**How COVID-19 is affecting human rights in Egypt**

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While the novel coronavirus is affecting people and countries all over the world, it impacts not only the health of individuals but also the political and economic stability of states. This, in turn, has led to human rights restrictions in many countries. While some restrictions may be adequate in response to the outbreak, others are excessive or can run the risk of being made permanent in spite of an improvement of the situation. Furthermore, governments’ reaction to health and economic problems may be instrumentalised to disproportionally affect certain people or groups of people, such as human rights defenders. The intention of the analysis below is to give an overview of how human rights are affected in Egypt as a result of the virus and the government’s response to it.

Prison conditions as a public health risk:

Since the beginning of the pandemic, there have been many calls from the international community to release detainees in Egypt, largely focusing on elderly detainees, people with chronic illnesses and those arbitrarily held in pre-trial detention, such as journalists and human rights defenders.[[1]](#footnote-2) This included the UN OHCHR Spokesperson who expressed acute concern over “the overcrowded prisons in Egypt and the risk of the rapid spread of the COVID-19 virus” and urged the Egyptian authorities to release administrative detainees and those “arbitrarily detained due to their political or human rights work”, in particular those in very vulnerable situations due to their age and/or serious underlying medical conditions.[[2]](#footnote-3) This is especially the case for female prisoners.[[3]](#footnote-4) However, while 15 political figures and activists were freed in March,[[4]](#footnote-5) the number of releases in political cases remains marginal. Over 4,000 detainees were reportedly released on the occasion of Sinai Liberation Day in April,[[5]](#footnote-6) however these excluded individuals held on terrorism and protest charges, which is the case for the vast majority of human rights defenders. Instead, the Egyptian authorities passed a new law in March preventing conditional release for detainees held under assembly law 10/1914 and counter-terrorism law 94/2015.[[6]](#footnote-7) Moreover, an intense arrest campaign is ongoing in Egypt, targeting anyone critical of the government’s management of the pandemic, therefore adding to the estimated 60,000 political prisoners in detention.[[7]](#footnote-8)

Even at the best of times, prison conditions in Egypt fall short of the United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules),[[8]](#footnote-9) as they are marked by overcrowding and a lack of hygiene.[[9]](#footnote-10) According to a report from the National Council for Human Rights in 2015, Egyptian prisons were 160% over capacity.[[10]](#footnote-11) They are thus prone to facilitating the spread of the coronavirus easily, both inside prisons due to the impossibility of enforcing social distancing measures and hygiene protocols between inmates and outside since prison personnel enter and exit the prison facilities. Inmates are frequently subjected to medical neglect and poor detention conditions, such as no access to sunlight, mattresses to sleep on or sufficient ventilation, often resulting in their health severely deteriorating during detention and putting them at greater risk of contracting the virus. Prison facilities lack the means to address a potential outbreak, with a shortage of food, medicine, safe drinking water, and adequate toilet and shower facilities.

Despite claims to the contrary,[[11]](#footnote-12) the Egyptian government has failed to implement the necessary precautionary measures against COVID-19 in prisons. For example, authorities did not take any steps to protect prisoners and staff who had come into contact with a Tora prison employee who recently succumbed to the virus.[[12]](#footnote-13) The Committee for Justice, which has been documenting cases of COVID-19 in places of detention, estimates that by 18 June ten detainees and prison staff members had died of the virus, and that there were 133 confirmed and suspected cases.[[13]](#footnote-14) However, these figures may be significantly higher given that visits to detainees, as well as phone calls, have been suspended since 9 March and therefore it has been impossible to get sufficient information about the true extent of the crisis. It is also unclear how much information detainees are provided with about COVID-19, means of prevention and whether they realise to what extent they are at risk of contracting it.[[14]](#footnote-15) The Ministry of Interior has maintained that detention facilities have proper medical equipment, a statement that stands in contrast with the medical neglect that likely contributed to the death of detained filmmaker Shady Habash on 2 May.[[15]](#footnote-16) This is reinforced by the fact that detainees’ relatives have been repeatedly prevented by prison authorities from sending soap and disinfectant to their family members.[[16]](#footnote-17)

The majority of detained human rights defenders and peaceful political prisoners are held in pre-trial detention, which is renewed regularly by first the prosecution and then the court. With the outbreak of COVID-19, court proceedings were suspended in front of a judge and the Ministry of Interior frequently stated that activists in pre-trial detention could not be transferred from prison to attend their detention renewal hearings for security reasons. As a result, during March and April many human rights defenders and activists saw their renewal hearings postponed on several occasions, often exceeding the maximum period in pre-trial detention without a renewal hearing.[[17]](#footnote-18) In light of this, activist Alaa Abdel Fattah went on hunger strike to protest his illegal detention.[[18]](#footnote-19) When detention renewals took place, the defendants often did not attend the hearing themselves, and were therefore denied their right to defence.[[19]](#footnote-20) In some cases, especially at the beginning of May, the prosecution or court renewed their detention retroactively to make up for the period when hearings and court proceedings were suspended.[[20]](#footnote-21) The disruption of legal proceedings led human rights groups to fear that pre-trial detention will be extended indefinitely for many human rights defenders and peaceful political prisoners.[[21]](#footnote-22) Pre-trial detention already has a severe impact on mental health,[[22]](#footnote-23) and this will be exacerbated by the stalling of proceedings, as well as feelings of isolation after being banned from any contact with families. The UN Special Rapporteur on the independence of judges and lawyers has recommended that “effective steps should be taken immediately so that pre-trial detentions are applied only in extraordinary and specific” cases[[23]](#footnote-24).

Freedom of expression: Egypt has been cracking down on freedom of expression since the start of the COVID-19 outbreak, under the claim that it is combatting “false information” about the crisis. The public prosecution announced on 28 March that individuals spreading such information would be at risk of imprisonment and fines of up to 20,000 EGP.[[24]](#footnote-25) It is believed that the regime is trying to hide the real extent of the pandemic and eliminate any criticism of its management of the crisis, while using the state of emergency to further repress opposition voices and those of human rights defenders.

A number of websites and social media accounts have been blocked by the authorities, who have not always provided details for the reason behind the block, and investigations have been made into reports critical of the way in which the crisis has been managed by Egypt.[[25]](#footnote-26) Many arrests have been made for social posts, including lawyer Mohsen Bahnasi following a post on social media calling for the release of Egyptian prisoners amidst the COVID-19 outbreak.[[26]](#footnote-27) Some Egyptian human rights organisations who spoke to EuroMed Rights have testified to having to be extremely careful with the language they use and the information they relay when reporting about the virus, in light of increasing arrests. Several women human rights defenders demonstrating for the release of prisoners during COVID-19 were briefly arrested.[[27]](#footnote-28)

Doctors and nurses have been at the receiving end of a repressive campaign by authorities to stop them from speaking out against working conditions and the government’s management of the COVID-19 pandemic. Amnesty International monitored the arrest of eight medical sector staff between March and June in connection with posts detailing their concerns about the health crisis, on accusations such as “terrorism” and “spreading false news.”[[28]](#footnote-29)

The regime has launched a fierce attack on journalists, with the Arabic Network for Human Rights Information documenting the arrest of ten journalists between 18 March and 18 May.[[29]](#footnote-30) In March, a *Guardian* journalist was expelled for indicating in an article that the figures of coronavirus victims were higher than reported by the Egyptian authorities,[[30]](#footnote-31) and chief editor of independent news website Mada Masr, Lina Attalah, was briefly arrested for interviewing the mother of detained activist Alaa Abdel Fattah outside Tora prison in May.[[31]](#footnote-32) Although independent media is blocked, state propagandists have reportedly spun conspiracy theories presenting COVID-19 as engineered by the West while praising Egypt for its fight against it.[[32]](#footnote-33)

The authorities have also been using rhetoric on morality and family values to reinforce its attempts to contain the cyberspace during the pandemic with the arrest of several women social media influencers on TikTok on the charge that they are spreading immorality.[[33]](#footnote-34)

Impact on women: Women are at higher risk of being negatively impacted by the effects of COVID-19. Most particularly, those already marginalised, such as refugees, women with disabilities, LGBTI women, women living in rural areas, are of particular concern.

The current pandemic magnifies pre-existing discriminations, more than it creates any. This is exemplified in the Egyptian government’s response to counterbalance economic loss. The measures taken, because they are not gender sensitive, fail to reach women. Indeed, the Central Bank of Egypt (CBE) issued a decree automatically deferring credit payments for individuals and companies and cancelling commissions and late fee payments, but only 27% of women over 15 have a bank account, less than 2% of women between 15-49 are homeowners, and microloans that are specifically targeted to women under the national women’s empowerment strategy are exempt from the decree.[[34]](#footnote-35)

Yet the impact is not only economic. As in other places, the rate of domestic violence increased during lockdown. According to the Egyptian Centre for Women’s rights, “family conflict” and cases of violence represented 43% of the total number of 1146 cases received, with over 70 percent of the complaints received by women.[[35]](#footnote-36) According to another study, there was an increase of 33% in “family problems”, 19% increase in “violence between family members”, and 11% in domestic violence during the lockdown.[[36]](#footnote-37) Prior to the pandemic, it was estimated that one in four women was experiencing domestic violence.[[37]](#footnote-38)

In normal circumstances, Egypt has the largest number of women and girls who have undergone FGM in the world. COVID-19 has facilitated the occurrence of FGM.[[38]](#footnote-39) For instance, an Egyptian father allegedly tricked his daughters into believing that they would get vaccinated against COVID-19, and instead were cut by a doctor. He will stand for trial on charges of forced FGM.

The public sphere is also more dangerous for women in times of confinement. Deserted transport and public spaces can be a source of fear for women and increase street harassment, as perpetrators might not be stopped by others. If violence is to happen, the options for women are severely restricted by the shutdown of essential care, legal and health services. Furthermore, women’s rights organisations, which could help support the influx of women in danger, have been amongst the victims of the severe crackdown on civil society.

Regarding health services, a situation of overload is likely to divert resources away from essential needs for women: sexual and reproductive rights, access to contraceptives or natal care for instance.[[39]](#footnote-40) Furthermore, if women represent 23.8% of the Egyptian labour force,[[40]](#footnote-41) it is without accounting for the informal sector, where they are more numerous. 68.8% of women in informal employment are contributing family workers, while this is the case for only 8.5% of men.[[41]](#footnote-42) A committee was established for irregular workers impacted by COVID-19, and allowances were provided. 40% of the beneficiaries are women.[[42]](#footnote-43) Healthcare coverage is tied to formal labour, which puts women and informal workers in general at higher risk during the pandemic. In short, women are the hardest hit by the crisis.

The burden of unpaid care labour falls on women’s shoulders. In the current situation, already entrenched patriarchal norms tend to be reinforced. As schools are closed, women are sent home to take care of children. This puts the ones who had a job at higher risk of being laid off, while it adds to the unequally shared burden for stay-at-home mothers.

LGBTI: In Egypt, homosexuality is legal on paper, but de facto illegal, and legal gender recognition is not accessible. Under “normal” circumstances, access to healthcare for LGBTI people is particularly difficult. Homosexuality is repressed through charges of “debauchery”, and trans and intersex people’s identities are pathologised, resulting in institutional violence, torture, discrimination and arbitrary detentions.[[43]](#footnote-44) In a sanitary crisis, LGBTI people might not even seek medical assistance, which puts them at higher risk. The recent death of Sarah Hegazi, an LGBTI Egyptian activist exiled in Canada, has exposed in a dramatic manner the impact of Egyptian LGBTI-phobic policies, state violence and torture of LGBTI individuals.[[44]](#footnote-45)

Socio-economic situation: As elsewhere, COVID-19 poses particular difficulties for the poorest in society. Over the last years, the Egyptian government has prioritised austerity and debt repayment over social spending – encouraged, if not imposed, by the International Monetary Fund (IMF).[[45]](#footnote-46) Although the constitution of 1952 pronounced free medical care as a basic right for all Egyptians, government expenditure on health as a percentage of GDP has fallen from 1.63% in 2015 to 1.35% in 2016 (below the 3% set by the constitution). Households bear nearly 72% of healthcare spending which creates sharp disparities between the poor and the rich. Egyptians in rural areas have less access to health care than those in urban areas, and rural and remote areas suffer particularly from understaffing in health care provision.[[46]](#footnote-47) Frontline health care workers have expressed safety concerns over the government’s handling of the COVID-19 crisis.[[47]](#footnote-48) According to Egypt’s medical union, at least 68 health care workers died and more than 400 tested positive since the outbreak of the virus in mid-February.[[48]](#footnote-49) The very high inflation rate has led to shortages of, amongst others, medicine.[[49]](#footnote-50) Egypt recently secured two loans from the IMF and another from the World Bank, yet the absence of transparency in Egypt means that it is unclear whether this money is going to benefit the population, in particular those already disadvantaged, rather than the military, which controls a large share of the Egyptian economy.

Poverty levels have increased from 27.8% in 2015 to 32.5% in 2018.[[50]](#footnote-51) The high levels of socio-economic inequality[[51]](#footnote-52) are expected to worsen as a result of the COVID-19 crisis. The social security coverage provided by the State amid the pandemic explicitly excludes temporary, casual and informal workers.[[52]](#footnote-53) What’s more, inequality is deeply gendered, as women tend to be concentrated in the lowest-paid jobs and those with little security.

Turning to workers’ rights, workers in the informal economy and people with low income often cannot afford to stop working and thus are at a higher risk of getting infected. While the Egyptian government has taken some economic measures, these are not tailored to individuals and often do not benefit those most in need.[[53]](#footnote-54) According to Amnesty International, thousands of private-sector garment workers in Egypt’s investment zones are at risk of losing their jobs, having their incomes slashed or being made to work without protective equipment in spite of fears of the spread of COVID-19.[[54]](#footnote-55) On 16 March, the government decided to reduce the number of workers in governmental and public institutions in provinces with COVID-19 cases, and granted paid leave to workers in at least some state-run factories. However, the government did not make any similar provision for private-sector workers, who are left to face their employers’ discretionary measures. The restrictions on workers’ right to form and join independent trade unions severely undermine their right to collective bargaining.

State of emergency and presidential powers: The Egyptian authorities introduced amendments to Emergency Law 162/1958 due to the outbreak of COVID-19, which were approved by Parliament on 22 April.[[55]](#footnote-56) The amendments grant the President greater powers in order to deal with the sanitary crisis, including the right to suspend universities and schools and order those coming back from abroad to go into quarantine. They also further reinforce President al-Sisi’s personal authority in the country and the dictatorial nature of his presidency.[[56]](#footnote-57) Especially concerning is the power granted to the President to assign the investigation of crimes to the Military Prosecution,[[57]](#footnote-58) as well as the right to prevent public and private meetings, manifestations and other types of gatherings. These are rights that any authoritarian leader would be unlikely to renounce after the pandemic has subsided and that greatly threaten judicial independence and freedom of assembly. President al-Sisi extended Egypt’s state of emergency for another three months on 27 April.

Recommendations for Egypt:

* Release all arbitrarily detained human rights defenders, immediately and unconditionally;
* Ensure that the treatment of detainees is in line with the United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules);
* Allow detainees’ access to their family and lawyers, in respect of the relevant hygiene measures;
* Ensure that measures pertaining to counterbalancing the effects of the COVID-19 crisis take on a gender perspective, such as, for example, ensuring that services for women victims of violence are recognised as “essential” and made accessible in a context of social distancing; ensuring access to services pertaining to sexual and reproductive health and rights and increase financial resources for women’s rights organisations and shelters;
* Recognise the existence of LGBTI Egyptians, stop their arbitrary detention and ensure their safe access to health services;
* Extend basic social protection to informal workers;
* Monitor compliance of private-sector companies with health and safety standards to mitigate workplace exposure to COVID-19; workers – in public, private or informal sectors – who lose their livelihoods as a result of the economic impact of COVID-19 should have access to social protection measures, including unemployment benefits, to guarantee their right to an adequate standard of living;
* Increase social spending and ensure non-discriminatory access to basic services, including health care, social security and education, to tackle the increasing levels of poverty and inequality, especially among marginalised groups.

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