Contributions to the UN Office of the High Commissioner for Human Rights for its report to the UN Human Rights Council regarding the impact of the COVID-19 pandemic on the enjoyment of human rights around the world

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Information about this submission

1. On 5 October 2020, the UN Office of the High Commissioner for Human Rights (UN-OHCHR) requested the International Law Training and Research Hub, the University of Tokyo (UOTIL Hub), to make ‘contributions concerning promising/good human rights practices in response to COVID-19 and the recovery’ in Asia, by a letter with a reference number: OHCHR/TESRPRD/DESIB. This request was pursuant to the cooperation agreement between the UN-OHCHR and UOTIL Hub, following the Statement by the President of the Human Rights Council on human rights implications of the COVID-19 pandemic (PRST 43/1) of 29 May 2020.

2. UOTIL Hub has researched on good practices from the following countries and territories: Afghanistan, Bangladesh, Bhutan, Brunei, Cambodia, China, Hong Kong, India, Indonesia, Japan, Laos, Malaysia, Maldives, Mongolia, Nepal, Pakistan, Philippines, Republic of Korea, Singapore, Sri Lanka, Taiwan, Thailand, and Vietnam. The first phase of research was between June and August 2020, where six student researchers collected information from publicly accessible sources, chiefly information available on the internet.\(^1\) In searching for information, UOTIL Hub’s and personal networks of the team were resorted to. Languages used for searching for information are: English, Japanese, Chinese Mandarin, Korean, Nepali, Hindi, and Taiwanese Mandarin. Information on good practice was inserted in a database created by the UN-OHCHR. A total of 129 entries were recorded in the database during the first phase of research (Afghanistan: 2; Bangladesh: 13; Bhutan: 4; Brunei: 2; Cambodia: 5; China: 8; Hong Kong: 4; India: 3; Indonesia: 4; Japan: 10; Laos: 6; Malaysia: 3; Maldives: 4; Mongolia: 4; Nepal: 1; Pakistan: 6; Philippines: 17; Republic of Korea: 2; Singapore: 8; Sri Lanka: 8; Taiwan: 3; Thailand: 7; and Vietnam: 5). In identifying good practices, the UOTIL Hub team used the indicator provided by the UN-OHCHR, as follows:

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\text{[e]ffective actions (or sets of actions) which are in compliance with international law, including international human rights norms and standards, contribute to the enjoyment of human rights, demonstrate sustainable results through quantitative and/or qualitative evidence of positive impact, and have the potential to be successfully adapted and replicated in other contexts.}
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3. In collecting information, particular attention was paid to the extent to which such practice benefited (a) marginalized or vulnerable group(s).

4. All information that appears in this submission has been derived from publicly available information on the internet. Therefore, no issue arises with making this submission public.

Preliminary Analysis of Best Practice

5. It is very apparent that plentiful and diverse actors took action alongside the national and local governments to ease the negative effect of the COVID-19 pandemic itself and related restrictions. Reported actions generally took the form of providing services, either newly-instituted, or an expanded or modified form of an existing practice. Actors include non-governmental organizations, self-help networks, cooperatives, trade unions, academic institutions and youth groups. In particular, it is noteworthy that business entities were very much responsive to the situation. Also noted is the involvement of actors that are more loosely connected than established organizations.

6. A youth-led volunteers’ network in Nepal may illustrate such a network. Hundreds of self-help groups and volunteers were led by youth, who have spread a series of food bank campaigns

\(^1\) The following student researchers made contributions: Amishi Agrawal, Raymond Andaya, Tong Fei, Paul Namkoong Hwa, Dinesh Joshi, and Chihiro Toya. Additionally, the author would like to thank Mr. Raymond Andaya for editing this submission.
throughout the country. The campaign provides free food to the homeless and unemployed persons. Reportedly this network has been supplying food for around 600 people every day in Khula Manch, Kathmandu, for several months.²

7. Most actors appear to have built, or are building their responses on networks that they had prior to the pandemic. It was also observed that the content of these services are built on the strength the provider had, and expanded on their existing services.

8. The response of Wishes and Blessings, an NGO in Delhi, India, illustrates this. Prior to the pandemic, the NGO served three meals per day to around 600 underprivileged people in Delhi. Since the onset of the pandemic, they have been serving meals for around 15,000 people in six states through partnerships with multiple NGOs.³

9. This approach of building on existing networks and practices appears to be most appropriate because vulnerability and marginalization of target groups and individuals have multiplied and have become more apparent due to the pandemic, and is rarely triggered by the onset of the pandemic. Newly-created vulnerability applied generally to the public, by the threat of COVID-19 and reduced access to commodities and services, but the situation of already vulnerable people was exacerbated disproportionately, pushing them further into vulnerability. This enabled actors to operate effectively by using their existing networks to reach out to the vulnerable and marginalized people in society. Examples of target groups are foreign workers, asylum seekers, homeless people, unemployed persons, sex workers, rural population, people living in poverty, and victims of domestic and sexual violence. One group that has been facing a new level of vulnerability are medical personnel and people providing services directly related to the pandemic, such as cleaners and security forces, and that good examples exist in supporting this new vulnerable group.⁴

10. An example of supporting newly-vulnerable groups is assistance in the form of basic supplies to those who work in COVID-19 response is in Shanghai, China, led by a commercial shopping center. Ganhui Center established an ‘Unattended Holding Cabinet’ in February 2020 for citizens to provide free food and drink for takeaway delivery staff, cleaners and police personnel. The Cabinet is reportedly being widely used.⁵

11. There have been notable responses in various forms: from protective gears, medicine and medical services, cash, food, information, education, training and business platforms. For example, eVidyaloka, an NGO in India, works in the education sector. It connects volunteer teachers in the world with students in rural areas in India by using a communication programme on the internet, reaching out to underprivileged children, especially girls, who stay

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home due to COVID-19 restrictions. It supplements students’ learning by delivering textbooks to those children.  

12. An innovative response was seen in the Republic of Korea, particularly in terms of suicide prevention. The Seoul Youth Guarantee Center is an online government-run counseling program for suicide prevention, expanded in a large scale in response to a 36% increase in the number of women who deliberately harmed themselves in the first half of 2020 due to the effect of the pandemic-related restrictions. They more than doubled the original target of 700 counselors and received around 5,000 calls (31.6 percent more than the previous year).  

13. The research team often found information pertaining to certain target groups, such as victims of domestic violence and child abuse, and sex workers. It is unclear whether or not this is because information was more easily available due to the attention given to those groups, following media reports on their situation.  

14. One such example is from the National Network of Sex Workers in India, providing food to families of sex workers in Tamil Nadu, Karnataka, Maharashtra, Andhra Pradesh, Telangana and Jharkhand in India. The Network responds to the needs of sex workers, whose work opportunities have significantly decreased due to the pandemic.  

15. There is also an apparent frequency of responses involving the use of technology and innovative practices. Technologies used range from very high-tech to relatively low-tech, involving computer softwares and mobile phone applications that match needs and demands, creation of digital platforms, information dissemination on the internet space, automatic dispensing machines, and 3D printers.  

16. For example, a specialized software development and servicing company developed a fast digital tea bidding platform for tea in Sri Lanka, making the tea auction safe and secure. By ensuring that the tea market continues to operate amidst COVID-19, the livelihood of almost two million people involved in the tea plantation business were secured. This has had a particularly positive effect on women, who make up most of the primary workforce in tea-picking.  

17. In another example, a Japanese non-governmental organization (NGO) provided cash grants through a mobile phone system to internally displaced persons (IDPs) and repatriated refugees affected by the spread of COVID-19 in Bamiyan, Afghanistan. This unique assistance worked across the border, and the distribution was followed up by monitoring through phone and in-person interviews.  

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18. 3D printers were used in another example. The Hong Kong Polytechnic University developed reusable 3D-printed eye visors and face shields for hospitals. These were used by medical workers for protection from COVID-19 infection.11

19. Yet another example responds to exacerbated food insecurity during the pandemic. A businessman in Ho Chi Minh City, Vietnam, invented a ‘Rice ATM’, an always accessible automatic rice dispensing machine to give people access to rice, a basic food staple in Vietnam. Similar machines have reportedly been set up in Hanoi, Hue and Danang provinces in Vietnam.12

20. Many of the effective measures responsive to the particular need of beneficiaries appear to be locally based, or community based, and operated on a small scale. For example, Women Enablers Advocates and Volunteers for Empowering and Responsive Solutions (WEAVER) and the Divisoria Peatland Farmers Association are working in response to specific needs in small communities in Leyte province, the Philippines. They encourage senior citizens to engage in collective subsistence farming. This activity aims not only to secure food sources, but also to open up more livelihood opportunities for the local population by pursuing the replanting crops that have multiple uses.13

21. In similar interventions, materials used can be uniquely local, too. For example, in Cotabato, Philippines, weavers and workers in a cooperative exporting bamboo products have shifted from its ordinary business to making face shields using bamboo frames.14

22. Oftentimes, such interventions were of self-help type, assisting in the identification of specific needs of the group and the preparation of responses that benefit them most effectively. For example, in Taiwan, the first labour union by and for foreign workers has provided tailored assistance to migrant workers. Not only did they distribute medical supplies to migrant fishermen, but also provided legal support and information on human rights-related issues such as the exploitative nature of their work, especially in the time of COVID-19.15

23. As with the above example, where business entities are involved, numerous examples of repurposing economic activities were collected. Amongst them, the example of immediate repurposing by a business corporation making surgical masks during the phase of mask shortage in Japan at the onset of the pandemic, appears to have made a positive impact on the population seeking to protect themselves. Other business corporations followed suit by manufacturing thermometers, thermal cameras, partitions, face shield and masks.16


16 Sharp Corporation is a business corporation that designs and manufactures electronic products. It commenced manufacturing face masks in response to the severe shortage of masks in March 2020. Other corporations such as Toyota and Iris Ohyama
24. One type of service appeared frequently in the team’s search for good practice, and seems effective and cost-efficient. That is the provision of accessible and understandable information for target groups. One subtype is raising awareness about COVID-19 prevention, necessary measures and treatment, and COVID tests and medical services available. Another subtype is providing information about available services, both public and private, on a range of issues including educational resources, housing and necessary commodities.

25. An example of such is the use of a digital networking application for accelerated training and recruitment of medical practitioners. Docquity is such an application used in Indonesia. With the cooperation of the Health Ministry, it provided on-line training platforms. Seminars, on-line lectures and training by medical experts were provided to trainees and volunteers. Through the use of this digital network, recipients can update and develop their practical medical knowledge, and boost hospitals’ capacity to deal with COVID-19 patients and related issues. This also accelerated recruitment of volunteer medical practitioners.\(^\text{17}\)

26. The practice of a foundation working on women’s shelters in Taipei city, Taiwan, is also a good example. The Garden of Hope Foundation from the Asian Network of Women's Shelters not only provides services, but also assists survivors of gender-based violence through information on available resources such as shelters.\(^\text{18}\)

Conclusion

27. Preliminary findings indicate that interventions based on existing networks and particular strength of actors, which are locally provided based on the specific situation of target communities effectively assist in protecting vulnerable and marginalized groups. In this time of pandemic, various actors, including different types of civil society groups, self-help networks and business entities, have been innovatively repurposing their responses. It is particularly apparent that technology is being used to tailor services to respond to particular needs and situations of target beneficiaries.

28. The crowdsourcing research is presently at a stage of checking with organizations and beneficiaries involved to determine the effectiveness and sustainability of the practices identified in the database. Where beneficiaries stories confirm that the service helped ease the vulnerability/marginalization caused by COVID-19 and related restrictions, and where the practice may be transferable to other services, target groups or geographic areas, the research team will recommend sharing and expanding these examples as universal model responses. Further information on these best practices in the region will be collected simultaneously.

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\(^{18}\) ‘Resources for shelters and GBV prevention programs,’ *Asian Network of Women’s Shelters* [website], https://shelterasia.org/coronavirus/?fbclid=lwAR1j_l7fUsWOxGlxKSyNaeLlioQgPql2lulwcdfhnXKmsDx_9x6p2DH2QbHe, (accessed 19 November 2020).