**Response to joint questionnaire of special procedures on**

**Protecting human rights during and after the COVID-19**

June 2020

South Korean Human Rights Network in Response to the COVID-19 (23 NGOs)

Contact Details

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**South Korean Human Rights Network in Response to the COVID-19 (23 NGOs)**

List of NGOs in English

Activists group for Human Rights ‘BARAM’; Center for Health and Social Change; Dasan Human Right Center; Dongcheon Foundation; GongGam Human Rights Law Foundation; Gwang-Ju Human Rights Center 'Hwal JJak'; HIV/AIDS Human Rights Activists Network Korea; Human Rights Movement Space 'Hwal'; Human Rights Foundation SARAM; Korean Gay Men's Human Rights Group 'Chingusai'; Korean Lawyers for Public Interest and Human Rights(KLPH); Korean People’s Solidarity against Poverty; Korean Progressive Network 'Jinbonet'; MINBYUN - Lawyers for a Democratic Society; People's Coalition for Media Reform(Media Reform); PINKS : Solidarity for Sexually Minor Culture & Human Rights; Protesting against Poverty ＆ Discrimination Solidarity for Human Right; SARANGBANG Group For Human Rights; Seoul Human Rights Film Festival; Solidarity Against Disability Discrimination; Solidarity for LGBT Human Rights of Korea; Solidarity for Peace & Human Rights; Women with Disabilities Empathy

List of NGOs in Korean

공익인권변호사모임 희망을 만드는 법, 공익인권법재단 공감, 광주인권지기활짝, 다산인권센터, 민주사회를 위한 변호사 모임, 빈곤과 차별에 저항하는 인권운동연대, 빈곤사회연대, 서울인권영화제, 성적소수문화인권연대 연분홍치마, 연구공동체 건강과대안, 언론개혁시민연대, 인권운동공간 활, 인권운동네트워크 바람, 인권운동사랑방, 인권중심사람, 장애여성공감, 전국장애인차별철폐연대, 전북평화와인권연대, 재단법인 동천, 진보네트워크센터, 한국게이인권운동단체친구사이, 행동하는성소수자인권연대, HIV/AIDS인권활동가네트워크

**Protecting human rights during and after the COVID-19**

**Joint questionnaire by Special Procedure mandate holders**

**Common questions**

**Impact on human rights**

* Please explain the impact of the pandemic on the enjoyment of human rights and what actions have been taken by the State to respect, protect and fulfil human rights?
* The Korean government has taken proactive measures including implementing the “physical distancing” scheme and expanding free and widescale testing to protect the right to life of the people.

However, there have been some issues regarding restricting basic rights such as privacy infraction, collecting personal data through digital surveillance technologies and restricting rights to freedom of peaceful assembly and demonstration. The civil society has criticized the government’s attempt to take controversial administrative actions such as introducing wristband trackers for quarantine violators and self-quarantine monitoring application without gathering any public opinion. Despite the concerns about possible violation of basic rights, the government enforced those actions and has been punishing self-quarantine violators with prison sentence.

* Are there any measures put in place in your country following the pandemic which have had a limiting effect on human rights? If so, please list them, provide an explanation for their adoption and indicate the time-frame by which they will be lifted?
* Restriction on the rights to freedom of peaceful assembly and demonstration.

: Several local governments have placed a ban on assembly and demonstration, prohibiting rallies in cities. Most of those bans does not have any time-frame by which they will be lifted.

* Quarantining and enforcing administrative actions

: Without any clarification whether quarantine is mandatory measure prescribed by law or voluntary action done by consent of the person concerned, people have quarantined themselves.

The government responded that it was inevitable to enforce administrative actions for the prevention of the pandemic. However, punitive measures for quarantine violators were criticized for being disproportionate. The government said it would try to minimize possible violation of human rights, but it hasn’t come up with any concrete response.

* Concerns about privacy infractions

: Authorities access a wide range of data — smartphone location history, credit card transactions, immigration records, and CCTV footage — of confirmed patients to compile logs of their travels and contacts.

Since the beginning of the pandemic, the human rights organizations have raised issues regarding collecting to much personal information and releasing tracking records of those who infected with the COVID-19. The National Human Rights Commission of Korea(HNRCK) also called for new guidelines on pandemic surveillance. It Claimed that the logs of patients travels and contacts were “unnecessarily specific”, causing psychological injury to the patients and discouraging self-reporting among those with symptoms.[[1]](#footnote-1)

Recently some of the local governments started to track and delete records of those infected with the COVID-19 following a new guideline for patient data collection and disclosure on March 14 from the Center for Disease Control and Prevention (KCDC). Three updates were notable: (1) the logs should be time-limited from one day before the symptoms occurred until the date of quarantine (or if asymptomatic, one day before the quarantine); (2) the range of contacts traced should be determined based on the patient’s symptoms, exposure conditions, and timing; and (3) “personally identifiable information” — including work and home [addresses](https://news.joins.com/article/23730000) — should be excluded in public disclosures. However, the guideline is not mandatory, which leaves local government to act on their own.[[2]](#footnote-2)

In March, The government announced that collected data would be discarded as soon as the pandemic ends. However it haven’t provided any specific standard how to determine the end of pandemic. (Recently, human rights organizations confirmed that data collected during MERS in 2015 have been discarded.)

People have to keep records of entrance of institutions and facilities through QR codes or documents.[[3]](#footnote-3)

* 1. Were these measures determined by law? If yes, please indicate the relevant legislation.
* Disclosing excessive traffic information and collecting personal information

: In the early days of COVID-19, excessive disclosure of movement information of the infected people was a problem in Korea. As the infected people’s movement was socially revealed, the criticism of the individual and the social stigma effect have been created. The fear of social criticism due to disclosure of private information was greater than the fear of infection.

Social stigma due to disclosure of private information is becoming a bigger problem for sexual minorities. Recently, it has been socially assumed that people infected with COVID-19 in certain areas are sexual minorities. In the process, the release of traffic information of an individual creates an effect to expose sexual orientation and gender identity of the person to those around them.

* Problems of Compulsory Administrative Measures

: Introduction of self-quarantine app -> Attaching electronic bracelet to self-quarantine violators -> Imposing penalties on violators

Relevant administrative measures are increasingly directed to custody and surveillance of criminals. Compulsory policies consider the self-quarantine subjects as potential risks to be controlled not as citizens who need to be protected from infectious disease. These policies have triggered aversion and stigma to the infected and those in need of self-quarantine.

* Problems of restriction on freedom of assembly

: Korea's non-regular and special employment workers were scheduled to hold a Labor Day rally to demand measures against the threat of livelihood and layoffs caused by the COVID-19. Seoul City and the Police prohibited the rally even though the participants guaranteed hygiene managements such as wearing masks, gloves and dustproof clothing, and keeping social distance. And the police proceeded with the investigation against the participants after the rally.  The measures to exercise labor rights are blocked in line with a ban on the demonstrations. The rights of freedom of expression in civil society and community are intervened in various problems caused by COVID-19, and hardship of social minorities.

* 1. Why were these measures necessary to respond to the COVID-19 situation?
	2. Were these measures proportional in view of their expected results to counter the pandemic?
	3. Did these measures have any discriminatory effects on various groups of the population? If so, please indicate which ones and why.
* Please describe whether responses to the pandemic by States, businesses, faith-based organizations or others actors have resulted in a rollback of human rights, including in relation to affirmative action, gender-equality, inclusion of persons with disabilities and LGBT persons, land rights of indigenous peoples’ or access to sexual and reproductive health services?
* Strong administrative measures taken by the government under the pandemic and the collection of private information and the disclosure of movements have resulted in the violation of individual freedom and dignity. In the process, the infected persons are more afraid of fear from social stigma and aversion than of the disease itself.

Discrimination and inequality have occurred at several points, even though actions taken in urgent situations should take priority in protecting the rights of the socially disadvantaged and minorities.

1) It is important in a virus crisis to receive information about the risks and come up with safety measures. However, risk information was not delivered smoothly to the disabled people, migrant workers, and the elderly during the process of providing emergency disaster texts and relevant information. In the case of migrants, only Korean letters were sent, causing communication problems, and in the case of the disabled, sign language translation was not carried out in the early stages of the disaster, making it difficult to deliver information.

2) The socially disadvantaged and minorities were placed in discrimination and exclusion by the government’s measures for the quarantine and emergency disaster support. Forced eviction of the homeless people has been made such as removing chairs in public spaces, or banning the use of the spaces. In addition, the migrant and homeless, who are more vulnerable in the crisis, were excluded in the process of paying disaster allowances to resolve the economic crisis caused by COVID-19.

3) In the early days of COVID-19, the infection spread mainly in facilities for the disabled people and mental hospitals. Most residents were infected due to the nature of the isolated facilities. Some local governments took cohort quarantine on the facilities to prevent the spread of infection. Due to this measure, the disabled people and patients were collectively infected.

4) It is necessary to protect rights of safe medical treatment and examination in COVID-19 crisis. However, postponement and rejection of treatment for people from vulnerable groups and specific regions occurred in responding COVID-19. Several medical institutions have postponed necessary medical measures such as treatment, hospitalization, surgery for HIV infected people in response to COVID-19. In some cases, a pregnant woman from areas where the infection spread and spread and a pregnant woman who visited a hospital where many infected cases occurred were rejected from treatment.

* What long-term impacts of the pandemic and its response measures are expected on the enjoyment of human rights?
* There are concerns that strong state control such as intensified surveillance, strong administrative measures, restriction on freedom of assembly and movement in the name of COVID-19 quarantine will be a new normal.  In addition, it is necessary to make social discussions on how to make a process to restore basic rights suspended during the urgent situation, and reassure the importance of human rights.
* Please explain if economic recovery and financial assistance mechanisms to reduce the social economic impact of the measures adopted have been subjected to prior human rights impact assessments?

**Statistical information**

* Please provide epidemiological data on COVID-19 infections, recovery and mortality rates in your country, region or locality, disaggregated by nationality, race, ethnicity, religion, membership of indigenous peoples, age, gender, sexual orientation and gender identity, income/poverty levels, disability, immigration status or housing situation. Which groups in your country have been disproportionately affected by COVID-19 and how can this be explained?
* Please provide age disaggregated data on persons infected by COVID 19 and the percentage of them living in care institutions for older persons. Please provide age disaggregated data on deaths caused by COVID-19 and the percentage of them who were in care institutions.
* Please share any information and data on the availability of health services to ensure access to testing, personal protective equipment and treatment. Please specify to what extent supply issues, economic, social or other barriers have limited access to testing, personal protective equipment and health care services, in particular for persons belonging to particular racial or ethnic groups, indigenous peoples, older persons, persons with disabilities, LGBT persons, persons living in poverty or in situation of homelessness, migrant workers, or persons without legal residency status.
* Please provide us with data indicating the social-economic impact of the economic downturn triggered by COVID-19 such as changes to household income, increase of unemployment, access to food and traditional livelihoods, poverty or homelessness in your country, region or locality, disaggregated by nationality, race, ethnicity, age, gender, sexual orientation and gender identity, disability, religion or immigration status.
* Which groups have been identified as particularly vulnerable to socio-economic hardship in the context of the COVID-19 crisis?
* Please provide data on the number of older persons who live in residential care institutions or alternative setting; the number of older persons in situation of homelessness and/or without adequate housing; and the number of older persons who are in prisons, refugee camps and informal settlements.
* Please provide data on abuse and neglect of older persons, in and outside care institutions brought to the attention of public authorities or complaint mechanisms.
* Please provide data on incidents of domestic violence, including femicides disaggregated by a) intimate partner femicide b) family related femicide based on the relationship between the perpetrator and the victim/s and c) all other femicides based on the country context.

**Protection of various groups at risk and indigenous peoples**

* What measures have public authorities taken to protect high-risk populations from COVID-19, including: a) health care and social workers, b) older persons, c) other persons with a possibly reduced immune system such as indigenous peoples, or persons living with HIV, d) detained and incarcerated persons, including persons under state custody; e) persons living in care homes, f) children and adults living in institutions, camps, shelters or collective accommodation, g) persons with disabilities, h) homeless persons; i) persons living in informal settlements or overcrowded homes; j) refugees, IDPs and k) migrant workers.
* Regarding b) older persons, some measures taken include:

i) Policy to supply masks to vulnerable groups including older persons for infection prevention

ii) Checking of COVID-19 symptoms by non-face-to-face phone

iii) Effort to fully operate emergency welfare support system

iv) other efforts to promptly provide adequate support for older persons who need care service

* Nonetheless, not all the measures above were effective in practice. During the COVID-19 pandemic, existing welfare service supply system did not operate properly.
* Can you inform us about particular measures taken to mitigate the impact of the COVID-19 pandemic for communities and groups subject to structural discrimination and disadvantage?
* What measures have been taken by public authorities to ensure continued provision of services, including food, healthcare, education, psycho-social assistance to persons in vulnerable situation, including a) older persons, b) persons with disabilities, c) LGBT persons, d) persons in situations of homelessness, e) indigenous peoples, f) victims and survivors of domestic, sexual and gender-based violence, g) human trafficking, h) discrimination, i) victims of contemporary forms of slavery, including forced labour, as well as h) child victims of sale and sexual exploitation?
* Has there been any interruption of services, such as the closure of emergency shelters, food banks, or the disruption of health care or psycho-social services that has been of concern?
* In case of older persons living in the community, even the basic livelihood is threatened due to the suspension of welfare services they had routinely utilized such as welfare services for older persons living in homes and services of welfare centers for older persons. In particular, older persons living alone often use meal service provided through welfare services and programs provided by senior citizens' welfare centers to maintain their health. However, since the outbreak of the COVID-19, meal services, welfare center's programs, and meal box delivery services have all been suspended, resulting in deterioration of health conditions of older persons due to poor food supply and poor external activities. Moreover, while older persons living alone have become isolated and confined in their homes, immediate response to emergency situations is becoming difficult due to the suspension of various in-house welfare services and the suspension of monitoring visits due to concerns over the COVID-19 infection. In fact, a case has been reported in a district in Seoul that no support has been provided except for a once-a-day delivery of convenience store lunch box to older persons living alone. When a social worker and a lawyer visited an older person living alone with dementia for urgent matter, the older person's residence was in a very poor condition as the person could not properly clean urine and faeces, the leftover food being decomposing, and the cleaning was not done at all. Yet, the situation is getting better due to the active efforts of the welfare centers and the local social welfare team.
* Have particular measures been taken to address the situation of single parent households?
* What measures have been taken to address racial disparities, prevent racial discrimination and protect victims of racism, racial discrimination, xenophobia, and related intolerance during the pandemic?

**Social Protection**

* Please provide information on implemented and planned adjustments to the social safety net in response to the crisis, to ensure that individuals who lost all or part of their income as a consequence of the pandemic have access to sufficient nutrition, housing, water and sanitation, health care, energy and other essential goods and services? How has the State ensured fair and equitable access to social safety net measures across lines of race, gender, sexual orientation and gender identity, membership of indigenous peoples, and others?
* The State has drawn up some additional budget for the Emergency Aid and Support system and slightly eased the requirements and conditions to access the Emergency Aid and Support system. However, the strict requirement and conditions for the Emergency Aid and Support, such as the strict criteria for income or property and narrow recognitions of critical situations exclude a lot of people who face emergent hardships in livelihood and needs urgent social protection.

Meanwhile, the State and the local governments provided people the emergency disaster relief funds, but some vulnerable groups are arbitrarily excluded from the funds. Vulnerable groups such as teenagers who are out of school, homeless people whose resident registration has been canceled, and unregistered migrants are being discriminated against in providing the funds.

In addition, the State temporarily implemented a two-month program to provide up to 500,000won a month to vulnerable workers, such as informal workers, workers on unpaid leave, and freelancers. However, this program is not enough for vulnerable workers to withstand the employment crisis and income losses.

The reason why the State implements one-off or short-term income security programs such as the emergency disaster relief funds and special programs is that there is no social protection floor that can cope with unemployment crisis and poverty universally and comprehensively.

For example, vulnerable workers, such as older workers, platform workers, and informal workers has been excluded from the social protection due to the strict requirements and conditions of Employment Insurance, which has been the State’s only social safety net for the unemployment, to access. Moreover, wide range of people living in poverty were excluded from social protection under the State’s National Basic Living Security system due to the eligibility criterion of the family duty to support its member that has shifted the State’s responsibility for the people living in poverty to their families.

* How has the State approached social protection of small entrepreneurs and for people whose livelihoods are based in informal economies, in particular persons working often informally, in agriculture and other traditional livelihoods, child and health care, domestic work, construction, restaurants, street vending, tourism or as sex-workers? What specific efforts have been made to assess and mitigate the relevant health and social-economic risks to these populations?

**Participation and consultation**

* What decision-making processes were used to adopt measures to respond to the pandemic? Did they include participation of local and decentralized authorities, including indigenous authorities, scientific experts, and civil society organizations?
* If emergency regulations have been imposed, to what extent have they affected official processes ensuring public participation and consultation? Have women and groups particularly affected by the pandemic and the response measures participated in such decision-making processes?
* What participation and consultation methods have been employed in preparing and implementing re-opening strategies or after emergency regulations have been lifted?

**Awareness raising and technology**

* What awareness-raising activities have been undertaken by the State to inform groups in vulnerable situation, indigenous people and other populations living in remote or conflict-affected areas of health risks associated with COVID-19?
* Have public officials and law enforcement officials been trained and briefed with regards to the overall human rights impact of the pandemic, and the situation of groups in vulnerable situation during and after the crisis?

**Internet**

* The internet and social media were increasingly used for work, education, shopping for food and other goods, awareness raising sharing of information, freedom of expression, religious ceremonies, cultural and social interaction, consultation and political decision making. What challenges and obstacles has the pandemic highlighted in terms of access for all to internet? Has the recent situation given rise to increased violations of human rights, mobbing and bullying online? If so, how was this addressed?
* What approach have the relevant authorities taken to monitor online information related to the pandemic? Have some contents been removed from the internet? If so, what criteria were applied to decide that the specific contents should be erased? Have specific measures been implemented against hate speech in cyber-space?

**Accountability and justice**

* Could you kindly highlight key concerns in complaints received by national human rights institutions, ombudspersons, anti-discrimination bodies in relation to the COVID-19 crises and how they have been addressed?
* National Human Rights Commission of Korea (hereinafter ‘NHRCK’) has received 149 cases of complaints related to COVID-19 crisis (as of May 13, 2020). The reasons for the complaints vary widely, as follows:
	1. Confinements to the military and detention facilities;
	2. Restrictions on meetings with people, including families and lawyers;
	3. Restrictions on the uses of smart meeting systems and phones in detention facilities;
	4. Restrictions on medical goods, such as masks and the access to external medical care and treatments in detention facilities;
	5. Overcrowding in the detention facilities
	6. Discrimination against migrants in the emergency disaster relief funds and medical goods
	7. Not providing the legitimate convenience to people with disabilities, such as not providing sign language and relief funds
	8. Revealing sensitive personal information, such as gender, age, private movement, religion, etc
	9. Discrimination and hate on local people, such as not providing medical services or treatments
	10. Restrictions on peaceful assemblies
	11. Compulsion in workplaces related to COVID-19
* NHRCK only made emergent relief order on few cases about 2 to 3 cases, and has not made decisions on most cases. NHRCK has not investigated specific cases on its own authority. As a result, the investigations on the vulnerable groups, such as children, older persons, persons with disabilities, people in detentions and migrants, are not properly conducted
* Could you provide any account and statistics on the impact of the COVID-19 pandemic on the operation of the justice system, including law enforcement, the provision of legal assistance and the operation of courts? Which activities were temporarily suspended?
* Information related to the operation of the justice system has not been disclosed in detail. The information disclosed through the press is as follows:
	1. Lots of trials is being delayed
	2. Psychiatric evaluation and medical treatment procedures for the defendants have been suspended.
	3. Meetings with legal counsel in detention facilities are taken in the general meeting rooms, not special meeting rooms to ensure the confidential conversations
* Please describe measures taken by the justice system in your country in protecting individuals from human rights violations and abuse during or after the COVID-19 pandemic. What measures have been taken to prevent, investigate or prosecute a) arbitrary arrest and detention, b) gender-based violence, c) sale and sexual exploitation of children, d) contemporary forms of slavery, e) racial discrimination, or f) illegal evictions?
* No specific measures are taken by the State
* What measures have been taken to ensure access to justice, and provide accountability and redress for victims of hate-speech, racism, racial discrimination, xenophobia, and related intolerance during the pandemic?
* No specific measures are taken by the State
* What has been the impact of this situation on women's access to justice? Are courts open and providing protection and decisions in cases of domestic violence, and are protection orders accessible?
* According to Korea Women’s Hot Line, the counseling rate of domestic violence has increased significantly from 26% in January to about 40% in February and March. Due to 'Social Distancing' measures such as closing domestic violence counseling centers and restricting face-to-face support for victims, blind spots for domestic violence victims are increasing.

Information on the decisions or protection order in cases of domestic violence in COVID-19 situation has not been disclosed. However, according to the past statistics, the arrest rate of domestic violence offenders is less than 1%, and the level of punishment is low, so it seems that the victim is reluctant to report in COVID-19 situations

Children are one of the most vulnerable groups exposed to domestic violence. It was revealed that a nine-year-old child in Cheonan, South Chungcheong Province, was trapped in a suitcase by his parents and died. Reports of child abuses are being hidden by COVID-19, but there is no effective prevention system.

* Have persons in situation of homelessness been fined, detained or prosecuted for non-respect of confinement or stay at home orders? How was this issue addressed in your country?
* Facilities are refusing to admit homeless people. And forced evictions on homeless people in public spaces are reported. The specific information, however, is not disclosed. However, it seems that there is no accurate understanding of the current situation.

The State has announced the policy of non-tolerance and strong measures against those who deviate from home isolations. The State also uses electronic bracelets to the people who deviate from home isolations without legal basis.

As investigation information is not being disclosed, it is difficult to find specific cases applied to homeless people, but NGOs are receiving cases such as those who investigated as a suspect for violating home isolation order due to poor housing conditions.

* In which way have restrictions for public or private meetings impacted on the freedom of expression and assembly? Have persons taking part in peaceful protest been fined, detained, or prosecuted for breaking national restrictions imposed for public or private meetings?
* Local governments designated a wide range of places as the places prohibited for assemblies by making public notices, not laws. The assemblies and press conferences are prohibited by the local governments’ public notices regardless of whether the assemblies and press conferences are peaceful or not. Participants can be prosecuted and fined under INFECTIOUS DISEASE CONTROL AND PREVENTION ACT. It was revealed that the police are investigating labours who participate the peaceful assemblies on May Day 2020.
* Are there public or parliamentary investigations under way in relation to the response of public authorities to contain the spread of the pandemic?
* No official public or parliamentary investigations are under way (as of June 20 2020)
* Please provide information on any alleged neglect, abuse, or serious violation of health regulations in health care institutions and institutions caring for older persons and persons with disabilities during the COVID-19 epidemic in your country?
* No accurate and comprehensive statistics are provided by the State on neglect, abuse, or serious violation of health regulations in institutions for older persons and persons with disabilities. However, there are serious concerns that older persons and persons with disabilities are facing more neglect and abuses in the institutions more during COVID-19 crisis.
* Older persons and persons with disabilities who are living alone fall in to the state of self-indulgence due to the suspension of care services that support their independent living. Since the state of self-indulgence also can be evaluated as neglect or abuses, the State should provide the appropriate measures.
* ‘Preventive cohort isolation’ on the institutions for the older persons and persons with disabilities are taken as a administrative actions by many local governments. And many institutions are operated as isolated. These circumstances are increasing the risk of abuses and neglects on older persons and persons with disabilities who live in the institutions.
* What measures have been taken by public and judicial authorities to address such allegations and to establish accountability, if applicable? Have any disciplinary, public inquiries or court cases been initiated, including against managers of the institutions concerned?
* Information on the decisions on neglects and abuses on older persons and persons with disabilities under COVID-19 situation has not been disclosed. However, according to the past statistics and trend, only the light punishments are given to perpetrators who abuse and neglect older persons and persons with disabilities.
* Could you kindly share information on emergency regulations and COVID-19 response measures that may have been reviewed or suspended by national or constitutional courts in your country?
* National courts and the Constitutional Court of Korea have not made any decisions to put the brakes on the State's emergency measures related to COVID-19. Rather, the court shows its perspective to support the State by making the decisions that justify government's emergency measures. For example, Seoul Administrative Court dismissed a case, which is the request for the suspension of execution on public notice that prohibit assemblies taken place in Seoul Plaza on 1 June 2020.

**Questions by the Special Rapporteur on extreme poverty and human rights**

The Special Rapporteur on extreme poverty and human rights, Mr. Olivier De Schutter, will examine the impacts of the COVID-19 crisis on people in poverty by assessing the extent to which the economic recovery plans adopted, in order to cushion the impacts of the economic recession, take into account the need to reduce poverty and inequalities. He will also examine the specific vulnerability of people in poverty to contamination.

In accordance with the ILO Social Protection Floors Recommendation No. 202 (2012), a national social protection floor is conceived as a basic set of rights entitling individuals to basic social security guarantees for health care and for income security for children, older persons and those unable to work, in particular in cases of sickness, unemployment, maternity, and disability. Do the economic recovery plans adopted include measures towards making progress towards establishment or strengthening of a national social protection floor?

* To prepare for the post-COVID-19, the State has announced plans to improve existing insufficient social security systems, including the ‘’National Employment Insurance System for all Nationals’ and ‘Introduction of Unemployment Assistance.’ However, the practical effect of the "National Employment Support System," which is referred to as "Korean-style Unemployment Assistance," is doubtful as it is designed not to be much different from the existing "Employment Success Package" system. Problems regarding the "National Employment Support System" include its short duration of support, the level of insufficient salaries, and, inter alia, the two-year mandatory employment period and age as eligibility criteria which lead to the exclusion of career-discontinued women, unemployed children, and older persons from the system. The State's plan to improve the social protection system is insufficient to establish a Social Protection Floor recommended by the ILO and other international standards.

Do the employment policies associated with the economic recovery plans take into account the specific situation of people working in the informal sector, and the need to improve working conditions in that sector as well as to extend formal social protection to them? Have such policies sought to increase the employability of groups that face specific barriers in their access to employment, for example, through demand-driven skills development and vocational training?

Have the economic recovery measures prioritized investments in education and skill development for women and girls, and in sectors where women make up a considerable proportion of the labour force (such as in export manufacturing)? Do they include gender budgeting to ensure that women benefit equally from public investments?

Have the tax reforms associated with the economic recovery plans sought to widen the tax base, by rebalancing the tax contributions of corporations and those in high-income brackets? Have the impacts of the introduction of new or higher taxes on those living in poverty been assessed?

The human rights principles of participation, transparency and accountability require States to create and maintain mechanisms by which individuals can meaningfully and effectively contribute to, provide feedback on and claim redress from policy measures that affect their enjoyment of human rights. Were any mechanisms established to allow people living in poverty to participate in the design, implementation and assessment of economic recovery plans?

* No systems or mechanisms allowing people living in poverty can participate in the design, implementation and assessment of economy recovery plans has been established. For example, the members of the Central Livelihood Security Committee, which has the authority to establish comprehensive plan for National Basic Living Security system and determine the level of benefits, are consists only of experts or researchers who majored in academics, those who represent the public interest, and public officials.

**Questions by the Special Rapporteur on the right to food**

The thematic report of the Special Rapporteur, Mr. Michael Fakhri, to the General Assembly will focus on international trade. The report’s main objective will be to identify the limits of the current international food system, explore to what extent the WTO is still suitable, and propose principles and mechanisms for a new food system. COVID-19 highlights the pre-existing weaknesses and inequities of the current system, but also provides a way to find new paths forward.

1. To what extent, and how, were international and domestic food supply chains disrupted during the pandemic? What were the measures taken by national, federal, provincial or local governments? Did authorities close particular local markets or impose export restrictions on certain goods? What was the reasoning for the actions taken by the respective authorities?

2. What measures did national, federal, provincial or local governments put in place to ensure access to food for the individuals in vulnerable situations such as older persons, children, women, rural communities, LGBT persons, national or ethnic, cultural, religious and linguistic minorities, and indigenous peoples?

3. What were the conditions under which food workers such as agricultural labourers, store workers, transporters, cooks, and shopkeepers had to work? What measures did national, federal, provincial or local governments put in place to ensure the safety and welfare of these workers? Were any special provisions and protections made for migrant workers?

1. Can you provide examples of any other measures taken by national, federal, provincial or local governments in your country to prevent hunger during the pandemic and in its aftermath?

**Questions by the Special Rapporteur on the right to adequate housing**

The report of the Special Rapporteur on the right to adequate housing, Mr. Balakrishnan Rajagopal, to the General Assembly focuses on the impact of the COVID-19 crisis on the right to housing. It will analyse measures taken to prevent and stop evictions during and in the aftermath of the crisis and to protect groups at risk of marginalization, including persons living in situation of homelessness and in informal settlements. The report will discuss whether emergency measures implemented may have had discriminatory outcomes, map out emerging good practices to counter them by local and national governments, and analyse medium and long term interventions required to protect during and after the crisis the right to adequate housing for all.

1. Please elaborate on measures taken by national, federal, provincial or local governments to ensure persons are protected from the virus at their home or place of living:
2. Has your country declared a prohibition on evictions? If a prohibition was declared, indicate its legal basis and how long it will last. Please specify if it is a general prohibition and if it also applies to persons living in informality or in informal settlements. Is the prohibition of evictions restricted to tenants or mortgage payers who have been able to pay their rent or serve their mortgages, or broader?
3. If no general prohibition on evictions was declared, please indicate how many evictions have taken place, the number of people affected, and the specific details of time, location and reasons.
* At the development areas such as Cheonho-dong, Gangdong-gu, Seoul, March 30, April 24, April 25, Dong-in-dong, Daegu-si, April 27, Deokhyeon-dong, Anyang-si, and Bangbae-dong, Seoul on May 11, and Noryangjin fish market on June 16, there have been forced evictions to mobilize hundreds of violent laborers and heavy equipment such as sprinklers and cranes. There was no forced eviction to mobilize the service in the eastern area of ​​Yangdong, Seoul, which is bound as a development zone, but homeowners are urging the eviction of the residents due to the deadline for July to proceed with development. It is believed that more people have been evicted from other areas than those above, but the number of people who have been evicted is not accurately counted. Korean society's greedy development policy and violent forced evictions, which are being pursued for more development profits rather than stable resettlement of residents, have been a problem before COVID-19. Even in the COVID-19 crisis, the existing profit-oriented development policy is maintained and applications for protests by residents are rejected, while execution requests for deportation are being approved.
* Forced deportation due to overdue rentals is not prohibited. There are no investigations or statistics. Mr. Kim, who lives in the LH rental apartment in Gwangmyeong, Gyeonggi-do, was forced to deport on May 7, after he ran out of security deposit due to monthly rent. Since then, he has been living in an inn with 5 families including himself.
* The eviction measures for the homeless people in public places are getting worse and expanding in COVID-19 situation. On May 6, KORAIL closed the waiting room in Busan Station at late-night hours by the Gyeongnam headquarters in Busan. Even in Seoul Station, chairs used by the homeless people in the waiting room were closed or covered by safety belt. In mid-May, the entrance to the tent village located at the railway site of Yongsan Station was blocked with iron plates without any prior notice or explanation. In addition, eviction measures continue in homeless areas such as the Express Bus Terminal Station. These evictions are being carried out under the name of COVID-19 safety measure. In addition, a garbage truck was mobilized by Jung-gu Office in Seoul on May 22 to dispose of the homeless luggage at Seoul Station square where the homeless people reside. In the case of executive execution, prior notice must be made. But all of these happened without prior notice.
1. Have any measures been taken to ensure that households are not cut-off from water, heat or other utility provision when they are unable to pay their bills?
2. Please provide any information about other legal or financial measures aimed to ensure that households do not lose their home if they cannot pay their rent or mortgage payments? Have any other tenant protection measures been adopted in response to the pandemic?
* On March 16, LH suspended the rent for 6 months for 133,000 households residing in public rental housing and made installment payment available for one year. For 85,000 households residing in permanent, national, happy, and lease rentals in the Gyeongbuk area of ​​Daegu, 50% of the rent was reduced for 3 months. However, no other measures were taken to protect residents in general rental housing.
* Loan programs have been implemented for self-employed persons, but this is not a fundamental measure against the situation in which income falls or stops. On the contrary, the government is implementing measures, the “good landlord” campaign”, to provide the landlord with the amount of 50% as a tax benefit if the landlord discounts 50% of the rent to the lessee. It shows the behavior of protecting the landlord’s unlabored income by encouraging debt to the lessee.
1. What measures have been taken to protect persons living in informal settlements, refugee or IDP camps, or in situation of overcrowding from COVID-19?
* No measures have been taken to protect people living in informal residences. Rather, as in response of above 1-b, Yongin and the government are leading the eviction of the people in the slum area bound to the development area and the eviction of the poor people in public area.
1. What measures have been taken by authorities to ensure that migrant and domestic workers housed by their employers continue to have access to secure housing during the pandemic and in its aftermath? If migrant workers left their place of work to return to their place of origin, what measures were taken to ensure their right to housing?
* There are no measures to provide housing for homeless due to the COVID-19. Rather, it is preventing new homeless people access to the homeless support system by excusing the COVID-19. In the case of foods, it is difficult to access foods, as most of the food providers are closed during the spread of COVID-19. It is due to the fact most of the food providers are privately operated based on the volunteerism such as religions rather than the public operation, which can ensure the sustainability.
1. Have any measures been taken to provide safe accommodation for persons in situation of homelessness? If yes, how many persons were housed, in what form, where and for how long? How will it be ensured that persons provided with temporary accommodation will have access to housing after the crisis?
2. Can you provide examples of any other measures taken or planned by national, federal, provincial or local Governments in your country to protect the right to adequate housing during the pandemic and in its aftermath?

**Questions by the Special Rapporteur in the field of cultural rights**

The next report to the Human Rights Council by the Special Rapporteur in the field of cultural rights, Ms. Karima Bennoune, will focus on the impact of the COVID-19 crisis on the exercise of cultural rights and on the role of culture and cultural rights in responding to the pandemic.

1. What have been the impacts on cultural rights and on cultural life\* of:
2. the pandemic?
3. measures taken to respond to the pandemic?
* Impacted by the COVID-19 pandemic, the cultural rights of artists and cultural arts audience were violated with cultural events such as plays, concerts, performances, art exhibitions, and the opening of movies were cancelled and their production being postponed indefinitely. As consumption of culture and arts has decreased, the economic damage of the cultural industry has increased, and the difficulty of livelihood of cultural and artistic workers has continued. There is much skepticism about whether the damage suffered by the culture and arts industry will be recovered due to the shrinking consumer sentiment and anxiety over the COVID-19. Ordinary citizens who enjoy culture and arts are also under great restrictions on accessing, participating, and enjoying cultural life, such as going to movie theaters.

*\* Cultural rights include the rights to take part in cultural life without discrimination, to access and enjoy heritage, to artistic and scientific freedom, and to benefit from scientific knowledge and its applications. Cultural life includes performing arts, museums, heritage sites, sports and public spaces used for a variety of cultural and social gatherings*.

1. What efforts have been made to guarantee the exercise of cultural rights, in accordance with the requirements of public health? How has the message that cultural life must be enjoyed in ways that respect public health and medical expertise been communicated?
* Around February 2020, closure or shutdown of cultural facilities were carried out as the government’s positive measures of implementing social distancing. By March 2020, the government imposed obligation duty to each individual facility to take measures including checking for symptoms such as fever, coughing, equipping epidemic-preventing goods such as hand sanitizers, encouraging the wearing of masks, disinfecting performing arts venues before and after the performance, and maintaining two meters of distance between each audience and between the audience and stage during the performance. In the case of art exhibitions, the pre-booking system was introduced. Like performing arts venues, movie theaters were required to arrange seats while maintaining distance from one another.
* Nonetheless, Cultural and artistic workers are in grave concern since the public are reluctant to visit cultural facilities such as theaters due to the anxiety formed by the COVID-19.
1. What roles have culture and cultural rights played in responding to the pandemic:
2. At the individual and collective levels, including in building resilience and solidarity, and memorializing victims?
3. At the scientific level, to provide adequate information to inform public policy and ensure public awareness?
4. In any other relevant manner?
5. What steps have been taken to mitigate the impacts of the pandemic, and of measures to counter the pandemic, on the cultural sector and on the human rights of those working in it (including artists, athletes, cultural heritage professionals, cultural workers, librarians, museum workers and scientists)?
6. How have the cultural sector and those working in it adapted to the pandemic? How have these adaptations been received by the public and how have they been supported, including financially? Are there sectors of the population that may risk exclusion from such adaptations?
7. What kind of measures will be necessary to rebuild the cultural sector going forward? How will inclusion be addressed?
8. Has your Government already envisaged / announced specific measures to support the culture sector during and after the pandemic? How will relevant constituencies participate in their development and implementation?
* Questions have been raised over whether the COVID-19 response measures have been carried out in a way that respects cultural rights. Some local governments caused controversy by sending out messages saying, "If [COVID-19] confirmed cases appear while pushing ahead with the performance, [the government] may claim recourse amount for expenses for diagnosis, treatment, and disinfection of confirmed patients and their contact persons.”

Entities such as small theater companies, small theaters with less than 100 seats in the audience, and independent movie theaters are significantly suffering from the economic damage they have to endure from arranging of seats with certain distance due to insufficient financial support.

The central government and local governments are in the process of establishing support measures such as providing epidemic-preventing goods to artists, art spaces, art organizations, and small-scale performing venues, providing emergency living loans and funds for creative activities for artists, and supporting rental fees and production costs for performance organizations. However, it is questionable whether such measures are sufficient and effective. Above all, no investigation or survey has been conducted to identify the damages of cultural artists or organizations suffered due to the COVID-19 (types and cases of damage, scale of damage, etc.), making it hardly possible to establish effective countermeasures based on actual damages.

As the period of suffering damages caused by the COVID-19 extends, cultural artists are speaking up about their lives getting difficult as well as related organizations being unable to continue their operations. In particular, the closure of cultural facilities such as movie theaters has raised the issue of job insecurity of the workers in the related sector.

Policies that reflect the specificity of the culture and arts sector need to be established, such as the fact that the impact of the COVID-19 on the basic arts field is greater than that of other areas, and that most people in the culture and arts industry are living in the form of freelancers. It is also necessary to establish policies that have the nature of direct support to meet the needs of artists in crisis. However, there is no systematic participation structure that can reflect the demands of cultural and artistic workers in the process of policymaking.

1. Have scientific and medical experts been able to express themselves freely about the pandemic, its impacts and needed responses? What measures have been taken to address the denial of scientific information about the pandemic, and to ensure access to reliable scientific information to guide policymaking and personal choices.

**Questions by the Independent Expert on the human rights of older persons**

The report of the Independent Expert, Ms. Claudia Mahler, will focus her report to the General Assembly on the impact of the COVID-19 pandemic on the enjoyment of the human rights of older persons. The report aims to highlight the challenges for the rights of older persons in the current national and international legal framework. It will analyse different risks to older persons human rights which were exacerbated and heightened and made more apparent during the pandemic. Ageism and age discrimination have continued, together with violations to older persons’ right to health and care service support, including their right to life, their right to information, their right to live free from violence, abuse and neglect, and their right to participate and to social inclusion. The report will provide best practices and case studies.

1. Please provide more information on the situation and measures taken in state run or financed facilities with a focus on the needs of older persons with underlying health conditions. Please provide any information concerning shelters for older women to protect them from abuse or from homelessness.

* In South Korea, many nursing homes and nursing hospitals are operated with financial support under the long-term care insurance and national health insurance for older persons. Many of these nursing homes and nursing hospitals have been keeping cohort isolation policy since the COVID-19 pandemic outbreak, with virtually no outside visits and no access in and out of the facility for older persons (related article: ["Parents' Day nursing homes and nursing hospitals prohibited from visiting..."Too early to convert to eased distancing"](https://newsis.com/view/?id=NISX20200506_0001015228&cID=10201&pID=10200)[[4]](#footnote-4)). Despite the above extreme efforts to prevent the COVID-19 infections in facilities such as nursing homes, some facilities have failed to prevent the epidemic, resulting in infection clusters. Nonetheless, no statistical data by the government is available on the COVID-19 infections among senior citizens in facilities. The outbreak of mass infection by individual facilities is only being disclosed.

Until now, cluster infections within facilities continue to occur including 32 people in facility A in Bonghwa, North Gyeongsang Province, 13 people in facility B, 8 people in facility C, 3 people in facility D in Gyeongsan, North Gyeongsang Province, 10 people in facility E in Gwangju, Gyeonggi Province, 14 people in facility F in Dobong-gu, Seoul, and 123 people in facility G in Daegu.

In addition, proper treatment for chronic diseases of each older person is not provided under the de facto cohort isolation. It is believed that the risk of the COVID-19 transmission in the facility may increase if older persons living in the facility goes out to get treatment for chronic diseases. So, unless urgent, older persons living in facilities are only taking medication through non-face-to-face prescription. Other basic living conditions of older persons in facilities such as going out and enjoying leisure activities are all restricted.

2. Please provide information how and how many older persons called for assistance, help or made official complaints during the pandemic.

3. Please provide information on reports, speeches and measures which had a special focus on older persons during the pandemic. Please include best and bad practices.

* There is no particular official report that sheds light on the situation of older persons in South Korea. Yet, below are some of the main features of information regarding press releases and measures taken:
* The daily briefing by the South Korean government including the status of the COVID-19 infections by age[[5]](#footnote-5) ([link to the press release webpage](http://ncov.mohw.go.kr/tcmBoardList.do?brdId=3&brdGubun=)).
* Ministry of Health and Welfare, press release, Social Services Agency playing a significant role in the public sector as emergency care services at the forefront of the COVID-19! (April 22, 2020)[[6]](#footnote-6)
* Ministry of Health and Welfare, press release, The Ministry will check older persons' COVID-19 symptoms through visits and phone call health check-ups (April 7, 2020)[[7]](#footnote-7)
* Ministry of Health and Welfare, press release, The Ministry will focus our efforts on prevention of the COVID-19 and also take care of the social safety net (March 2, 2020)[[8]](#footnote-8)
* Ministry of Health and Welfare, explanatory information on news article, Regarding report on low-income families [The Joong-Ang Ilbo, February 28] (February 28, 2020)[[9]](#footnote-9)

4. Please provide examples how older persons have participated in decision-making processes during the pandemic. Please describe how their perspective and needs have been integrated in national policies and programmes on the way to recovery from COVID-19 to make it a more inclusive and age friendly society.

* In South Korea, older persons are not often directly involved in policies regarding older persons. This was the same during the Pandemic. There are hardly no opportunities found for older persons to participate or to reflect their needs in the process of policy-making for the prevention and overcoming of the COVID-19.

**Questions by the Working Group on Persons of African Descent**

The Working Group of experts on people of African descent will focus its annual report to the 45th session of the UN Human Rights Council on the impact of COVID-19 and the response to the pandemic, on the human rights of people of African descent.

1. What measures have been taken to assess and address the impact of COVID-19 and associated efforts on people and communities of African descent in the country? For example, is data disaggregated on the basis of race being kept on infection, severity, recovery, and availability and access to both health and non-health resources and interventions? Are economic stimulus, public health, and health care efforts related to the pandemic penetrating communities of African descent and what data supports these conclusions?

 2. What measures have been taken to explicitly ensure bias is not motivating medical and policy decisions during this pandemic?

3. What measures have been taken to ensure the impact of the COVID-19 pandemic does not disproportionately fall to people of African descent? This question includes (a) the impact of infection, (b) the impact of new or existing policy, including access to health care and social safety net, and (c) the non-infection impact (like loss of livelihood and income).

4. Given the particular 'social invisibility' of people of African descent in many countries, what measures have been taken to ensure that the unique needs of people of African descent – with respect to both health and policy - are fully understood? What planning has taken place to address these unique needs of communities of African descent during this pandemic?

5. What representation by people of African descent exists in high-level decision making relating to this crisis? What specific efforts have the State used to ensure adequate expertise, and understanding to responsibly plan on behalf of communities of African descent? What measures have been taken to ensure equal protection, including ensuring that interventions that appear neutral on their face do not license or facilitate racial bias and stereotypes?

6. What protection efforts have centred public health issues specific to people of African descent? How have States leveraged existing civil society expertise to define key concerns and to effectively implement policy with respect to people of African descent? How have concerns and assessments relating to people of African descent impacted research and knowledge production agendas developed in response to the COVID-19, including to investigate specific barriers to care, or recognize the racially discriminatory intent or impact of policy?

7. To what extent do people of African descent have access to justice in the time of the pandemic? What remedies are available to people of African descent for the racism, racial discrimination, xenophobia they face in the midst of COVID-19? What independent investigations are conducted for the racially motivated violations of their human rights? What sanctions are imposed on responsible entities and individuals? Please provide examples.

**Questions by the Special Rapporteur on the rights of indigenous peoples**

The Special Rapporteur on the rights of indigenous peoples, Mr. José Francisco Cali Tzay, will present a report to the General Assembly in October 2020.[[10]](#footnote-10) The report will examine how to ensure effective protection of indigenous peoples, who may be at greater risk of negative impacts on their human rights both from the virus and States’ responses to it, while guaranteeing their right to autonomy and self-determination.

The report will also seek to help States avoid impunity for violations and abuses of indigenous peoples’ rights by States or businesses, related to the pandemic. The Special Rapporteur will also present examples of good practices of indigenous participation in implementing innovative responses to the pandemic that include the vision and approaches of indigenous peoples.

1. How has your Government assessed and redressed potential disproportionate impact of the virus on the health of indigenous peoples, and avoided contamination in remote communities? What measures were taken to ensure access to information, health care and other forms of urgent assistance for remote communities? How were such measures adapted to the cultural and other specific characteristics of indigenous communities?
2. Has your Government observed any disproportionate impact of the pandemic and measures in response, on indigenous peoples’ access to traditional livelihood, food and education, or the right to be consulted and provide consent in the context of development and business operations on their territories?
3. How has your Government supported indigenous peoples in their own initiatives to fight the pandemic, protect health and provide assistance in their own communities?
4. How are indigenous peoples ensured a role in shaping the national COVID-19 response to avoid discriminatory effects on their communities and including their actual socio-economic and cultural requirements in recovery programmes? How is their input sought and respected in all relevant programs that could affect them?
5. What measures have been taken to protect the lands, territories and resources of indigenous peoples against potential increased militarization and land-grabbing by external actors during the pandemic, including when indigenous people’s mobilization may be restricted by lockdown and quarantine?

**Questions by the Special Rapporteur on contemporary forms of slavery**

The thematic report of the Special Rapporteur on contemporary forms of slavery, Mr. Tomoya Obokata, to the Human Rights Council at its 45th session in September 2020 will analyse how increasing poverty and rising unemployment caused by the COVID 19 health crisis push people into exploitative employment in informal or illegal economies, increasing their vulnerability to forced labour, worst forms of child labour and other slavery-like practices such as bonded labour, as well as forced marriage. The impact on those who are already in a situation of enslavement will also be highlighted, given that resources for anti-slavery initiatives may be further limited in the context of the economic crisis, likely disrupting services for the prevention and response to contemporary forms of slavery. Finally, the report will offer recommendations with regards to interventions that are required to address these problems and to protect most vulnerable groups.

1. What is the impact of the COVID-19 crisis on contemporary forms of slavery, including descent-based slavery; forced labour; debt bondage; serfdom; sexual slavery; commercial sexual exploitation of children; child labour; domestic servitude; and servile forms of marriage?
2. What steps have been taken by the Government to reduce increased risks of contemporary forms of slavery in the context of the outbreak? Please, share any good practices and identify persistent challenges, including with regards to prevention; identification of victims; provision of access to recovery and rehabilitation services; and investigation and prosecution of slavery-related crimes.
3. Are there indications of an increase in the number of people employed in informal or illegal economies since the outbreak of the pandemic? Are there reports of forced labour and exploitative labour practices in such business sectors, such as long working hours, low pay, no adequate time to rest, and no holiday pays, etc.?
4. Has there been engagement with business entities and other stakeholders to develop joined strategies on reducing the risk of vulnerable workers in their operations and supply chains becoming exposed to contemporary forms of slavery in the context of the pandemic.
5. Since the outbreak, has the Government continued investigating and prosecuting human rights violations related to decent-based slavery; forced labour; debt bondage; serfdom; sexual slavery; commercial sexual exploitation of children; child labour; domestic servitude; and servile forms of marriage?
6. In light of the Sustainable Development Goals and global commitments to eradicate slavery (target 8.7) and measure progress in this area, has the Government been able to ensure timely collection and analysis of disaggregated data? If available, please share the data collected in the first quarter of 2020, including information regarding the number, age, gender and nationality of identified victims; number of prosecution of perpetrators; types of services provided to the victims; industries where victims were identified. Has any of these data significantly varied from previously recorded trends due to factors related to the COVID-19 pandemic?

**Questions by the Special Rapporteur on the sale and sexual exploitation of children**

The report of the Special Rapporteur on the sale and sexual exploitation of children will explore how the COVID-19 crisis threatens to further erode the situation of children most vulnerable to sale and sexual exploitation. The report will focus on identifying push and pull factors, scaling up good practice, and providing recommendations on the measures to address the heightened risks of sale and sexual exploitation of children, during and in the aftermath of the pandemic. The recommendations of the report will seek to: operationalize the pledges made under Agenda 2030 as far as they relate to SDG targets 5.3, 8.7 and 16.2. and ensure implementation of effective child protection responses arising in the context of emergencies.

1. What is the impact of COVID-19 crisis on the nature and scope of various manifestations of sale and sexual exploitation of children, including sexual exploitation and abuse of children, both online and offline; child marriage; trafficking of children; surrogacy and sale of children; illegal adoptions and child labour?
* What are the new forms and manifestations of sale and sexual exploitation of children in the context of COVID 19 crisis?
* What are the key trends and accelerators in the context of the pandemic that may increase children’s vulnerability to the sale and sexual exploitation?
1. What essential protection measures, , including identification, reporting, referral and investigation, have been put in place to detect and prevent child sexual abuse and exploitation cases and how effective have they been since the outbreak?
2. Have there been any initiatives on collecting disaggregated data on specific forms and manifestations of sale and sexual exploitation of children during the pandemic and assessing the near and long-term impacts of COVID-19?
3. Please, share information about challenges faced in the provision of undisrupted healthcare, education and legal aid, as well as care recovery and reintegration services for the victims in the context of the outbreak.
4. Have there been examples of innovative solutions to ensure effective functioning of child protection and justice systems that are resilient, adaptable and able to withstand the next crisis?
5. How relevant and functional were the existing legal frameworks dealing with prohibition, prosecution, protection, care, assistance and prevention in relation to all forms of physical, mental and sexual violence against, exploitation and neglect of, and harmful practices in relation to children?
6. Has there been a surge of resource allocation, actions plans or coordination mechanisms, prevention and response services for the protection of children from all forms of violence, abuse and exploitation?

**Questions by the Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity**

The report of the Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity, Mr Victor Madrigal-Borloz, will be presented to the General Assembly in October 2020. It will focus on the impact of the COVID-19 pandemic on the human rights of lesbian, gay, bisexual, trans, and gender diverse (LGBT) persons, communities and/or populations. It will build on consultation and research processes triggered since the start of the pandemic, and also the work of States and civil society to create an LGBT-inclusive response to the health crisis. It will analyse the particular circumstance of LGBT persons who are living with disabilities, older persons, youths and children, migrants, minorities, those affected by poverty and homelessness, as well as those who face health challenges. The report will further analyse measures adopted in the context of the pandemic, aimed at persecuting LGBT persons, with indirect or unintended discriminatory effects, and identify and analyse good practice.

1. How did the State evaluate the situation of LGBT persons vis-à-vis the pandemic and potential specific vulnerabilities?
* In the early days of the pandemic, the Korean government and regional government had no special interests in LGBT persons. It had not provided special measures. However, as early as in May 2020, LGBT discrimination arouse as an issue since cluster infection was centered around Itaewon area. This is because the Itaewon area is where many of LGBT persons live or visit, and the index patient dropped by Itaewon clubs popular for sexual minorities. In the situation, some media reported that ‘the infected dropped by gay clubs’, which intensified aversion and stigma against the sexual minorities. As a result, the government began to understand that sexaul minorities who visited Itaewon area may not be screened for fear of revealing sexual orientation and gender identity, and prepare countermeasures to diminize the fear. On the other hand, however, the government and regional governments did not understand the specific vulnerabilities of LGBT persons. Incheon City tried to collect a list of LGBT persons. Seoul City responded that it was difficult to give special treatment to a specific group to give a message of non-discrimination in an initial meeting with the LGBT group.
1. What measures were adopted by the State to ensure that LGBT persons would not be subjected to discrimination in the implementation of COVID-19 related interventions?
* Seoul City conducted an anonymous test to encourage LGBT to screen without of fear of revealing sexual orientation and gender identity after the cluster infection in the Itaewon area, and actually checked only with serial number and mobile phone number without information such as name and address. In addition, it also conducted the test to anyone, who visited Itaewon area at the time not only the clubs.  Subsequently, anonymous test has been expanded to the whole country by the Central Disaster and Safety Countermeasures Headquarters. There was also a public message that there should be no discrimination against the sexual minorities in the government and regional governments’ briefing. Meanwhile, in the case of Seoul City, a consultation window (hot line) was opened in connection with LGBT groups, and human rights violations were reported in the medical examination and treatment process. Of these, corrective actions were taken not to ask if they are infected with HIV during the test process, and to improper attitudes of inspectors.

However, despite these measures, some regional governments (city, county, district) continued to disclose the gender, age, place of residence, workplace name, and detailed movements of the confirmed patients and to publicly reveal the information by disaster warnings text messages. In addition, there was a case which one of the governments informed the patient’s company the fact of visiting clubs

1. Did LGBT civil society participate in the design of measures taken to respond to the pandemic? If no, why not?
* LGBT groups and HIV groups formed a ‘COVID-19 Sexual Minorities Emergency Headquarters(Queer Action Against COVID-19)’ after the cluster infection in the Itaewon area, and communicated with the quarantine authorities. It met the Central Disaster and Safety Countermeasures Headquarters, Seoul City, and Gyeonggi-do to talk about the vulnerable situation of LGBT, and advised on sending discrimination messages, expanding anonymous inspections, and changing the way of public informing the movement of the patients. As a result of this communication, the government and regional governments have been able to take action to ensure that LGBT can be examined without discrimination. However, in addition to the basic policy direction, participation was difficult due to the limited channel of discussions regarding specific policy making and implementation.
1. What is the information available to the State as to the impact of the COVID-19 pandemic on the general situation of LGBT persons and their access to education, housing, health and employment and on their living conditions?
* None. There are no official statistics related to LGBT in Korean society. A survey conducted by the National Human Rights Commission of Korea in 2014 is the only one state-level LGBT survey. But this survey was conducted on a limited sample, and there is a limit in understanding the situation of the entire LGBT population. Since there are no separate statistics on LGBT, it is difficult for the government to understand the impact on LGBT by the pandemic.
1. Can you identify good practices in the State interventions in relation to COVID-19 and LGBT persons? Can you identify good practices stemming from civil society actions? Have lessons be learned from the pandemic on how not to leave LGBT persons behind in emergency situations?
* The anonymous test, which allowed the COVID-19 examination only by serial number and telephone number, helped LGBT persons to receive the check without fear. In fact, the number of people tested after the anonymous test has increased significantly.

In the case of the cluster infections sites, such as clubs, it can also be positively evaluated to change the method of public disclosure so that the name of the business is no longer disclosed after the initial confirmation is made.

These are the result of the ‘Queer Action Against COVID-19’ meeting with the government and regional governments to inform the situation of LGBT and propose necessary measures.

However, it is doubtful that the lesson from this pandemic on anti-discrimination against LGBT will continue after. Prior to the pandemic, the Korean government has not established anti-discrimination law that includes sexual orientation and sexual identities despite continued recommendations from the UN human rights organizations, and has never issued a public message on the prohibition of discrimination against sexual minorities. It is necessary to make continuous recommendations from international organizations such as United Nations so that the Korean government will not change its attitude again after the pandemic.

**Questions by the Special Rapporteur on the implications for human rights of the environmentally sound management and disposal of hazardous substances and wastes**

The Special Rapporteur on the implications for human rights of the environmentally sound management and disposal of hazardous substances and wastes, Mr. Baskut Tuncak, would welcome in addition responses to the following specific questions related to his mandate:

What evidence have you collected on environmental factors (such as exposure to hazardous substances and wastes, air and water pollution) that are contributing to serious or deadly cases of COVID-19?

Which initiatives and measures have been taken to understand such link and to currently address this problem?

**Questions by the Independent Expert on foreign debt and human rights**

The report of the Independent Expert on foreign debt and human rights, Ms. Yuefen Li, to the United Nations General Assembly will focus on debt servicing and debt sustainability of low-income and developing countries in view of the current COVID-19 pandemic and its impact on financing for development , economy, poverty and the right to an adequate standard of living. To inform her report Ms. Li welcomes contributions from States, International Financial Institutions, Regional Banks, national human rights institutions, civil society organisations, academics and other stakeholders, on the following issues:

1. Did your Government benefit or have been allocating (as a creditor, lender or donor) any forms of debt alleviation including debt standstill, relief, moratorium, restructuring or cancellation. Was human rights a major consideration in making decisions and the use of the financial resources? Were there any specific groups at risks identified and if so, please detail specific measures considered to protect their human rights.
2. How much additional resources have been deployed to deal with the pandemic and COVID-19 relief if applicable? If any forms of debt alleviation have been allocated/received, were there any adjustments made to social spending and COVID relief programmes, if so, please provide further details.
3. In addition, have the debt repayment requirements pressed your Government to cut some of the social expenditures, including on health? If so, do you think that this has hampered the current response of the health system to the COVID-19 crisis?
4. Going forward, what measures or policy recommendation are being considered by your Government/institution for economic recovery and debt sustainability and to prevent and mitigate human rights impacts of the COVID-19 economic fallout?
1. 『NHRCK Chairperson’s Statement on Excessive Disclosure of Private Information of COVID-19 Patients”』, (<https://www.humanrights.go.kr/site/program/board/basicboard/view?currentpage=2&menuid=002002001&pagesize=10&boardtypeid=7003&boardid=7605315> [↑](#footnote-ref-1)
2. 『Civil society statement] In response to COVID-19, digital rights should be respected.』, <https://act.jinbo.net/wp/42506/> [↑](#footnote-ref-2)
3. 『 [**Civil society statement] In the era of COVID-19, is S.Korea’s ‘new normal’ a digital surveillance state?**](https://act.jinbo.net/wp/43070/) 』, <https://act.jinbo.net/wp/43070/> [↑](#footnote-ref-3)
4. <https://newsis.com/view/?id=NISX20200506_0001015228&cID=10201&pID=10200> [↑](#footnote-ref-4)
5. <http://ncov.mohw.go.kr/tcmBoardList.do?brdId=3&brdGubun=> [↑](#footnote-ref-5)
6. <http://ncov.mohw.go.kr/tcmBoardView.do?brdId=&brdGubun=&dataGubun=&ncvContSeq=354159&contSeq=354159&board_id=140&gubun=BDJ> [↑](#footnote-ref-6)
7. <http://ncov.mohw.go.kr/tcmBoardView.do?brdId=&brdGubun=&dataGubun=&ncvContSeq=353960&contSeq=353960&board_id=140&gubun=BDJ> [↑](#footnote-ref-7)
8. <http://ncov.mohw.go.kr/tcmBoardView.do?brdId=&brdGubun=&dataGubun=&ncvContSeq=353273&contSeq=353273&board_id=140&gubun=BDJ> [↑](#footnote-ref-8)
9. <http://ncov.mohw.go.kr/tcmBoardView.do?brdId=&brdGubun=&dataGubun=&ncvContSeq=353242&contSeq=353242&board_id=145&gubun=BDH> [↑](#footnote-ref-9)
10. The full call for input is available at: https://www.ohchr.org/EN/Issues/IPeoples/SRIndigenousPeoples/Pages/Callforinput\_COVID19.aspx [↑](#footnote-ref-10)