we learn from our mistakes?
7. What is the role of Non-Governmental Organizations (NGOs)?
8. Many of the vaccine candidates have proven to be 90+% effective. It would be useful to discuss the controversial topic of compulsory vaccinations and its implications on human rights.



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