COVID-19: Quarantine and human rights

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Madam, the Severe Acute Respiratory Syndrome (SRSS-COV 2) also known more widely as COVID-19, swiftly took over the entire world and caused great public health and socioeconomic harms.1 The World Health Organization declared it as a global pandemic. On May 2, 2020, it involved 213 countries and affected 3272202 people with mortality 230104 (7.03%).2

Worldwide, over 100 states implanted the policies of partial or complete lockdown measures to minimize the spread of the COVID-19 pandemic. Due to this unpredictable turn in events, the travel system has been paralyzed and about 3 billion people are stranded in their homes.3 No doubt, these quarantine steps are to minimize the transmission of this deadly contagious disease. However, we also cannot neglect the adverse impact of self-isolation and quarantine on the public health, psychological distress and mental health issues including depression.4

The COVID-19 pandemic rises to the level of a public health threat that could justify imposing restrictions on certain human rights, such as those that result from the imposition of quarantine or limiting freedom of movement. Taking into careful consideration, special attention is required to protect every individuals human rights including non-discrimination, transparency and respect for human dignity in every country. Human Rights are essential in shaping the pandemic response, and adopting extensive lockdown measures could breach the rights under Article 8 of the European Convention on Human Rights.5 While this is also strongly supported by the first part of the Constitution of Pakistan which lies upon the basic right of liberty for everyone,6 and thus measures need to be taken to mitigate any consequences of violation of rights.

On March 16, 2020 the United Nations Human Right office, announced that states should not abuse emergency measures to suppress any human rights. The COVID-19 outbreak emergency measures should not be used as a basis, to target particular groups, minorities or any individuals. The constraints taken in response to COVID-19 pandemics must be motivated by legitimate public health objectives and should not be used simply to suppress disagreements.7

The highly restricted quarantine steps and complete travel bans in a haphazard and disorganized manner, may hamper the policy control authorities to achieve the desired objectives. The lockdown is difficult to sustain in developing nations, especially amongst the societies, who earn on a daily basis. In these situations, the fundamental rights are severely impaired and are being violated.

The states must ensure everyone has access to food, testing and treatment, and no one is denied the basic health care facilities because people cannot. This discrimination can affect access of people for testing and treatment objectives. The state should also ensure that financial barriers should not prevent people from accessing testing and treatment for COVID-19. Moreover, governmental officials must ensure that COVID-19 pandemic allied health crisis and quarantine crisis does not also become a human rights crisis. Lastly, the authorities must pursue to return to a normal lifestyle and must avoid excessive use of emergency powers for an indefinitely long period.

Conflicts of Interest: The author declare no conflict of interest.

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