THE FIGHT AGAINST THE COVID-19 PANDEMIC:
GOOD PRACTICES, SUCCESS STORIES, LESSONS LEARNED, AND CHALLENGES IN THE CONTEXT OF HUMAN RIGHTS, INTERNATIONAL COOPERATION, AND SOLIDARITY

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ANALYZING THE THEMES OF DEMOCRATIC FREEDOMS, RACISM AND XENOPHOBIA, ACCESS TO VACCINES, AND DIGITAL CONNECTIVITY IN LIGHT OF THE COVID-19 PANDEMIC

Final Report

Project: THE FIGHT AGAINST THE COVID-19 PANDEMIC

Good practices, success stories, lessons learned, and challenges in the

context of human rights, international cooperation, and solidarity

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BJP: Bharatiya Janta Party

BLM: Black Lives Matter

CCTV: Closed-Circuit Television

CEPI: Coalition for Epidemic Preparedness Innovations

COVAX: COVID-19 Vaccines Global Access

CSO: Civil Society Organization

EU: European Union

FCC: Federal Communications Commission

GAVI: Gavi, the Vaccine Alliance

GNI: Gross National Income

GDP: Gross Domestic Product

HRC: Human Rights Council

HRC-GC: Human Rights Committee General Comment

HRW: Human Rights Watch

IACHR: Inter-American Commission on Human Rights

ICCPR: International Covenant on Civil and Political Rights

ICERD: International Convention on the Elimination of All Forms of Racial Discrimination

ITU: International Telecommunication Union

NGO: Non-Governmental Organization

NSL: National Security Law of Brazil

OHCHR: Office of the High Commissioner for Human Rights

RSF: Reporters Without Borders // Reporters Sans Frontières

TRIPS: Agreement on Trade-Related Aspects of Intellectual Property Rights

UAPA: Unlawful Activities Prevention Act of India

UDHR: Universal Declaration of Human Rights

UN: United Nations

WHO: World Health Organization

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III.   Abstract

The COVID-19 pandemic has drastically affected States, their populations, and their respective State apparatuses. In the initial days following the World Health Organization's (WHO) pandemic declaration, cooperation and solidarity were observed on a global and regional level. However, the prolonged pandemic has highlighted the accentuated inequalities that exist within the international system. In the context of the theme for the 2021 Human Rights Council Social Forum which focuses on international cooperation and solidarity, this report has focused on researching and articulating the efforts of States on a national, regional, and international level towards promoting social cohesion, human rights, and equality for all people in these extraordinary times. The four themes that will be addressed are democratic freedoms, racism and xenophobia, vaccine inequality and nationalism, and Internet and IT infrastructure. The report highlights certain country case studies in each of these themes that exemplify abidance with internationally recognized "good" practices as well as cases that are inviolate of Human Rights principles during this ongoing pandemic. COVID-19 regulations have observably been used for undemocratic purposes in some instances, the economic disparity between the global north and south has accentuated the divide in terms of vaccine accessibility, deteriorating social cohesion in certain parts of the world has led to a concerning rise in xenophobic and racist trends, and being confined to one's house has reinvigorated the conversation around equal access to the Internet and immovable democratic principles to guide its governance. The lessons articulated within this report are emblematic of the more extensive experiences around the world that will need to be configured in the Human Rights implementation mechanisms moving forward.

Keywords: Human Rights, COVID-19, Democratic Freedom, Vaccine, Racism, Xenophobia, Internet.

IV.   Executive Summary

This project focuses on 4 different dimensions of the impact COVID has had on human rights mechanisms and institutions in different countries:

- Democratic Freedoms
- Racism and Xenophobia
- Vaccine Access and Development
- Access to the Internet

Over the course of the ongoing pandemic, the sheer capacities of human cooperation and compassion have been highlighted in different parts of the world. However, a sad and parallel reality to this has also been the visible and traced decline of democratic practices and spaces in States across the international system. In academic discourse, publications by media and news outlets, reports and resolutions of the United Nations, and as visible through various videos and pictures circulated in social media, it is well noted that there has been a clear trade-off between democratic rights associated with assembly, expression, political elections and national policies implemented in the interest of public health safety and security (Engler et al., 2021). This trade-off allowed States to undertake extraordinary measures in response to the proliferation of the coronavirus. Moreover, these measures were permissible to be in abrogation of States' obligations under international law under very specific circumstances (United Nations, 1984). The existing and emerging literature which tackles the friction between COVID-19 regulations and the rights and freedoms associated with assembly, expression, and elections has looked at the various aspects of accountability, policing, ambiguous legal instruments, overarching executive control. States are expected to undertake policy/legislation that allows them broad executive control over their citizens and their human rights in the context of the crisis being faced. The policy needs to be proportional and run parallel to the depth of crisis (Bethke & Wolff, 2020). The Human Rights Watch special report has stated that 83 governments have abrogated their responsibility of maintaining and promoting free speech and the right to peaceful assembly in varying degrees. Out of the 83 countries, only 44 have declared some form of emergency.

It is well noted by the international community and in the academic literature that any form of national emergency, including the ongoing public health emergency being experienced around the globe, does not provide a pretext for blanketed executive action. These measures should

not violate fundamental Human Rights and must comply with international principles and obligations related to individual and collective rights associated with assembly, expression, and political participation (Voule, 2020b). Academics and experts have noted this pandemic to be "fertile" for governmental overreach but also ripe for strengthening democratic practices (Bethke & Wolff, 2020). Moreover, the engagement of governments with civil society organizations (CSOs) is key to analyzing in what form national governance has evolved in different parts of the world. In countries where governmental overreach in the name of public health security has extended, it is noted that civil spaces for political interaction and expression have shrunk, and CSOs operating in the interest of the spaces and freedom of assembly/expression has been repeatedly stifled (Bethke & Wolff, 2020).

COVID-19 has exposed the ugly racial stereotypes and inequalities embedded in our society, particularly exacerbating racial bias and xenophobia towards people of Asian and African descent. The virus's origin from China meant that people of East Asian ancestry– by virtue of their appearance– became easy targets for being discriminated against throughout the pandemic (Ho, 2020). Politicians and media worldwide have also been complicit or actively contributed to the rise in anti-Asian hate amid COVID-19 by employing anti-Chinese rhetoric, tapping into the xenophobic and ultra-nationalist sentiments in their own countries (Human Rights Watch, 2020).

The pandemic has also shed light on racism against people of African descent, whose plight in the context of the pandemic have exposed the underlying racial prejudice and inequalities. As exemplified by the killing of George Floyd by the police and the subsequent activism by Black Lives Matter (BLM) movements, COVID-19 saw a rise in police violence in tandem with tighter enforcement of lockdown restrictions, which were disproportionately directed at people of African descent. Furthermore, Black communities have been hit disproportionately harder by the pandemic compared to other ethnic groups, in both infections and deaths (Ibid., pp. 5-9). The Working Group concluded that COVID-19 exposed systematic racism in many countries that exacerbated existing inequalities in access to healthcare and treatment, leading to increased infection and mortality rates, as well as highlighting police violence and injustice. (Ibid., pp. 15-6).

The COVID-19 pandemic has revealed significant weaknesses within the global health system and overall international cooperation. One of the ongoing challenges of global health

governance related to the pandemic is the lack of fair access, distribution, and development of COVID-19 vaccines. Access to vaccines is of the utmost importance when combating infectious diseases (Oyston & Robinson, 2012). However, the international response to ensuring equitable access to COVID-19 vaccines has not been united. In fact, many countries have turned to vaccine nationalism, prioritizing domestic needs over global cooperation and vaccine equity (Lagman, 2021). Vaccine nationalism has been demonstrated through richer countries purchasing and hoarding supplies that are critical for vaccine development, as well as the vaccines themselves (Lagman, 2021). This approach utilized by many high-income countries is counterproductive to ending the pandemic. The Director-General of the World Health Organization (WHO) stated that vaccine nationalism "would also lead to a prolonged pandemic as only a small number of countries would get most of the supply" and that "vaccine nationalism only helps the virus" (Kretchmer, 2021). Despite these remarks, the reality is that countries with the highest incomes are getting vaccinated at a rate 25 times faster than countries with the lowest incomes, highlighting extreme inequality within the system (Randall, 2021). As of August 8, 2021, the United States has administered 351 million doses, enough to cover 54.8% of its population, while Senegal has administered 1.2 million doses, enough to cover 3.7% of its population (Randall et al., 2021). Unequal access and development of vaccines must be addressed to end the pandemic and to protect the health of all people globally.

Access to internet and broadband infrastructure have been integral aspects of life during the COVID-19 pandemic. One of the key takeaways of the COVID-19 pandemic is that access to reliable and high-speed internet (broadband) is vital for prospering in a world that is so dependent on digital technologies. Digital solutions in the sectors of health, education, commerce, and work have played a tremendous role in the fight against COVID-19. However, not everyone has had the luxury of equal access to the Internet. 49% of the world still does not have stable access to the internet (ITU, 2019). In least developed countries, only 1 in 5 individuals have access to the internet. Even in developed countries such as the United States, more than 6% (21 million people) of the population does not have a high-speed internet connection (Broom, 2020). The digital divide "reinforces social and economic divides, from literacy to healthcare, from urban to rural, from kindergarten to college" (Tackling the Inequality Pandemic, 2020, 5). The COVID-19 pandemic has exacerbated the digital divide even further on a global scale, and has exemplified the need to ensure that connectivity is provided as a global public good.

As a result of the COVID-19 pandemic, over 1.5 billion students and youth were affected by school and university closures (Global Education Coalition, 2021). "Half of the total number of learners- some 826 million students- kept out of the classroom by the COVID-19 pandemic, do not have access to a household computer and 43% (706 million) have no internet at home" (Startling Digital Divides, 2021). Article 26 of the Universal Declaration of Human Rights affirms that education is a basic human right (Universal Declaration of Human Rights), yet millions of students around the world did not have access to the resources or technologies needed to continue their studies during the pandemic. "Children and young people from the poorest households, rural and lower income states are falling even further behind their peers and are left with very little opportunity to ever catch up" (UNICEF, 2020).

The case studies highlighted in this study attempt to investigate these thematic issues on a national/domestic level and the authors provide a collective conclusion addressing the intersectionality of themes in different forms.

V.   Collective Introduction

Noting the drastic impact COVID-19 has had on life and liberty worldwide, it is essential to note the human rights implications of state practices, operations of transnational corporations (especially that of pharmaceutical companies), and the interconnected nature of political and economic systems. COVID-19 has highlighted the deplorable paucities in the existing systems on a national, regional and global level and how it is imperative that they adapt to contemporary challenges-many of which stem from the realities of this pandemic.

The project will be evaluating the universality of human rights with an awareness of the economic and other disparities between societies in the Global North and South. This singularity will be applied to compare case studies in four themes. The themes that the project has identified are:

- COVID-19 related restriction of democratic liberties and practices
- Racism and xenophobia in metropolitan societies
- Vaccine Access and Development
- Access to Internet and Broadband Infrastructure

For this project, we trace the existing literature in the context of COVID-19 and the above themes. This literature spans academic discourse, media publications, and official documentation released by various UN agencies and other International Organizations. In pursuance of generating a conducive and comprehensive final report, we will be conducting an extensive series of interviews with academics and practitioners to garner a holistic outlook on the trends within each variable, the cost of the trade-off between COVID- 19 regulations and these variables, and what should be considered as the acceptable standard vis-à-vis a State's practice as 'good' or 'detrimental.' Three critical factors will be central to our consideration and analysis, 1) representation of minority and indigenous voices, 2) the plight and benefits of governmental policies in an intersectional manner, and 3) the overarching impact of the pandemic on different socio-economic groups in the global north and south alike.

In this report, we establish the methodology adopted and implemented by the team while conducting its research, followed by a thematic division as mentioned above. All themes will be analyzed uniformly on the lines of 1) literature review, 2) case studies and 3) conclusion. The report will culminate with a collective conclusion, followed by a bibliography and an annex for any additional research material.

VI.   Research Questions and Objectives

Primary Research Objectives

Contribute to the conceptualization, organization, program, and practical impact of the 2021 HRC Social Forum, 11-12 October 2021. Project Title: "Identify good practices, success stories, lessons learned and challenges in the fight against the COVID-19 pandemic, with a special focus on international cooperation and solidarity, and from a human rights perspective."

- Analyze the good practices, success stories, lessons learned, and challenges through the human rights framework
- Identify the linkages between the good practices, success stories, lessons learned and challenges and international cooperation and solidarity
- Analyze the linkages between the challenges posed by COVID-19 and conflict, peace, development and global security and their interactions

Primary Research Question

- What factors favored or impeded good practices and success stories in fighting the COVID-19 pandemic in different countries?

Secondary research questions

- How do the good practices, lessons learned, and challenges identified relate to civil and political rights, economic, social, and cultural rights, and the right to development in different countries?
- How did the good practices, success stories, lessons learned, and challenges identified relate to international cooperation and solidarity?
- What concrete international cooperation and solidarity measures have been most successful in overcoming these challenges?

Analysis by theme

Democratic freedoms and COVID-19 related regulatory measures

- Analysis of the protection and application of the right to freedom of expression, right to peaceful assembly, electoral representation in various States, and the impact of COVID-19 related State regulation on them.

- Observing the measures undertaken or not undertaken to promote the rights to protest, assembly, and expression by States in their national COVID-19 response frameworks.

- Analyzing the impact of COVID-19 on the separation of powers in the national framework and the centralization of executive authority to address this pandemic.

Racism and xenophobia in metropolitan societies

- Analysis of the different manifestations of racism and xenophobia in metropolitan settings across several countries– particularly against people of Asian and African origin– and threats posed to their human rights.

- Examination of how national leaders and policymakers have responded to trends of racism and xenophobia within their jurisdictions through legislative acts or other measures.

- Evaluation of challenges in addressing racism pertaining to COVID-19 at national and international levels.

Vaccine Development and Distribution:

- The impact of vaccine accessibility on people's economic, social and cultural rights and relationship to the Right to Development framework
  - How access or lack of access to vaccines impacts human rights

- Evaluation of access to vaccines by economic capability and manufacturing/infrastructure capacity

- Analysis of means of access to vaccines by different States:
  - Bilateral agreements, participation in vaccine trials, COVAX, amongst others

- Examination of vaccine patents leading to poor international cooperation and potential benefits and drawbacks of a TRIPS waiver
  - Analyzing current TRIPS flexibilities and potential additional benefits of a waiver

Access to Internet and Broadband Infrastructure

- Analysis of access to the internet and broadband infrastructure in the COVID-19 context, including case studies on the United States, India, and Ethiopia

- Evaluation of internet access in relation to enjoyment of human rights including the right to development.

- Observations on the lessons and challenges from COVID-19 on the internet and broadband infrastructure, and international cooperation and solidarity efforts.

VII. Methodology and Research Design

The project is framed fundamentally in the interest of documenting, comparing, and analyzing good practices in the international system on the basis of legal obligations and failures of certain States to meet them. The research design of this project is divided into three parts, with each part serving a focused and distinct role which will ultimately culminate in in-depth case studies within the themes mentioned earlier in this report.

First, the project focuses on identifying the obligations of States in relation to trading off certain democratic freedoms in the interest of public health security. Furthermore, we will explore the deliverables such as access to scientifically effective vaccines and access to Information and Technology (IT) infrastructure that will be necessary to offset the trade-off and embolden democratic freedoms. For the purposes of this project, democratic freedoms will focus on freedom of assembly, freedom of expression, and elections. The xenophobia and racism witnessed during the last year, including the societal discrimination directed towards the Asian community in different parts of the world and Islamophobia witnessed in India, factor in profoundly with the democratic freedoms' theme. These freedoms were oft challenged during the protests conducted by these groups against this discrimination and shed light upon the xenophobia engulfing their lives.

We have chosen these case studies keeping in mind to select countries from different parts of the world and different socio-economic backgrounds. Our methods of analysis is to:

1) Identify and document violations of human rights of individuals within these case studies in various circumstances through secondary and desk research.

2) Conduct interviews (while confirming whether wish to remain anonymous) with UN OHCHR officers, CSO and NGO workers on the ground, and other practitioners in the relevant field for the purpose of getting primary research and personal insight on the data identified during the secondary research.

3) Conclude by providing a holistic brief of various circumstances of human rights violation, the degrees and gravity of these violations, and the good practices that have emerged or been implemented in different

forms by governmental or non-governmental actors within the case studies.

The first part of the project focuses on the existing literature, reports, and resolutions that address the themes mentioned in section IV of this document: democratic freedoms, xenophobia, vaccines, and IT infrastructure. We aim to explore and document different perceptions, cases, reports, and investigations from around the world. This exploration will enable us to create a strong, dynamic, and cohesive knowledge structure to highlight the existing realities in different States and which cases have been in accordance with international obligations, have contributed to the growth of democratic culture and strengthened Human Rights' institutions and implementation. As the literature review within each theme briefly touches upon the harrowing circumstances related to authoritarianism, racism, xenophobia, vaccine nationalism, and lack of cyber expression that have erupted in the global north and south, the knowledge structure presents in-depth studies on the realities associated with COVID-19 and a particular theme. Furthermore, represent any linkages that might exist between any theme in common case studies (such as the case of India – Islamophobia, democratic freedoms, and the Internet).

Moving on to the second part, we have investigated the research questions posed through primary research by interviewing a diverse and versatile set of interviewees. Their professional capacities in different organizations will serve as the principal source of insights into the application of Human Rights law, advocacy, obligations undertaken by UN Member States, and how COVID-19 has impacted the Human Rights system, notably the realization of rights. The project has interviewed professionals and officers from the Office of the High Commissioner for Human Rights (OHCHR), Office of the Special Rapporteur on Racism, Office of the Special Rapporteur on Freedom of Assembly, International Telecommunication Union, UN Working Group of Experts on African Descent, UN bank of technology and academics from select universities. These questions for interviews have dichotomized aspects, 1) we have pursued a deeper understanding of how democracies have evolved or declined due to the pandemic and their observations/findings (related to democratic freedoms, vaccine and IT accessibility, and experiences with racism, xenophobia, and Islamophobia) - to which we will compare our findings from the first part. 2) What is their professional opinion on the four themes we have identified and correlated to the case studies we have focused on for our final report. We have drawn up our final line of questioning in the coming days and are actively

structuring it around the research questions mentioned earlier. The full list of questions prepared for interviews will be available in the interim report on findings.

In the final part of our research, we have taken our learnings and are compartmentalizing them in specific case studies within each of the four themes. For clarity, case studies for this project will mean national legislative/executive responses to the COVID-19 pandemic, the application of these responses, and verified cases of disruption, discrimination, violations, and protection of the rights of people in these States. The project has consolidated media reports, the latest academic literature, national reports, other stakeholder reports (NGOs, CSOs), and literature issued by OHCHR pertaining to democratic freedoms, vaccines, xenophobia and racism, and IT infrastructure. The final part will comprise the culmination of the data collection and analysis from all the earlier parts. Each of the four themes will have its own set of case studies to provide an expansive, dynamic research outlook, and the combined conclusion will tie all the studies together.

The case studies within each theme are:
- **Democratic Freedoms:** India and Uganda
- **Racism and Xenophobia:** China, United States, Brazil
- **Vaccine Development:** United States, India, Senegal
- **Access to IT:** United States, India, Ethiopia

VIII. Theme 1: Democratic Freedoms, COVID19, and Human Rights

A.   Background and Existing Discussions

For the purposes of this project, the authors have focused on various critical international instruments to draw up the universal standard of obligations of all member States, including the Universal Declaration of Human Rights (UDHR), the International Covenant on Civil and Political Rights (ICCPR), and the Siracusa Principles, the Human Rights Committee General Comments and documents from the OHCHR and special procedures mandate holders. It will also draw upon the findings, recommendations, and resolutions of various Human Rights Council published documents, including A/HRC/45/44 – COVID-19, Systemic Racism, and Global Protests by the Working Group of Experts on People of African Descent, A/HRC/RES/44/20 – The Promotion and Protection of Human Rights in the Context of Peaceful Protests, and A/HRC/RES/46/4 – Human Rights, Democracy and the Rule of Law.

For the purposes of this theme, the ICCPR's role in clearly laying out the agreed-upon principles about democratic freedoms of expression, opinion, information and assembly are critically important.

Article 6 is in the interest of protecting Human Rights defenders, journalists, and political opposition. Article 7 prohibits the cruel, inhuman, and degrading treatment for exercising the Freedom of opinion and expression. Article 19(1) establishes the Freedom of opinion. Article 19(2) establishes the Freedom of Expression. Article 19(3) delineate the terms of limitations to these freedoms and circumstances where States can restrict them. This is only applicable in an identifiable instance about national security, public order, and public health and morals. Articles 21 and 22, which address the right to assembly and association, collectively with Article 19, promote political participation. Article 25 is regarding unjust political campaigning regulations (Taylor 2020).

Regarding Article 19(3), the Human Rights Committee General Comment (HRC-GC) 34, paragraph 26, clearly states that laws restricting those laws mentioned in Article 19 need to be compliant with general provisions, aims, and objectives of the Covenant (Office of the High Commissioner for Human Rights 2011). These laws must not be discriminatory and must be inviolate of the discriminatory provisions of the Covenant. Furthermore, party States must be

in compliance with the Siracusa Principles while imposing restrictions on the democratic freedoms mentioned above.

Adherence to the principle of proportionality is essential while imposing restrictive measures. HRC-GC 27, in paragraph 14, delineates that restrictive measures must conform to the principle of proportionality (Office of the High Commissioner for Human Rights 1999). They must be driven by an identifiable purpose and must have an appropriate, protective function. They must be the least intrusive measure by nature and must be critically conscious of the freedoms they will be restricting while attempting to achieve their desired results.

The UN Guidance Note on the Protection and Promotion of Civic Space, published in September 2020, highlights State responsibilities of Member States in the interest of protecting civil liberties and democratic freedoms during this pandemic. The note mentions that civic spaces are essential for maintaining democratic structures within States, and the trend of these spaces shrinking due to State overreach is particularly concerning. Civic spaces rely on formal and informal channels, which are constituted by individuals and groups that contribute to effective policymaking. The peaceful exercise of civil liberties and democratic freedoms is critical for ensuring different communities and cohorts can voice their concerns, and the government is made aware of the public reception to its policies and laws (United Nations 2020).

The note also highlights the early warning signs the international community can observe to trace the increasing autocratic behaviour of certain governments. These signs include limiting the participation of opposition groups and silencing dissent (United Nations 2020). Governments can pursue this by means of unwarranted detention or killing activists, women, Human Rights defenders, journalists, and indigenous groups. Furthermore, the labelling of dissenters as 'terrorists' and 'enemies' can constitute harassment by employing vague counter-terrorism and national security legislation.

Sarah Engler and her co-authors empirically trace the rise and fall of strength in democratic institutions across Europe while documenting the national responses by each European State to the pandemic (Engler et al., 2021). Noting the requirements as per UN conventions on declaring national emergencies, the authors found that States that had strong democratic institutions with distinct separation of power like in Norway and Finland did not pursue overarching executive authority in light of post-pandemic judicial and political accountability.

On the other hand, countries like Hungary witnessed the monopolization of State-political power in the name of the pandemic while not tending to the concerns visibly present regarding the State's public health (Ben-ghiat, 2020). The declaration of the national emergency by the Hungarian government failed to fulfill its international requirements of presenting a sunset clause associated with its national emergency in response to a national public health crisis. As the UN Special Rapporteur on rights to freedom of peaceful assembly and peaceful association, Clement Voule notes, the sunset clause is deemed necessary to ensure a temporal threshold within which the executive of a State can centralize all State action (Voule, 2020b).

Similarly, disturbing trends of demagoguery and arbitrary (but differentiated and distinct) application of COVID-19 related regulations have been seen in India, the Philippines, Uganda, El Salvador, Brazil, and Belarus (Fukuyama, 2020). While principally were in the interest of maintaining public health standards in some of these States, these measures were not considerate of minorities, political assemblies. They were often used to push forward political agendas which ran in contradiction to the very premise of these measures in the first place.

In regards to political elections, as of August 2020, 22 countries had held national elections. And concerning trends regarding the management, conduct, and in some cases, unconstitutional postponement of these elections have exacerbated the noted decline in democratic behavior by States across the international system (Repucci & Slipowitz, 2020). As seen in the case of Sri Lanka, elections were used as pivot points by the executive power holders in the State to undertake constitutionally unprecedented steps that have opened up immense spaces for abuse of power and violation of inalienable rights of people. In the case of India, regional elections served as a stark mirror to reflect on the underlying political goals of the governing powers where elections and campaigning in these extraordinary times were allowed to run unfettered. However, parallelly political assemblies in the interest of expression and dissent, such as the Farmer's protests, were broken up with the reasoning of COVID-19 regulations. Nevertheless, at the same time, there are brilliant examples of 'good practices' for the international community to observe and learn. New Zealand and South Korea also held massive and competent elections that maintained the democratic integrity of their respective States but also were cognizant of COVID-19 and required safety regulations (Repucci & Slipowitz, 2020).

It is well noted by the international community and in the academic literature that any form of national emergency, including the ongoing public health emergency being experienced around the globe, does not provide a pretext for blanketed executive action. These measures should not violate fundamental Human Rights and must comply with international principles and obligations related to individual and collective rights associated with assembly, expression, and political participation (Voule, 2020b). Academics and experts have noted this pandemic to be "fertile" for governmental overreach but also ripe for strengthening democratic practices (Bethke & Wolff, 2020). Moreover, the engagement of governments with civil society organizations (CSOs) is key to analyzing in what form national governance has evolved in different parts of the world. In countries where governmental overreach in the name of public health security has extended, it is noted that civil spaces for political interaction and expression have shrunk, and CSOs operating in the interest of the spaces and freedom of assembly/expression has been repeatedly stifled (Bethke & Wolff, 2020).

Another critical aspect of analyzing this issue is through the gender lens. As Special Rapporteur Voule's 2020 report on freedom of peaceful assembly and association focused on women in activism and civil society, the role of women and members of the LGBTQ community has been significant during this pandemic period (Voule, 2020a). CSOs and women activists groups have been at the forefront of various movements, protests, and political activism and campaigning worldwide. The Shaheenbag Protests in New Delhi, India, The Women's Revolution in Sudan, and the Black Lives Matter protests in the United States of America are examples of such activism. However, the report also notes that the pandemic has heightened the inequalities and discriminations faced by these communities while aiming to constrain and limit civic spaces in the interest of social distancing and other COVID-19 regulations.

To channel the broad scope of literature present and being generated actively, the authors are using three questions as their guiding pillars while analysing this theme, *1) In the case study of any country, is the COVID-19 response policy/legislation proportional to the magnitude and depth of the crisis? 2) Is there a sunset law in effect in any form? 3) Is the response to COVID-19 feeding into autocratic behaviour?*

B.   Case Studies

The rationale behind choosing these case studies within this theme is to located human rights violations and transgressions upon democratic freedoms during an national election cycle and

the ongoing pandemic. For the purposes of this theme, the report will be focusing on the following countries:

1. India

India has not declared a national or public health emergency to tackle the COVID19. Therefore, there is no emergency powers or sunset laws being exercised. The Supreme Court of India called upon the government to declare one and draw up a plan in light of the burgeoning second wave in April, 2021 (Anand 2021). India ratified the ICCPR in 1979.

It is noted in the Siracusa principles that specific suspension of democratic rights might be necessary for instances of public health emergencies (United Nations 1984). Furthermore, a 'democratic price' or a 'trade off' may be deemed necessary during times of crisis (Engler et al. 2021). However, a State with strong democratic foundations will allow for accountability and transparency to be central to its policymaking processes during and after the crisis. India was well aware of its inequities and weak health infrastructure in different parts of the country. At different stages of the pandemic, the government had the opportunity to exhibit prudent policymaking while adhering to India's democratic liberal tenets, but on various occasions imposed shock-inducing policies such as the overnight lockdown and legislation that prevented NGOs from aiding hospitals and people during the oxygen shortage crisis. This was also coupled with 'draconian policing measures that actively transgressed upon the freedom of expression, association, and assembly on protestors and internal migrants during different instances in this ongoing pandemic (Prakash 2021). The diaspora in India that has seen increasing socio-economic disparities and discrimination were further shunned in light of COVID19 sweeping across the country. Regulatory measures such as 'social distancing', 'red banner COVID infection notices' outside of households with COVID positive patients, and lack of adequate public delivery services during various stages of its national lockdowns in different parts of the country in some manner contributed to social alienation, violation of rights, and class-based discrimination to be exaggerated in Indian society. The pandemic induced regulations adopted their societal values in different parts of the country that often rhymed with caste and 'untouchability' and led to erosion of social cohesion. Social incoherencies in villages, along with rumours and half-baked facts, caused generational societal underpinnings to be detrimentally affected (Sumesh and Gogoi 2021).

In the case of the Shaheen Bagh protests, the Delhi Government stated that any gathering, including political of more than 50, will not be allowed with a temporal threshold at the time (Press Trust of India 2020). It was considered necessary in the interest of public health, and this measure was generally in accordance with principles and standards in international instruments. Nevertheless, the question of the following protests associated with Farmer Laws in India are not comparable or connected with the Shaheen Bagh protests. They were distinct in purpose, manner and even temporally. Furthermore, the nature of the call for the ceasure of the farmer protests rhymed with the reasoning behind the same for the Shaheen Bagh protests. However, it was without any comprehensive national guidelines for political gatherings.

Having dispersed the Shaheen Bagh protests, the Delhi police then arrested various protesters on various grounds under the Indian Penal Code. After these arrests, various national regulations and human rights were not adhered to by the State. In light of the Delhi Riots and the protests against the controversial Citizenship Amendment Act, various Delhi protesters had taken to the street. COVID19 related realities have shown how these protestors have been at heightened risk of infections while being placed in cramped jails (Braunschweiger 2021). This also includes the case of Safoora Zagar, who was in the second trimester of her pregnancy when she was jailed and denied bail (Editor's Desk 2020). Also, having underlying medical conditions, she was at risk of contracting COVID19 within these jails and complicating her health conditions. The right to counsel was also hampered due to post lockdown arrests. On 25th July 2020, various students were charged under the Unlawful Activities Prevention Act (UAPA) under 'attempt to murder, rioting, and criminal conspiracy.' This was in response to the supposed link between the CAA protests and the Delhi Riots (Scroll Staff 2020). These arrests epitomise how the pandemic and its associated lockdown has also led to rapidly shrinking spaces for social activism, public expression, and dissent. Many of the arrested individuals had limited to no access to their legal counsel or family members. Similarly, in Uttar Pradesh and Himachal Pradesh, journalists critical of the government faced charges during the lockdown which seem to be politically motivated (Bhardwaj 2021). In August 2021, the Chief Justice of India went on record to condemn the threat to human rights that prevail in the State's police stations (Vaidhyanathan 2021). Custodial torture

and other police atrocities were issues that have continually cropped up in different police stations across the State, especially during the pandemic.

It is to be noted that the Lancet Commission Report (dated April 2021) clearly called for strict restrictions on gatherings of any nature, including political ones. The report stated that it is strongly advisable not to permit more than 10 people to be present at such gatherings in light of the worsening public health conditions in the country (India Task Force 2021).

In March and April 2021 in India, there was an evident surge of COVID cases across the country. These were clear signs of the public health emergency deepening in the world's largest democracy. Despite this surge, the ruling party Bharatiya Janta Party (BJP) continued conducting and hosting election rallies across various states in the country. A spokesperson from the party had gone on record to deny a causal link between religious and political gatherings as such to the rising case witnessed in those months (Menon and Goodman 2021). While the national election commission had issued warnings regarding non-compliance with general COVID regulations at these campaign grounds, these warnings were not heeded. Not until 22nd April were restrictions enforced on public events, limiting political meetings to 500 people.

Regarding the farmer protests, the Indian government reasonably raised concerns about the potential of mass gatherings at protest sights becoming 'super spreader' spaces when the country was combatting the early stages of the devastating second wave. The Chief Minister of the state of Punjab, where many of the farmers originated, pleaded to the farmers to act responsibly, not gather at these sites, and it was "totally unacceptable" (ANI 2021). The driving fear was that these gatherings could turn into grounds for further proliferation of the virus around the borders of New Delhi, much like the scenarios witnessed in the *Kumbh Ka Mela* festival. While linearly placing these protests against the possibility of it catalysing prolonging the health crisis seems logically correct, it is essential to contextualise two factors: 1) The presented necessity of such behaviour by the protestors in the interest of their freedom of expression and concerns around a controversial national law, and 2) the electoral campaign rallies being held in multiple parts of the country in the same period.

On 16th April, Haryana's Health and Home Minister, Anil Vij 'urged' the farmers to vacate the protest sites: Tikri, Singhu, and Ghazipur (FE Online 2021). Moreover, he further affirmed to undertake action in accordance with "the guidelines issued by PM Modi to break the chain and control the spread of COVID19." On the very same day, within hours of this statement, the Prime Minister went on stage at two political rallies in West Bengal in front of a seemingly endless sea of attendees, with no space for the general COVID19 guidelines to be followed (Press Trust of India 2021).

Farmers, in their letter, addressed to the central government, clearly stated that they were looking to avoid any health hazards (Miglani and Kumar 2021). However, the protests were necessary to voice their concerns regarding the farmer laws issued earlier, and it was in the interest of them exercising their democratic and fundamental right as enshrined in the Indian constitution. Furthermore, as the government called for these protests to be abandoned, the ruling party BJP had previously conducted election rallies along with other opposition parties in various states, including West Bengal and Karnataka (Reuters Staff 2021a). Even the Prime Minister, in certain instances, was present at these mass rallies consisting of thousands of patrons with little to no adherence to general COVID guidelines. Prime Minister Modi addressed various mass political rallies in April 2021, a month before the protests. Eventually, BJP 'reduced' the number of attendants at its rallies to 500 in light of the worsening situation in the country (Mishra 2021).

Protests held by distraught and frustrated health workers were also met with disproportionate displays of power and coercion. At one of the protests being held in the city of Bhopal, Madhya Pradesh, health workers were subject to physical attacks with bamboo sticks (lathi charge) before they were detained and arrested (Singh 2020). Amongst those subject to this disproportionate display of power was a pregnant health care worker. The second wave of the pandemic and the oxygen crisis faced by the country also led citizens to voice their concerns on social media. This included providing on-ground updates regarding the availability of medical resources in local hospitals and circulating messages calling for aid while facing dire circumstances. Certain figures in the government severely threatened their freedom of expression and right to information online. The chief minister of Uttar Pradesh threatened to use India's National Security Act (designed to combat terrorism) arbitrarily against people posting and seeking information about oxygen or beds in the state (Braunschweiger 2021). The police charged

a man from Uttar Pradesh for simply asking for help in procuring oxygen for his grandfather during the crisis (The Wire Staff 2021).

These incidents and practices are emblematic of how the Indian government has failed to uphold immovable human rights principles and the constitutional rights of many of its citizens in different instances. The Indian ministries failed to establish a clear set of guidelines for political gatherings along with an effective enforcement mechanism. The Indian government has arbitrarily used this paucity to undertake operations to meet their partisan ends whilst suffocating the freedom of expression, assembly, and association of different cohorts amongst the Indian diaspora. The health crisis has seemingly been perceived through a dichotomised lens – political rallies and campaigns were in the interest of political representation, participation, and elections. At the same time, protests against newly passed laws by the government were law and order management issues (Bhardwaj 2021). This asymmetrical behaviour, in general, has led to the transmission of a very mixed message about the gravity of the issue to the Indian public.

As a liberal, democratic State founded on the principles of equality, secularism, and freedom, India binds its governments constitutionally to abide by fundamental principles of the right to life, expression, and assembly, which are synonymous with the principles enshrined in various international instruments including the UDHR. However, the uncertainty the pandemic has wrought on the Indian society has been tackled by the government in a manner that has overtly encroached on the democratic freedoms of its people and has also unjustifiably used its national legal and policing powers to forcefully subdue protests while not providing clear guidelines nor adopting good practices to ensure the enjoyment of these freedoms in the first place.

2. Uganda

Uganda did not declare an emergency in light of the COVID19 pandemic. The president did not trigger Article 110 of the Ugandan constitution. Instead, he issued a series of declarations that served as COVID19 regulations and guidelines. The legality of these declarations is still unclear (Novic, Vandevelde, and Musiime 2020).

Uganda saw the recession of its democratic freedoms during this pandemic. It has been found that in the process of combatting the spread of the pathogen, the State, along with

some private entities, have actively violated the right to privacy and anonymity of its citizens while also transgressing upon their freedom of expression. Ugandan authorities employed smartphone apps to track and trace active cases amongst its population to tackle the pandemic. While there is an apparent necessity for such a move, there were no clear safeguards or independent overwatch to ensure no abuse of power in association with this technology. It has been found that the government used the eight different apps available to the public for purposes beyond tracing positive patients (Mwanzia, Kapiyo, and Ayazika 2021).

Furthermore, under the guise of public health protection, regulations around CCTV cameras, communication surveillance augmented State overreach beyond the prescribed public health mandate. Data collection associated with these tools has been used to political ends of stifling protests in different parts of the country. In November 2020, CCTV cameras were used to identify and arrest anti-government protestors. This extra-mandate usage of these COVID19 digital tools has caused self-censorship and detrimentally affected the right to freedom of expression and assembly within the East African State (Mwanzia, Kapiyo, and Ayazika 2021).

At first, some of the employed tools did satisfy the three part-test (legality, legitimacy, and proportionality) associated with Articles 19 and 16 of the ICCPR that allow for temporary State overreach. However, the democratic deficit continued to exacerbate without any accountability or safeguards. Associated with the freedom of expression digitally is the right to anonymity which the Special Rapporteur on Freedom of Expression and Special Rapporteur on Privacy have jointly raised concerns about regarding trends currently seen in Uganda's concerning practices of data retention, encryption, and arbitrary usage of collected data in conjunction with other broad and ambiguous national security laws to meet political ends (Rue 2013).

The Electoral Commission of Uganda on 16 June 2020 had released clear guidelines that paved the electoral roadmap for the national elections in January 2021. The roadmap aimed for a low-contact election that initially prohibited mass rallies during electoral campaigns and encouraged digital campaigns. However, this was subsequently revised first to allow a maximum of 70 participants, which was later increased to 200. Later in 2020, the commission called for the suspension of campaigns and election meetings in

16 districts in light of the worsening public health conditions. The issuance of clear guidelines while being considerate of the public health emergency and the human rights of freedom of expression and assembly is in accordance with internationally recommended good practices. But the situation in Uganda starts to falter during the enforcement of these guidelines (Shamdasani 2021).

The ruling administration and police have arbitrarily imposed COVID regulations in a targeted manner. In the run-up to the 2021 elections, they focused on targeting political campaign rallies of the opposition. This led to repeated arrests of political opponents such as Robert Kyagulanyi, also known as Bobi Wine (Dahir 2020). It has also been found that force was used against these individuals, such as spraying with pepper spray after being taken in custody (Human Rights Watch Staff 2021b). Adding to this, at many of these rallies, the police has prematurely and discriminately used force against campaigners, protestors, and journalists. The use of pepper spray, tear gas, amongst other firearms, need to comply with the United Nations Basic Principles on the Use of Force and Firearms by Law Enforcement Officials. The use of force by State officials should have only been initiated in a circumstance where all the means of de-escalating were exhausted, or a self-defence situation had emerged. Reports had noted that neither of these criteria was fulfilled before force was used by State officials on multiple instances (Human Rights Watch Staff 2021b). This violent behaviour of President Yoweri Museveni's administration and police has been noted since the early COVID19 days. Security forces arbitrarily arrested and beat up journalists, members of the LGBTQ community (Nyoni 2021), and vendors for not being entirely in adherence to the prescribed national COVID19 regulations.

Violence against journalists has been a very concerning point since the start of the pandemic. In the interest of protecting their freedom of expression and information, Uganda must abide by its commitments to the ICCPR and the principles of the UDHR. There have been various cases of State forces suppressing and using force against journalists. The case of Moses Bwayo, who was shot with a rubber bullet on 5 November, is emblematic of this suppression (IPI Staff 2020). Ten journalists were beaten up while covering the petition being delivered by Bobi Wine to OHCHR about the human rights abuses against his supporters. While the army announced that the perpetrators had been

tried in military court and sentenced to 2 months of detention, there were no substantive details revealed about the trial (Human Rights Watch 2020).

COVID19 regulations, which are critically in the interest of preventing the pathogen's spread, have been politicised by the ruling government to meet non-medical goals. It has been found that authorities have used these regulations against political opposition to violate their constitutional and human rights and clamp down any dissent. OHCHR spokesperson Ravina Shamdasani has noted that the State's forces used these guidelines arbitrarily to meet political ends. They were actively and discriminately used against the opposition, and their supporters whilst the ruling party's rallies ran uninhibited. Furthermore, the incident of Oboi Amuriat's arrest, one of the presidential candidates on 2 January also saw violence against journalists and forceful deletion of their videos and photos. This was a clear violation of the freedom of expression as noted under the UDHR, ICCPR, and the national constitution of Uganda (Shamdasani 2021).

19 November 2020 saw violence erupt in Uganda in the backdrop of mass protestors against the arrest of opposition leaders and presidential candidates. Bobi Wine and Patrick Amuriat were arrested on charges of being inviolate of COVID19 regulations for hosting unauthorised assemblies and potentially hampering public health. The police statement said most of the participants in these assemblies had no safeguards of face masks, physical distancing, and proper hygiene. While the triggering cause is justified given the public health crisis the East African State is facing, it is crucial to contextualise the appropriate proportional response the State's forces should have used. Treating this purely as a law and order issue rather than a specialised public health issue gave cause for further aggravated assemblies, which was antithetical to the fundamental cause of the earlier arrests. International watchdogs noted that at least 54 people had been killed during the clashes between the protestors and police, with over 300 arrests made (Office of the High Commissioner for Human Rights 2020).

Senior citizens in Uganda have especially faced severely due to the pandemic and regulations imposed by State officials (Hwang and Lin 2021). Being dependant on public mobility, family members, social groupings, or free-flowing commerce for sustenance, the nationwide lockdown detrimentally affected their lives, often pushing them to dire states of desperation. Furthermore, the aggressive enforcement of 7 pm curfew laws by

police officials against senior citizens indiscriminately led to inaccessibility to food and life-sustaining resources to specific individuals whilst also disproportionately violated their right to mobility and assembly for the purposes of COVID19 law and order maintenance (Giebel et al. 2020).

Uganda has seen its democratic tenets being diluted in recent years. Kenneth Roth, the executive director of the Human Rights Watch, has gone so far as even to classify it as a 'zombie' democracy (Roth 2021). He states that Uganda's President Museveni is at the helm of an autocratic government that is using the veil of democratic elections and certain other practices to actively stifle fundamental features of a democratic society. This understanding can be seen in the interaction of the long-standing government with the constitutionally independent media (Höglund and Schaffer 2021), human rights activists, NGOs, and political opposition. Uganda is slowly opening up its economy and easing COVID19 regulation. It is vital that the government address the crimes and abuse of power incidents that occurred during the lockdown against the civilian population does not go unaddressed. Furthermore, as the society in the East African State moves out of COVID19 regulated lifestyles, it is imperative for the government to ensure there is a severe overhaul in the modus operandi of the State's forces and ensure they are in compliance with national and international law.

IX.   Theme 2: Racism and Xenophobia in Metropolitan Societies

A.   Background and Existing Discussions

The highly disproportionate effects of COVID-19 on ethnic groups have brought the deeply entrenched issue of systematic racism to the fore, prompting discussions on how the pandemic is exacerbating existing racial inequalities. Michelle Bachelet, the UN High Commissioner for Human Rights, lamented that "it took COVID-19 to expose what should have been obvious– that unequal access to healthcare, overcrowded housing and pervasive discrimination make our societies less stable, secure and prosperous." She also called for governments to fully acknowledge the inequalities laid bare by the virus (OHCHR 2020a). In the UN Human Rights Council's annual high-level panel discussion on human rights, several panelists commented on the progress made to eliminate racism, racial discrimination, xenophobia, and related intolerance 20 years after the adoption of the Durban Declaration and Programme of Action. UN Secretary General Antonio Guterres stated that the "rot of racism is corroding institutions, social structures and everyday life," calling on the Council to assert "the values of equality, non-discrimination, mutual respect." Volkan Bozkir, the President of the 75th session of the UN General Assembly, said that "the reality is that COVID-19 may not discriminate, but its impact has been far from even... ethnic, religious and racial minorities have poorer outcomes than the rest of society" (OHCHR 2021).

The discrimination of ethnic minorities, including people of Asian and African descent in light of COVID-19, compels us to reflect upon several relevant international human rights principles. The Durban Declaration of 2001– which emphasizes the paramount importance of the global fight against racism and xenophobia in all their forms and manifestations particularly against persons of African and Asian descent as well as indigenous people and minorities– provides a highly relevant guidance on identifying the causes and victims of contemporary manifestations of racism, as well as highlighting legislative, judicial, regulatory, administrative and other measures at both national and international levels to eradicate these practices (World Conference Against Racism, 2002). In addition, the Rabat Plan of Action in 2012 produced a set of recommendations in areas of legislation, judicial infrastructure, and policy to foster international prohibition of any forms of discrimination (OHCHR, 2013). Reference to Article 20 of the International Covenant on Civil and Political Rights (ICCPR) is also warranted, which prohibits "any advocacy of national, racial or religious hatred that constitutes incitement to

discrimination, hostility or violence" (United Nations, 1984, p. 26). Other provisions include Articles 2 and 26, which stipulate the State's obligation to ensure equal treatment of all individuals within a its own territory without distinction of any kind. Lastly, Article 5 of the International Convention on the Elimination of All Forms of Racial Discrimination (ICERD) requires states to "undertake to prohibit and to eliminate racial discrimination in all its forms and to guarantee the right of everyone, without distinction as to race, colour, or national or ethnic origin, to equality before the law" (OHCHR 1965).

The persistence of racist and xenophobic practices across the world in the midst of COVID-19 shows the deplorable erosion of these international legal principles. It highlights the need for the global community to enhance international cooperation in rooting these harmful practices.

B.   Case Studies
For the purposes of this theme, the report will be focusing on the following countries:

1.   China
China imposed harsh restrictions from the early stages of the outbreak, which drew criticisms of racism against the Black population for its targeted draconian responses against them. In April, during the second wave of the outbreak where most cases were attributed to imported cases from overseas, the local authorities in the southern city of Guangzhou– home to China's largest African community– forcibly tested Africans for the virus and ordered them to self-isolate or quarantine in designated hotels, with many residents being evicted by landlords and made homeless, while some restaurants and shops refused service to African customers (Wang 2021). Videos of African people sleeping on the streets or being subject to arbitrary harassment or arrest by the police have circulated in the social media, sparking public outcry among netizens and observers from China and beyond. The Chinese authorities enforced such measures against African residents despite most claiming to have no recent travel history or contact with COVID-19 patients, suggesting the state's evidently heavy-handed measure informed by prevalent stigmatization and xenophobic attitudes in China towards immigrants, especially the African population (Marsh, Deng, and Gan 2020).

This mistreatment of Black people has generated significant backlash and protest from dozens of African nations, where leaders have summoned Chinese ambassadors, foreign

ministers and legislators have voiced concerns, and the media have highlighted inherent anti-Black racism shown by China's measures (Albert 2020). Shortly after the incident, the Working Group of Experts on People of African Descent, along with various Special Rapporteurs, collectively issued an allegation letter to the Chinese government, expressing serious concern over the allegations of the local authorities' discriminatory treatment of Africans in Guangzhou (the Working Group of Experts on People of African Descent et al. 2020). The letter urged the Chinese government to "investigate all reports of discrimination and hold all perpetrators accountable," as well as to "provide information on the action taken to guarantee Africans and people of African descent the right to equality, the right to freedom from discrimination, the right to health, and the right to adequate housing and an adequate standard of living." (Ibid., pp. 3-4).

While the Chinese government provided a response to this letter (currently not publicly accessible), an UN official requesting anonymity said that the Chinese government in its response denied any statewide involvement in this incident, and that it had taken actions against individual offenders in accordance with relevant laws. At an official level, the Chinese government has denied that there was any racism involved in its targeted measures towards Africans, asserting that COVID-19 quarantine measures were equally enforced towards both Africans and Chinese alike, instead blaming the Western media for provoking the "problems between Chinese and African countries" (Leng and Chen 2020). In fact, an official statement from the Chinese Embassy in South Africa said that "there is no such thing as the so-called discrimination against Africans in Guangdong Province." (Embassy of the People's Republic of China in the Republic of South Africa 2020).

This incident illustrates China's failure to properly acknowledge its discriminatory treatment of Africans within its own jurisdiction or pledge concrete follow-up measures, as well as unwillingness to uphold its commitment to international legal standards, such as Article 5 of ICERD, which China ratified in 1981. It stipulates a wide range of human and civil rights that states should grant to all people regardless of their distinctions, which in this case pertains to the right to housing; the right of access to any place or service intended for use by the general public (OHCHR 1965, p. 4).

2.   United States

The US, which has been one of the world's worst hit countries due to the pandemic, is a telling case of how racism and xenophobia could manifest themselves in both explosive and violent ways on the one hand, and insidious and subtle ways on the other, all the while reinforcing and exacerbating existing stereotypes.

Anti-Asian racism

The most conspicuous trend following the rapid spread of COVID-19 in the US has involved the alarming rise in various forms of racism against people of East Asian ancestry. According to a compilation of 6,603 anti-Asian racism incidents from March 2020 to March 2021 by STOP AAPI Hate, a non-profit organization, these acts took on varying degrees of intensity, with verbal harassment (65.2%) and shunning (18.1%) accounting for most of the hate incidents, with physical assault (12.6%) and other civil rights violations such as workplace discrimination and refusal of services (10.3%) also making up for a significant portion (Stop AAPI Hate 2021). Preliminary US police data also showed an alarming 164% spike in anti-Asian hate crime in 16 of the largest US metropolitan areas between the first quarters of 2020 and 2021 (Center for the Study of Hate & Extremism 2021). One of the most appalling anti-Asian attacks took place in March 2021, when a white man killed eight women– six of them Asian– in spas across Atlanta. This incident galvanized Asian Americans into solidarity and political action, many of whom had already been living in fear of increasing anti-Asian hate crimes in association with COVID-19 (Huang 2021).

An interview with an UN official revealed insights into the underlying factors of such anti-Asian racism in the US, with East Asians historically having been subjected to second class status, and extraordinary circumstances often being exploited by political leaders to target ethnic and racial minorities as scapegoats. The official explains that such systematic racism towards Asians is due to existing power structures since colonialism that go beyond individuals who perpetuate racist and discriminatory acts, saying that their stereotypes are reinforced by such structural institutions.

The alarming rise in anti-Asian racism and related intolerance around the world, particularly in the US, has elicited strong responses from the UN, with the Secretary-General expressing profound concern about such trends and mentioning that these

incidents "have perpetuated a centuries-long history of intolerance, stereotyping, scapegoating, exploitation and abuse" (Haq 2021). Earlier, on 12 August 2020, the Special Rapporteur on contemporary forms of racism, racial discrimination, xenophobia and related intolerance sent a joint public communication with other relevant working groups to Trump administration, pointing out the increase in the various forms of racist attacks against Asians in the country and expressing concern at the lack of measures taken to combat such incidents. The attached reference to international human rights law stipulates specific provisions which are directly applicable to the situation in the US, highlighting the glaring inadequacies by the world's most powerful democracy in protecting some of the most essential liberties of its own citizens. (Achiume, Morales, and Broderick 2020). The specific provisions include Articles 2, 20 and 26 of the ICCPR, ratified by the US in 1992, which stipulates the State's obligation to ensure equal treatment of all individuals within its own territory without distinction of any kind. Furthermore, the ICERD, ratified by the US in 1994, emphasizes the need to criminalize the "dissemination of ideas based on racial superiority or hatred, incitement to racial discrimination, as well as incitement to such acts against any race or group of persons of another colour or ethnic origin" (Ibid., p. 5). The US government has not yet replied to this communication one year after receipt, even after the inauguration of the new Biden administration in January 2021.

With a new government in place since 2021, there has been some headway in legislation introduced to combat racism against Asians. On 20 May 2021, President Biden signed the COVID-19 Hate Crimes Act into law, following overwhelming bipartisan support (Sprunt 2021). In signing the bill, Biden directly took an aim at racial hatred, calling it "the ugly poison that has long haunted and plagued our nation" (Ibid). The 8-page bill provides for the Attorney General to provide grants to relevant agencies in the state and local governments to identify, investigate and report hate crimes, as well as to issue guidance on states on best practices (United States Congress 2020). While the law enjoyed broad support from both sides of the political spectrum and from activist groups, Stop AAPI Hate added that further legislation will be needed to tackle the "root causes of systematic racism and oppression" (Sprunt 2021).

Anti-African racism

While anti-Asian hate crimes in the US during COVID-19 have gathered significant media and public attention due to the sheer amount of violence involved in some incidents, the connection between the pandemic and the plight of people of African descent in the country has not been sufficiently investigated. The death of George Floyd by the law enforcement in May 2020 has generated enormous domestic and international outrage by people of various ethnicities who stood in solidarity with Black people in defending their civil liberties. However, more focus is needed on how COVID-19 has exposed existing racial inequalities which have plagued the people of African descent in the US for a long time, in ways which are not always evident at first glance.

In its report "Racial Discrimination in the Context of the COVID-19 Crisis," OHCHR pointed out that the negative effects of the pandemic are disproportionately impacting certain marginalized racial and ethnic groups, in particular inflicting enormous health consequences for people of African descent (OHCHR 2020b). The predominantly lower socio-economic levels enjoyed by people of African descent compared to other ethnic groups in the US has meant that a significant segment of the Black population lives in marginalized neighborhoods without adequate access to healthcare facilities, among other amenities to enjoy a decent standard of life (UN Human Rights Council 2021)

The deeply embedded structural inequalities in the US have worked against the people of African descent since the country's founding, serving to entrench and normalize racial discrimination against Black communities, and leading to a situation today where COVID-19 has led to a disproportionate health impact for people of African descent. Furthermore, people of African descent constitute a significant portion of frontline workers (nursing personnel, bus drivers, delivery staff), and are thus at greater risk of infection and death (OHCHR 2020b). The data tells a bleak picture: African Americans are three times as likely to contract COVID-19 and nearly twice as likely to die from the virus as whites. Several compounding factors aggravate the suffering of people of African descent, such as subpar housing conditions that often involve overcrowding and poverty; overrepresentation in low wage jobs which make infections more likely; and inadequate coverage by health insurance (National Urban League 2020).

With the inauguration of the new US administration in January 2021, President Biden signed an Executive Order that directly addressed the "unbearable human costs of systematic racism" as highlighted by the compounding socio-economic and health crises in the context of COVID-19 and the global movement to fight for the dignity of Black lives in the aftermath of the killing of George Floyd. The Executive Order stipulated an "ambitious whole-of-government approach equity agenda that matches the scale of the opportunities and challenges that we face," aimed at advancing equity for all, "including people of color and others who have been historically underserved, marginalized, and adversely affected by persistent poverty and inequality" (The White House 2020). The US also participated at the 47th session of the UN Human Rights Council and issued a joint statement in which four-point agenda for racial justice were agreed, which consist of: dismantling the existing institutions of systematic racism which perpetuate discrimination against people of African descent; ensuring accountability and trust from the law enforcement; whole-heartedly supporting the human rights of Black people and investigating any allegations of human rights abuses; and confronting past legacies. (UN Human Rights Council 2021).

According to an observation by an anonymous UN official, the US is heading towards the right direction in that it is one of the few countries which has been attempting to address the complicated historical issue of racism against African people, although he added that these efforts are currently being undertaken in isolated local initiatives in the form of memorialization and still has room for a better nationwide coordination. A recent bill introduced by the US Congress HR 40 attempts to establish a national commission that would be responsible for giving reparation to African Americans and issuing a national apology for the institution of slavery dating back to the 1600s and the subsequent impact of racial and economic discrimination inflicted on these people (US House of Representatives 2021). This measure shows that the US is indeed capable of taking bold steps to confront contentious past legacies and redress historical wrongs and work towards racial justice.

3.   Brazil

Brazil also has had a historical legacy of systematic slavery of Black people, with a substantial level of racial stratification and inequality that continues to this day long after the formal abolition of slavery in 1888 despite the myth of "racial democracy" which

Figure 1 Proportional excess mortality between weeks 12 and 50 in white and black/brown population, for (A) Brazil and regions and (B) age groups. The boundaries on the percentages bars reflect bootstrapped 95% confidence intervals
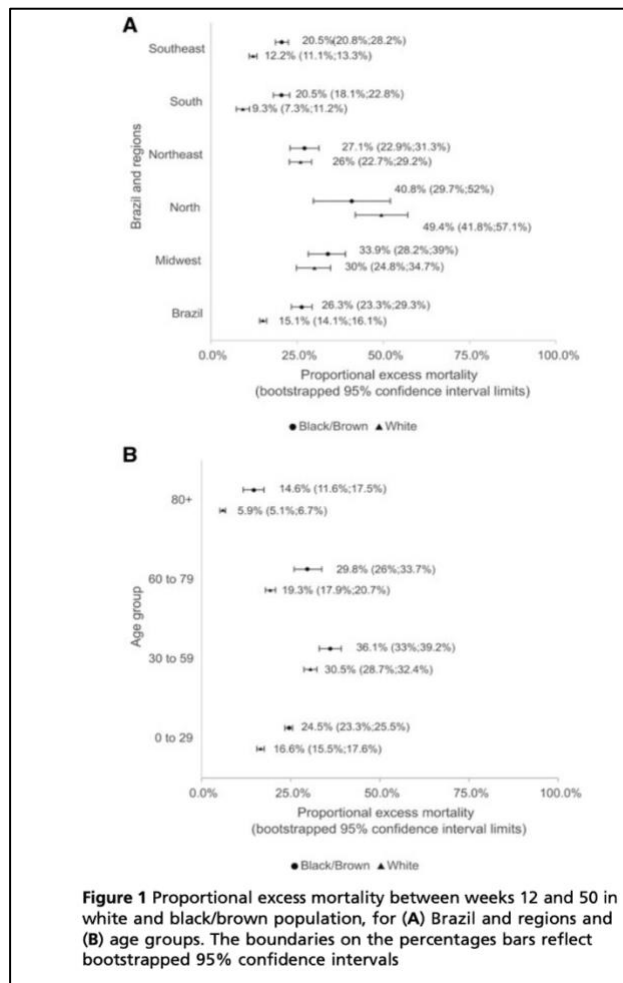
holds that there is no racism against non-whites in the country. People of African descent in Brazil have long been denied the same opportunities given to whites, leading to stark contrasts in their standard of living. For example, while only 14.3% of whites live in favelas– highly populated and underdeveloped slums– in Rio de Janeiro, the figure is 30.5% for people of African descent– more than double the figure (de Oliveira et al. 2020). Also, 17.9% of people of African descent in Brazil lack access to running water, compared to 11.5% of whites, while a whopping 42.8% of Blacks don't have access to adequate sewage disposal, as opposed to 26.5% of whites. They are also overrepresented in the informal sector, working as house cleaners or street vendors for example, which offers little economic stability and places them in a precarious position when it comes to health threats (Caldwell and de Araújo 2020). The data shows that the Afro-Brazilians are at an obvious disadvantage in many aspects, which points to the long-existing racial inequality in Brazil.

One of the worst hit countries from COVID-19 to date, Brazil has witnessed a harrowing disparity in terms of regions most affected by the pandemic, which have largely corresponded to the racial composition in the respective regions. COVID-19 inflicted the most damage on favelas in big cities, such as the Brasilândia neighborhood in São Paulo– with over half of the population being Black– reporting most deaths in the city. This stood in stark contrast with the lowest infection and death rates recorded in the city's affluent areas– largely occupied by white residents– showing the pandemic's disproportionate damage to people of African descent, who generally lack access to quality healthcare facilities and are thus more vulnerable to falling victims to COVID-19 (de Oliveira et al. 2020). Furthermore, a study that aimed to evaluate the impact of COVID-19 on excess mortality in Brazil based on skin color found that the Black

population and people of African descent have disproportionately borne the health impacts of the pandemic across all age groups and regions except for the North, where the excess mortality rate was found to be higher among whites. (Marinho et al. 2021). The authors explain that the relatively low excess mortality among people of African descent in the North could be attributed to the complete breakdown of the healthcare system in this region which may have affected all people regardless of their socio-economic classes. However, the fact that the overall lowest mortality rates were recorded in the South and Southeast regions– which are comprised of majority white populations– again points to how COVID-19 has exposed and exacerbated existing racial inequalities in Brazil that puts the people of African descent at a clear disadvantage.

Racial discrimination towards people of African descent in the context of COVID-19 also extends to police brutality, a serious yet largely neglected social issue in Brazil long before the pandemic brought it to the fore. According to a 2019 government data, people of African descent made up of 79% of deaths during police raids, while in Rio de Janeiro, 1,423 of 1,814 people killed by the police were of African descent, representing a similarly lopsided figure that clearly paints a stark picture in terms of the racially disproportionate measures taken by the Brazilian law enforcement (UN Human Rights Council 2021). The Brazilian police, notorious for being among the world's deadliest, carries out heavy-handed operations in favelas and poor neighborhoods with impunity, meaning that many killings of unarmed Black men or children receive little media attention and seldom generate public outrage, since such killings are commonplace and even normalized (Slattery and Moraes 2020).

However, one incident in Rio de Janeiro caused an enormous national uproar especially among the Afro-Brazilian population, whose demands for racial justice and a complete overhaul of the current law enforcement system biased against people of color were fueled by the global racial reckoning in the aftermath of the killing of George Floyd by the police in the US. João Pedro Matos Pinto, a 14-year-old Afro-Brazilian boy, was killed during a police anti-narcotics operation in a favela in Rio de Janeiro on 18 May 2020, when the armed police stormed into the house and fired bullets after he had fled inside the house to hide from the police helicopters flying overhead, killing him in the process (UN Human Rights Council 2021). His death, whose court proceedings are still inconclusive as of May 2021, generated enormous outcry over an unabated police

violence which has intensified with the COVID-19 lockdowns in Brazil, with protestors denouncing it a state-sponsored "genocide" of the country's Black youth (Phillips 2020). Indeed, racism against people of African descent received significantly greater attention in Brazil in tandem with Black Lives Matter protests that swept the world in 2020. While a survey of news stories about police operations in Brazil found that the word "black" appeared only once in approximately 7,000 articles published between June 2019 and May 2020, it appeared six times since the death of George Floyd, illustrating the growing racial sensitivities in Brazil (The Economist 2021).

International organizations reacted to the killing of João Pedro Matos Pinto's death, with the Inter-American Commission on Human Rights (IACHR) releasing a press release in August 2020 where it expressed its "concern about the excessive use of police force, particularly with regard to high levels of police lethality and its disproportionate impact on persons of African descent" (Inter-American Commission on Human Rights 2020). The IACHR also mentioned that the killing of Pinto and other acts of police brutality are "part of a historical and structural process of discrimination based on ethno-racial and social origin, which manifests itself systematically," drawing attention to the American Convention on Human Rights for Brazil's legal obligations to guarantee the right to life of all persons and "promote equality and non-discrimination in all spheres of action" (Ibid). In April 2021, OHCHR sent a note verbal (reference: ROLENDB/MR/SH) requesting information from the Brazilian government on the deaths of Pinto, and a Black woman named Luana Barbosa dos Reis Santos, also killed by the law enforcement, in 2016 (content not publicly available). In response, the Brazilian Permanent Mission to the UN expressed regret, but touted the various legal frameworks established by the Brazilian government to combat racism (Permanent Mission of Brazil to the United Nations Office and other International Organizations in Geneva 2021). However, these items of information do not sufficiently account for the structural factors of racism which have contributed to the death of Pinto, nor do they indicate what concrete steps will be taken to prevent such unfortunate incidents from recurring.

In the aftermath of the deadly killing of Pinto which generated enormous backlash against police brutality against people of African descent, Brazil's Supreme Court ordered a halt to police raids in Rio de Janeiro favelas during the pandemic, barring exceptional cases (Reuters 2020). However, barely one year into the prohibition, the police conducted yet

another deadly operation in Rio's impoverished Jacarezinho neighborhood in May 2021 that resulted in 28 deaths, including one police officer, prompting Human Rights Watch (HRW) to urge the state Attorney General to investigate any criminal and civil responsibilities for the operations (Human Rights Watch 2021). It also shows that the manifestations of long-standing systematic racism against people of African descent in Brazil– whether it pertains to the lopsided health impacts from the pandemic or disproportionate police operations and violence in favelas predominantly occupied by Black people from lower socio-economic backgrounds– are more acutely felt in midst of the devastating COVID-19 pandemic that continues to ravage Brazil.

X.   Theme 3: Vaccine Development and Distribution

A.   Background and Existing Discussions

The first crucial aspect to gaining access to COVID-19 vaccines is a country's economic purchasing power. Richer countries have been able to purchase more doses of the COVID-19 vaccine through bilateral agreements with pharmaceutical companies, allowing them to vaccinate their local populations more quickly (Gonsalves & Yamey, 2021). For example, Canada has acquired enough doses to vaccinate its population 10 times over, and the United Kingdom, 8 times over (Gonsalves & Yamey, 2021). One of the solutions proposed to address this issue, named COVID-19 Vaccines Global Access or COVAX, is directed by the WHO, the Vaccine Alliance (GAVI), and the Coalition for Epidemic Preparedness Innovations (CEPI). Through COVAX, the aim is to acquire at least 2 billion doses of the COVID-19 vaccine by the end of 2021 to vaccinate the world's most high-risk and vulnerable populations, in addition to frontline healthcare workers (Herzog et al., 2021). However, COVAX has been criticized for its vaccine allocation proposition, as countries within the COVAX system can still pursue bilateral agreements elsewhere (Herzog et al., 2021). Additionally, many have claimed that although COVAX is a good first step to addressing vaccine inequalities, it is not the end goal solution to addressing vaccine access inequities (Herzog et al., 2021).

Secondly, manufacturing capacity and capabilities is another crucial aspect of COVID-19 vaccine access. Though wealthier states often have the capacity to manufacture vaccines, several developing or least developed countries do not, and the inequity is alarming. For example, 17% of the world's population lives in Africa, yet Africa can only manufacture 1% of its vaccine needs due to a lack of manufacturing capacity (Abiodun et al., 2021). This forces African states to turn to external suppliers for not only purchasing vaccines, but also for vaccine development. This dependency may lead to delays and uncertainty, in addition to hindering government vaccine rollout plans. These issues therefore exacerbate health issues within the continent (Abiodun et al., 2021). Related to this issue of manufacturing capacities are issues with intellectual property. On October 2, 2020. the governments of India and South Africa have proposed a waiver from certain aspects of the Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) by the World Trade Organization (IP/C/W/669, 2020). Supporters of the TRIPS waiver argue that it would allow for information and knowledge sharing that would support low-income countries in their development of COVID-19 vaccines

(Aryeetey et al., 2020). However, several high-income countries oppose the proposition, stating that even during this exceptional crisis, broad exceptions to intellectual property may threaten innovation (Aryeetey et al., 2020). Even if the TRIPS waiver was to be accepted, there are still questions about whether low-income countries would have the manufacturing capacity to develop the widely desired COVID-19 that their countries desperately need.

The Declaration on the Right to Development and The International Covenant on Economic, Social and Cultural Rights will provide a normative basis for analysing the access, distribution, and development of COVID-19 vaccines from a human rights lens. In addition to these two instruments, several Human Rights Council resolutions will be helpful in examining this topic. While resolution 46/14 is specifically related to ensuring equitable, affordable, timely, and universal access for all countries to vaccines in response to the coronavirus disease (COVID-19) pandemic (A/HRC/RES/46/14, 2021), resolution 41/10 is related to access to medicines and vaccines in the context of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health (A/HRC/RES/41/10, 2019). Several other resolutions are critical when analysing this topic, such as the contribution of development to the enjoyment of all human rights (A/HRC/RES/41/19, 2019), promoting mutually beneficial cooperation in the field of human rights (A/HRC/43/21, 2020), and the central role of the State in responding to pandemics and other health emergencies, and the socioeconomic consequences thereof in advancing sustainable development and the realization of all human rights (A/HRC/44/2, 2020).

B.   Case Studies

Three countries case studies, namely – the United States, India, and Senegal – have been selected to examine how access to COVID-19 vaccines varies among countries. The countries were carefully selected, with each being at different stages of development according to the United Nations country classifications (the U.S. = developed economy, India = developing country, Senegal = least developed country).

1. Current COVID-19 Vaccinations

The number of COVID-19 vaccinations worldwide changes on a daily basis, therefore requiring consistent monitoring. As of August 8th, 2021, about 30% of the world population had been at least partially vaccinated against COVID-19, highlighted in Figure 1. However,

the difference in the number of vaccinated people among these three countries is staggering. The U.S. has vaccinated the most people within its borders among the three countries, with at around 58% of its population at least partially vaccinated and 50% fully vaccinated (Figure 1). India has made strides with its vaccination roll out, with about 29% of its population at least partially vaccinated and around 8.2% fully vaccinated (Figure 1). Finally, Senegal has vaccinated the smallest amount of its population, with about 5.4% of its population being at least partially vaccinated and around 2% fully vaccinated (Figure 1).
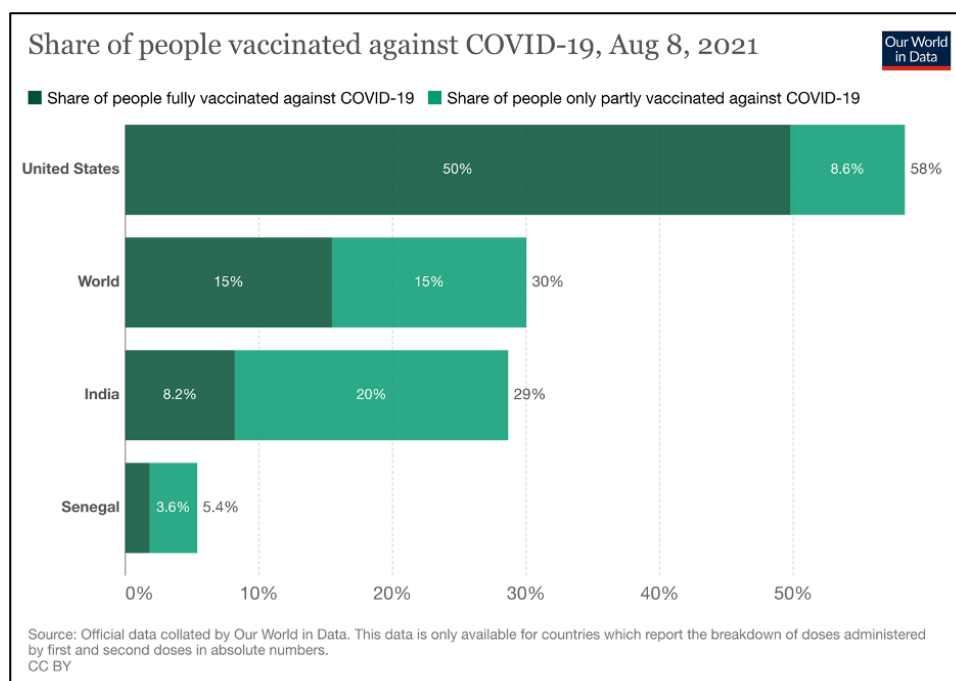
Figure 2. Share of people vaccinated against COVID-19 in the world, the United States, India, and Senegal as of August 8, 2021.

2.   Economic Capability: Purchasing Power

The COVID-19 pandemic has demonstrated how economic capability, also viewed as a country's purchasing power, plays an instrumental role in gaining access to vaccines. As stated earlier, The United States, India, and Senegal are at varying levels of development, which is linked to their economic development. Despite a challenging first year of the pandemic, the United States GDP per capita in 2020 was still over $63,500 USD (The World Bank Group, 2020). Classified as a developing country, India's GDP per capita in 2020 was around $1,900

USD (The World Bank Group, 2020). Unlike the other two countries, Senegal had a slight increase in its GDP per capita between 2019 and 2020, ending 2020 with just over $1,400 USD (The World Bank Group, 2020). For each country, this directly impacts how much fiscal space/money they are able to spend on vaccines, as well the number of doses of vaccines they are able to purchase.

Table 1. COVID-19 vaccine purchases by United States, India, and Senegal as of August 8, 2021

Table of COVID-19 Vaccine Purchases

Buyer/recipient	Vaccine Candidate	Total Price (in USD million)	Doses committed (in millions)
United States	AstraZeneca/Oxford	1200	300.0
	Johnson & Johnson	1000	100.0
	Moderna	4500	300.0
		Not available	200.0
	Novavax	1600	100.0
	Pfizer/BioNTech	3500	500.0
		9955	500.0
	Sanofi/GSK	1050	100.0
India	AstraZeneca/Oxford	29.92	11.0
		975.2	460.0
	Bharat Biotech	22.71	10.0
		551.2	260.0
	Biological E	205.6	300.0
	Gamaleya	975	100.0
Senegal	Sinopharm/Beijing	3.71	0.2

Finalized Commitment1
Yes

Doses committed (in millions)
0.2   500.0

This table shows the number of vaccine doses committed (in millions) for each state and multilateral organization. Data can be filtered based on whether the commitment has been finalized. Sources are media outlets, government publications, and pharmaceutical company press releases. *Last updated August 05, 2021*

The Global Health Centre at the Graduate Institute of International and Development Studies has pulled together various sources (media outlets, government publications, and pharmaceutical company press releases) to determine the various vaccine candidates that countries have purchased, the amount of money spent per vaccine candidate, and the number of doses purchased for each vaccine candidate (Table 1). For example, the United States has purchased six different COVID-19 vaccine candidates and has acquired over 2 billion doses (Table 1). Overall, the U.S. has spent at least $22 billion USD purchasing vaccines (Table 1). India has purchased four different COVID-19 vaccines, has acquired about 1.1 billion doses, and has spent over $2.7 billion purchasing vaccines (Table 1). On the other hand, Senegal has purchased only one vaccine candidate, has acquired around 200,000 doses, and has spent $3.71 million USD on purchasing this vaccine (Table 1). These numbers reveal how purchasing power is linked to the number of vaccine candidates and number of doses a country can afford.

3.   Manufacturing Capability: Capacity & Production

The COVID-19 pandemic has also highlighted how a country's manufacturing capacity can be crucial in gaining access to vaccines. Producing vaccines requires high-level technology, proper facilities that can scale production, and the ability to produce quality vaccines that meet certain international standards (Ray-Jurado et al., 2018). There are various groups that work on the production of vaccines, including private pharmaceutical companies, academic institutions, and public institutions. In the United States, for example, both the private and public sector produce vaccines for the country, which is helpful because it allows for a variety of choices and prices (Ray-Jurado et al., 2018). Based within the United States are the pharmaceutical companies Pfizer and Merck & Co., both companies that supply vaccines to people all around the world (Ray-Jurado et al., 2018). The Serum Institute of India, the world's largest manufacturer of vaccines, is a state-owned vaccine manufacturing center within India (Ray-Jurado et al., 2018). Both the Serum Institute of India and the Bharat Biotech International are largely tasked with the production and distribution of vaccines to countries without manufacturing capabilities (Ray-Jurado et al., 2018). The Institut Pasteur de Dakar is the only vaccine manufacturer in Senegal, with the ability to produce small amounts of the yellow fever vaccines (Abiodun et al., 2021). The variety in the number of vaccine manufacturers between these states, as well as their central goals in terms of production and distribution, influences their responses during this COVID-19 pandemic.

The United States has three main vaccine manufacturers that have made instrumental strides in producing and distributing vaccines worldwide. The Pfizer-BioNTech, Moderna, and Johnson & Johnson vaccines have been largely utilized within the country and out of it. Pfizer-BioNTech plans on producing over 3 billion doses of the COVID-19 vaccine in 2021 (Mishra & Erman, 2021) while Moderna is planning for 800 million to 1 billion (Steenhuysen & Carl O'donnell, 2021). While the production of these vaccines is essential to countries throughout the world, the cost of these vaccines makes them less accessible to lower income countries. While Johnson & Johnson vaccines are priced at a lower price point, from $3.50-$10.00 per dose, Pfizer-BioNTech and Moderna vaccines are priced much higher, with Pfizer-BioNTech costing anywhere from $6.75-

$35.00 per dose, and Moderna costing anywhere from $10.00-$28.88 per dose (Global Health Centre, 2021). The Pfizer-BioNTech, Moderna, and Johnson & Johnson vaccines are the only vaccines approved for emergency use within the United States, highlighting how much the United States is willing to pay for these vaccines. However, the United States has pledged to give over 600 million doses to low-income and middle-income countries, such as Argentina, countries within the African Union, Taiwan, and Haiti (Shalal & Bose, 2021). Although the United States has acquired enough vaccines through vaccine purchase arrangements to cover over 300% of its population, it is the largest contributor of vaccines to other countries in the world (Global Health Centre, 2021).

India has several vaccine manufacturers that are capable of producing COVID-19 vaccines, including the Serum Institute of India, Bharat Biotech, Dr Reddy's Laboratories, Biological E Limited, Aurobindo Pharma, and Indian Immunological (Sharun & Dhama, 2021). This comes with several advantages. Firstly, the country has the capacity to produce over 3 billion COVID-19 doses annually (Sharun & Dhama, 2021). Secondly, many of the vaccines that these manufacturers produce will be at a lower cost than other vaccines, therefore making them more accessible to low-income and middle-income countries (Sharun & Dhama, 2021). Finally, these manufacturers have the ability to produce vaccine candidates that were developed in other countries, therefore scaling up production for vaccines overall (Sharun & Dhama, 2021). While India has kept some vaccines to be utilized for their own population, they have provided vaccines to countries worldwide, including Nepal, Afghanistan, Nicaragua, Mongolia, and Uganda (Sharun & Dhama, 2021). This demonstrates India's commitment to not only producing vaccines, but also making them available to other countries in the world.

While Senegal only has one vaccine manufacturer in the country, there are many opportunities for this country to expand its manufacturing capacity overtime. During this pandemic, the Institut Pasteur de Dakar has been able to provide some COVID-19 diagnostics for the continent, including providing rapid antigen testing at low costs (Abiodun et al., 2021). Recently, the President of Senegal approved support from Team Europe (including EU Member States, the EU Commission, the European Investment Bank, and other stakeholders), the United States, and the World Bank Group to create a new manufacturing facility to manufacture COVID-19 vaccines as well as vaccines for other endemic diseases (Stand et al., 2021). This measure is headed by the Institut Pasteur

de Dakar, and should lead to a decreased dependence on other countries for COVID-19 vaccines (Stand et al., 2021). Several European countries have made multimillion dollar commitments to this project, in hopes to support Senegal in their process to scale-up manufacturing capabilities within the country (Stand et al., 2021).

4. Case Study Analysis

Due to a multitude of factors—including economic capability, manufacturing capacity, and political climate—each of these three countries had different responses to tackle the COVID-19 pandemic. The United States, as a major world power with immense wealth and ability to produce vaccines, decided to turn inwards and prioritize its own citizens before attempting to assist other countries and their vaccine roll-out programs. Although the U.S. generally followed WHO protocol by first vaccinating its healthcare workers, its elderly population, and the most vulnerable (with slight variations dependent on state mandates), it did not participate in global cooperation efforts in the beginning of the pandemic (Paz, 2021). It refused to join COVAX when it was first announced (Rauhala & Abutaleb, 2020) and it continued to purchase vaccines through deals with pharmaceutical companies and vaccinate the rest of its adult population after vaccinating the most at-risk populations, despite WHO recommendations (Paz, 2021). In many ways, the United States is still choosing to continue prioritizing its own citizens, as it recently secured 2 million doses of Pfizer-BioNtech vaccines to be utilized for potential COVID-19 booster shots (Mishra & Erman, 2021). While each nation-state does have the responsibility of protecting the health of its own citizens, the U.S. has received much criticism, as several low-income countries have yet to vaccinate 2% of its population while the United States begins plans to provide booster shots, and while also allowing millions of COVID-19 vaccines expire (Paz, 2021). However, it is important to highlight the efforts made by the U.S. in donating vaccines to some of the poorest countries in the world, revealing its commitment to making vaccines accessible for countries that would otherwise be unable to afford them.

India, as it has done several times in previous disease outbreaks, responded to the demands of the pandemic by trying to take care of its citizens while also trying to provide vaccines for the rest of the world. By providing low-cost vaccines to countries

worldwide, many low- and middle-income countries were able secure doses of the COVID-19 vaccine (Sharun & Dhama, 2021. In addition, the Indian government with the support of the South African government spearheaded the request for the TRIPS waiver as an attempt to make access to vaccines more equitable (IP/C/W/669, 2020). This highlights India's firm stance on supporting the most vulnerable populations around the world. However, India's focus on making vaccines available to other countries is a likely factor in how intense the second wave of COVID-19 hit the country. With relatively low vaccine rates for a country with strong manufacturing power, new variants spread quickly within the country, leading to over 4,000 deaths in a single day in May of this year (Held, 2021). In fact, the country had to halt the export of vaccines during this time, as it had to prioritize the health of its own citizens (Arora, Das, and Jain, 2021). This case study illustrates the difficult situations that arise when trying to both contribute to global cooperation efforts while still managing and supporting efforts to take care of the people within one's borders.

Unlike the United States and India, Senegal did not have and currently does not have access to the same number of vaccines in order to tackle the COVID-19 pandemic. Due to the country's smaller economic capability and limited manufacturing capacity, it has to largely rely on vaccines donated through COVAX. Because Senegal could not regard COVID-19 vaccines as the sole answer to controlling the spread of the COVID-19 virus, it utilized lessons learned from previous disease outbreaks to contain the spread. For example, Senegal made efforts to provide all COVID-19 positive patients with a private bed, a form of isolation policy (Kirby, 2021). Additionally, Senegal supported community and local health actors that helped to develop trusting relationships and promote safe COVID-19 protocols, such as wearing masks (Kirby, 2021). By encouraging these practices, Senegal was able to keep COVID-19 cases low throughout the majority of the pandemic. Despite the challenges Senegal faced, the government found ways to protect the health of its citizens through local, grassroots efforts. Now, the country is looking to support the rest of the African continent with the new focus on building its manufacturing capacity with the support of several European countries and the United States (Stand et al., 2021). Again, this demonstrates Senegal's commitment to its citizens and to the rest of the world to end this COVID-19 pandemic.

Regarding disparities in economic capability, COVAX was designed as a solution to inequities to vaccine access for countries with low purchasing power. The aim for the COVAX facility was to vaccinate 20% of the world's poorest 92 countries by the end of this year. However, the roll-out campaigns for COVAX have been rather slow. In January of 2021, it was estimated that through COVAX, 2.3 billion doses of vaccines would reach the arms of people in poorest countries (Joi and Fulker, 2021). As of August 2021, COVAX has only shipped around 209 million vaccines, falling very short of the initial estimate (Global Health Centre, 2021). This has led to several questions about vaccine equity, and whether or not COVAX will deliver on providing access to vaccines to countries that cannot afford them. Additionally, other critics of COVAX note that although the facility was built on equity, it is largely dependent on how many doses rich countries are willing to donate (Usher, 2021), therefore COVAX was not truly built on an equitable platform and will continue to fall short of its goals. During an interview with Dr. Carlos Correa, the Executive Director at the South Centre, he explained that he believes COVAX can be much more powerful if it was incorporated into existing legal frameworks or initiatives. Since COVAX is run by various organizations and not by states, it lacks the premise to hold states accountable. Despite its shortcomings, it is important to acknowledge COVAX as an attempt to promote global cooperation in providing equitable access to COVID-19 vaccines.

In an attempt to mitigate the differences in manufacturing capacity between countries and increase access to COVID-19 vaccines, a TRIPS waiver was proposed by the Indian and South African government to the WTO. Since its proposal in October of 2020, it has been co-sponsored by the delegations of over 63 countries, including the African Group and the Least Developed Countries Group (WTO, 2021). The goal of the TRIPS waiver is to help increase the global supply of COVID-19 vaccines to meet the global demand, but the complexities surrounding intellectual property rights makes this waiver difficult to grant (Eccleston-Turner & Rourke, 2021). Supporters of the TRIPS waiver see it a crucial step in making COVID-19 vaccines widely available by allowing for the transfer of knowledge and technology (Eccleston-Turner & Rourke, 2021). However, it is important to note that the TRIPS waiver would not oblige this transfer of technology, therefore making it less sufficient as a solution (Eccleston-Turner & Rourke, 2021). Dr. Tammam Aloudat, current Managing Director for the Global Health Centre at IHEID and former Deputy Executive Director for the Access Campaign at Médecins Sans

Frontières provided another outlook to the TRIPS waiver during an interview. He stated that the time period to focus on the TRIPS waivers has passed, and that leaders in the global health system should be putting their energy into other efforts to make vaccines more accessible. He also is reluctant to believe that the TRIPS waiver would pass if it was held toa vote, as it would require a consensus from all 164 WTO member-states (Blenkinsop, 2021). Although the TRIPS waiver has gained the support of the United States in addition to several low-income countries, there is still opposition by several powerful countries, including many states within the European Union (MSF, 2021). Therefore, while the TRIPS waiver may provide some opportunities for scaling up COVID-19 vaccine production, it is not the holistic answer to producing more vaccines and ending this pandemic.Theme 4: Access to Internet and Broadband Infrastructure

XI.   Theme 4: Access to IT and Internet
A. Background and Existing Discussions

As a result of the COVID-19 pandemic, over 1.5 billion students and youth were affected by school and university closures (Global Education Coalition, 2021). "Half of the total number of learners- some 826 million students- kept out of the classroom by the COVID-19 pandemic, do not have access to a household computer and 43% (706 million) have no internet at home" (Startling Digital Divides, 2021). Article 26 of the Universal Declaration of Human Rights affirms that education is a basic human right (Universal Declaration of Human Rights), yet millions of students around the world did not have access to the resources or technologies needed to continue their studies during the pandemic. "Children and young people from the poorest households, rural and lower income states are falling even further behind their peers and are left with very little opportunity to ever catch up" (UNICEF, 2020).

The United Nations Secretary-General outlined the need to preserve quality education for children and youth during the pandemic in policy briefs addressed to governments, calling for the promotion of distance education through: "(i) access to loans or equipment transfers for students and/ or households; provision of internet connection; and (iii) public-private partnerships to make platforms and tools for distance learning available free of charge" (Shared Responsibility, Global Solidarity, 2020, 19). In instances where students did not have access to internet devices and were therefore not able to partake in online learning, governments and organizations collaborated and formed multi-sectoral initiatives to provide learning solutions that did not require the internet, such as distribution of paper-based learning and radio learning. An initiative that has exemplified global solidarity in the name of ensuring education to students during the pandemic, is UNESCO's Global Education Coalition. The platform was launched by UNESCO and includes over 175 members from UN organizations, civil society, academia, and the private sector (Global Education Coalition, 2021). The objectives of the platform include "responding to educational disruptions caused by school closures; scaling up distance learning and connecting every learner and education institution to the internet; managing effective recovery and the return to school and learning; and advocating, collecting data, and building and sharing knowledge, to strengthen the resilience of education and learning systems and reimagine the future" (Global Education Coalition, 2021).

The COVID-19 pandemic has not only widened digital inequalities between developed and less-developed nations, it has also further divided the digital gender gap. While this digital gender gap was present prior to the COVID-19 pandemic, the pandemic has further exacerbated gender-based inequalities (Gendered Digital Divide, 2021). According to a 2019 study conducted by the International Telecommunication Union (ITU), the digital divide amongst gender is growing, with only 48% of women globally connected to the Internet, compared with 55% of men. (Measuring Digital Development, 2020, 8). The UN Special Rapporteur on the Rights to Freedom of Peaceful Assembly and Peaceful Association, Clement Voule, notes that "the high cost of data and lack of access to mobile phones remained the most important barriers to women's connectivity, contributing to a greater digital divide in the least developed countries" (Voule, 2020, 16).

B. Case studies

Three country case studies – the USA, India, and Ethiopia have been selected to further examine the good practices, success stories, lessons learned and challenges in the fight against the COVID-19 pandemic and how varying access to internet and broadband infrastructure have affected the three countries. The level of development of a country has been classified based on the United Nations World Economic Situation and Prospects 2021 Report, which classifies countries into developed economies, economies in transition, or developing economies based off each country's per capita gross national income (GNI). The countries are then further grouped into high, upper-middle, lower-middle, or low-income countries. (World Economic Situation and Prospects, 2021, 123).

1. United States of America

The USA is classified as a high-income developed economy in the World Economic Situation and Prospects (World Economic Situation and Prospects, 2021, 128). Though it is regarded as one of the most developed economies of the world, nearly 25% of American adults do not have access to a broadband internet connection. This statistic does not include the additional millions of individuals who do not have access to a stable internet connection (Jody and Hernandez, 2021, 1).

With the pandemic, a major challenge that emerged within the United States was the movement of work to an online format. This change highlighted inequalities in the

workforce and "further widened the economic and health disparities between those in "white-collar" professional positions (who can work online from home), and those working in lower paying service jobs that require people to be physically on-site" (Jody and Hernandez, 2021, 4). According to a study conducted by the Economic Policy Institute, in the United States, only 16 % of Hispanic workers and 20% of Black workers had the opportunity to work from home during the pandemic, compared with 30% of White workers and 37% of Asian workers (Gould and Shierholz, 2020).

In addition to the work from home movement, education also had to be shifted to an online format. With the emergence of virtual schooling, many districts across the nation saw large gaps in accessibility to broadband internet for students, with factors such as access to hardware (computers and laptops) and internet access at home playing prominent roles. "According to 2017 data from the National Telecommunications and Information Administration (NTIA), 3.1 million households (14.1%) with school-aged children have no wired broadband connection at home" (Fishbane and Tomer, 2020). In the state of Washington, some districts reported that more than half of their students did not have access to internet in their homes during the pandemic (Equity in Education Coalition, 2020).

In response to the challenges presented through the change to online school and work, organizations such as the Federal Communications Commission (FCC) responded accordingly. The FCC is the agency of the U.S. government responsible for the regulation of television, radio, and satellite. To protect Americans from losing their broadband connectivity due to the exceptional circumstances, the FCC founded the Keep Americans Connected Pledge. This pledge called for broadband and telephone providers to "not terminate service to any residential or small business customers because of their inability to pay their bills due to the disruptions caused by the coronavirus pandemic; waive any late fees that any residential or small business customers incur because of their economic circumstances related to the coronavirus pandemic; and open its Wi-Fi hotspots to any American" (Keep Americans Connected, 2020). Over 800 companies and associations took part in the pledge.

2. India

India is classified as a lower-middle income, developing country in the United Nations World Economic Situation and Prospects 2021 Report (World Economic Situation and Prospects, 2021, 126). Although it has the second highest internet users in the world in absolute terms, the number of internet users in comparison to the total population of the country stands somewhere between 20.1% (ITU) and 56% (Indian government) (McDonald, 2021). The Government of India defines a well-connected nation as having 70-80% overall broadband connections (National Broadband Commission, 2019). To meet their criteria of a well-connected nation, the government has implemented initiatives such as the National Broadband Mission, with the goal of providing broadband access to all villages in the country by 2022 "to bridge the Digital divide between rural-urban and rich-poor" (National Broadband Commission, 2019). But throughout the COVID-19 pandemic, the digital divide in India has presented a multitude of challenges.

The digital divide meant that those without means to access the internet could not initially book an appointment to receive their doses of the COVID-19 vaccine. Starting in January 2021, the Indian government began offering registration for vaccines exclusively through an online system by the name of CoWIN (McDonald, 2021). Exclusive registration through this online system significantly limited a large portion of the population without internet access or those who are illiterate from registering for their vaccinations. According to a survey conducted by the National Statistical Office (NSO) in 2020, only 23% of the urban population has access to computers and only 4% of the rural population has access to computers (Pratim Gohain, 2020). According to the same survey, the literacy rate among those aged 7 and above in urban populations stands at 87.7% while the statistic stands at 73.5% for the rural population (Pratim Gohain, 2020). By June 2021, all government vaccination centers started to accept walk-ins for vaccination registration to combat the inaccessibility for the millions of Indians without access to internet (Frayer, 2021).

Another challenge that emerged in India because of the COVID-19 pandemic is the inability for millions of students to access technology to partake in online schooling. According to data from the Ministry of Education of the Government of India in February 2021, nearly 30 million out of 286 million students affected by school closures in India do not have access to digital devices such as a smartphone, tablet, or computer to access

the internet for online education (UNICEF India, 2021). Therefore, different means, including television, radio, and paper-based materials, have been used to provide distance/homebased learning in addition to online learning. (UNICEF India, 2021). In addition to government launched initiatives for online learning, civil Society Organizations such as Educate Girls have created innovative learning models such as creating "learning circles of students and pool in digital resources in the community to bridge the technology gap, and provide counselling to students" (UNICEF India, 2021).

3. Ethiopia

Ethiopia is classified as a low-income, least developed country within the developing economies grouping of the United Nations World Economic Situation and Prospects 2021 Report (World Economic Situation and Prospects, 2021, 126). As of January 2021, only 20.6% of the population had access to the internet (Kemp, 2021). In addition to low internet accessibility, the country is also notorious for internet shutdowns, with 8 internet shutdowns recorded in 2019. In 2020, over 100 million people in regions of Ethiopia did not have access to internet services for three months, including at the height of the pandemic (Ethiopia: Government should guarantee internet access, 2020). Even with the first confirmed cases of COVID-19 in Ethiopia on March 13, 2021, internet services remained shut down in parts of Ethiopia until March 31, 2021 (Ethiopia: Government should guarantee internet access, 2020). The internet shutdowns meant that people could not access timely information and misinformation was more likely to spread concerning COVID-19. The internet shutdowns also violate the UN Human Rights Council's 2016 Resolution on the promotion, protection, and enjoyment of human rights on the Internet, which reads that it is "deeply concerned also by measures aiming to or that intentionally prevent or disrupt access to or dissemination of information online, in violation of international human rights law" (A/HRC/RES/32/13, 2016, 3).

The digital gender gap was also present in Ethiopia during the pandemic. According to the One UN Assessment: Socio-Economic Impact of COVID-19 in Ethiopia (2020), women have had inadequate access to the internet and information on COVID-19, with 74% of women not having weekly access to the internet, radio, television, or newspapers. The Assessment (2020) also highlights the fact that the livelihoods of women were highly impacted, as women "are more likely to be engaged in informal or low-wage activities

such as petty trading, daily wage labor and domestic work" and therefore were not able to have the luxury of utilizing the internet to work from home (United Nations Ethiopia, 2020, 46). In addition, the literacy rate for adult women over the age of 15 in Ethiopia stands at just 44.4%, while the literacy rate for men over the age of 15 stands at 59.2% (UNESCO Ethiopia, 2017). With the combined low literacy rate and limited internet access, Ethiopian females' access to "adequate and correct information on COVID-19 is expected to be lower than that of men" (United Nations Ethiopia, 2020, 46).

In addition to the pandemic's impact on Ethiopian women, children of school-going age were also negatively impacted. 26 million children were affected in Ethiopia by the closing of schools. Due to the low accessibility of internet throughout the country, online schooling through internet was not plausible. Rather, "modalities such as paper-based and or radio/TV programs" served as the main sources for distance education (United Nations Ethiopia, 2020, 38). One example of such a modality was the development of a Distance Learning Plan through the collaboration of UNICEF, Save the Children, and other partners. The plan implemented radio education for students in grades 1-6 and television education to students in grades 7-12 for a combined six million children across Ethiopia (UNICEF Global, 2020). Despite such efforts, students from poor households were less likely to have access to such platforms. As only with 29% and 11% of rural households have access to radio and TV channels in comparison to 42% and 61% of urban households (UNICEF Global, 2020).

XII. Collective Conclusion

Within the case studies mentioned and analyzed above, it can be seen how the politicization of the pandemic is epitomized in the arbitrary application of COVID19 regulations. COVID19/pandemic regulations recommended by the WHO and as prescribed in the national constitutions of various States, including the 3 case studies, were strictly in the interest of maintaining public health standards. While the trade-off between public health security and democratic freedoms is noted, and it is temporarily permitted under the Siracusa Principles, it is also crucial for the States to contextualize its regulations in the context of existing State practices and operations and also use these regulations equally, proportionally and in a non-discriminatory manner.

Existing UN guidelines around maintaining civic liberties and molding their exercise in the context of public health emergencies like the COVID19 pandemic hold some excellent practices that States could have incorporated in their modus operandi. The application of COVID19 regulations to curb democratic freedoms, specifically the freedom of expression, right to assembly, and right to information, is gravely inviolate of various international laws and against the fundamental spirit of human rights instruments such as the UDHR. As seen in the case of India, and Uganda, in pursuant of political goals, governments curbed peaceful protests, dissent, political opposition, and any anti-government rhetoric forcefully under the guise of public health management. The authors are not criticizing the complete emergency response of some of these States but highlighting specific instances of actual or potential international law violations vis-a-vis documented incidents. Furthermore, envisioning this public health emergency as a law-and-order issue when it comes to policy implementation has enabled State forces (the police) to undertake a broad mandate of operations. State forces have often abused this width at protest sites, against dissidents, and specific cohorts of people who are otherwise protected under constitutional and human rights laws, such as journalists. By not ensuring the protection of journalists and human rights defenders, and actively subjugating them to discriminatory State action, governments will have failed to satisfy SDG16.10.1 that focuses on promoting the protection of journalists and human rights defenders. Such trends in State behavior seemingly are feeding into the increasingly autocratic behavior of these States.

A good practice that we note within these case studies is the role of the judicial wing in these countries. Active and adaptative judicial review has allowed some form of protection to be alluded to those that have been discriminated by State policies and forces during the pandemic.

The above case studies illustrate the interconnections between the COVID-19 pandemic and the various manifestations of racial discrimination and xenophobia against people of color, particularly against people of African descent, and Asian descent– as in the case of the United States. COVID-19 has served to sensitize the international community to the explicit racism experienced by these groups as well as the significant disparities evident in the pandemic's health effects. The pandemic's disproportionate impacts on people of African descent– from health impacts to police brutality– speaks to the persistence of systemic racism that continues to perpetuate socioeconomic and racial inequalities for generations amidst a culture of normalization.

COVID-19 has posed a plethora of challenges for the world when it comes to fighting racism and related intolerances. While some countries have shown the willingness and capacity to confront the harmful legacies and manifestations of racism head-on, others have been much more reluctant, suggesting that actors at all levels of society need to pool their efforts together in tackling racism, guided by full respect for the whole spectrum of human and civil rights regardless of ethnicity, and firmly grounded on established international regulations and laws, as well as national constitutions and laws.

Illustrated by the three case studies, the COVID-19 pandemic has revealed good practices, success stories, lessons learned, and challenges by different states. By highlighting the gaps in the global health system, and particularly in global health governance, the pandemic provides an opportunity to make purposeful and intentional change so that the world is better prepared to work together and to protect the health of people globally. These lessons make it clear that global cooperation and international solidarity is essential to saving lives. Through this lens, human rights have to be at the forefront of international efforts to make the COVID-19 vaccine more accessible.

Ultimately, access to COVID-19 vaccines is essential to people living happier and healthier lives. As discussed in Human Rights Council resolution 41/10, access to vaccines helps to propagate the right of everyone to the enjoyment of the highest attainable standard of physical and mental health (A/HRC/RES/41/10, 2019). By this accord, everyone—not just people located in rich countries, have the right to protect their physical and mental health. For this pandemic, getting a COVID-19 vaccine is one of the best ways to prevent extreme health

complications as it related to the virus. Therefore, it should be a priority to make vaccines available to every person who wants it. However, access to COVID-19 vaccines is not just an issue about health, it's also significantly linked to development and human rights. Through the case studies, it is clear that countries that are more developed had more access to COVID-19 vaccines, giving them a better chance of fulfilling the responsibility to protect the health of their citizens. This follows the message from the Human Rights Council resolution 41/19—that development contributes to the enjoyment of all human rights (A/HRC/ RES/41/19, 2019). Moving forward, it is imperative to acknowledge that all human rights are the entitlements of each and every person worldwide, and there is global responsibility to fulfil them, even amidst a pandemic.

As seen in the case studies, the internet and broadband infrastructure have served as vital mediums throughout the pandemic for a plethora of functions ranging from use in online work, online school, vaccine registration, information obtainment, and beyond. With such a reliance on the internet in today's interconnected society, a stable internet connection must be viewed as a basic need rather than a privilege. With nearly half of the global population still not connected to the internet, it is far from being readily available to all as a global public good. Those lacking internet access face a multitude of repercussions, particularly during COVID-19, with only a handful of these repercussions covered in this text. It is evident that the digital divide has been exacerbated by COVID-19 even further and that in order to achieve digital equity, a systemic approach involving many facets of society must come together to provide equal internet access.

XIII. Bibliography

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