Global Pandemic Prevention & Control and Human Rights Protection
Conference Series:

Series VII: Addressing Contemporary Forms of Racism:
Challenges Posed by the Pandemic and the National Responses
(Webinar)

Statement by E. Tendayi Achiume

Special Rapporteur on contemporary forms of racism, racial
discrimination, xenophobia and related intolerance

(Delivered by Ms. Kellie-Shandra Ognimba, Human Rights Officer,
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Organizers:
Human Rights Center of Central South University
Cross Cultural Human Rights Centre-Vrije University Amsterdam
China Top Think Tank-Wuhan University Institute of International law
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Ladies and gentlemen,

It is a privilege and honor to address the conference and to deliver the statement on behalf of Professor Tendayi Achiume, the UN Special Rapporteur on Contemporary Forms of Racism, Racial Discrimination, Xenophobia and Related Intolerance. The Special Rapporteur wishes she could join the webinar in person. Unfortunately it is 1.00 am in Los Angeles, that’s why she can’t be there. She sends her regrets and extend her sincere gratitude to the Human Rights Center of Central South University, The Cross Cultural Human Rights Centre-Vrije University Amsterdam, and Wuhan University Institute of International Law, and to Professor MAO Jungxiang, and Professor Tom Zwart, for inviting her.

Over the last months since the outbreak of the COVID-19 pandemic we have witnessed an alarming rise in racist and xenophobic incidents directed at certain groups solely on the basis of their race, ethnicity, national origin or religion all over the world.

In this context, people who are perceived or known to be of Chinese or other East Asian descent have been subject to racist and xenophobic attacks related to the virus. Reports received indicate that racially motivated violence and other incidents against people of Asian-descent have reached an alarming level in some countries.

For instance, Asian-Americans including of Chinese, Korean, Japanese, Vietnamese, Filipino, and Burmese descent, among others, have been subject to racist and xenophobic attacks since the outbreak of COVID-19. These attacks have ranged from physical assaults, vandalism, verbal harassment to denial of access to services and public spaces. In some instances women report being harassed more than twice than men.

In Europe, the European Union Agency for Fundamental Rights (FRA) reported an increase in racist and xenophobic incidents against people who are, or are perceived to be of Chinese or Asian origin, and indicated that in most EU Member States incidents of racism, xenophobia and intolerance linked to the COVID-19 pandemic targeted certain national or ethnic communities; and most are related to incidents against people of Chinese and of Asian origin or those perceived to be of Chinese or Asian origin. According to the EU Agency “people

of Chinese or Asian origin experienced discrimination in accessing goods and services, including access to health services and education; children of assumed Asian origin were also harassed on the street and bullied at school; and politicians and other public figures used derogatory and xenophobic language towards people of Chinese and Asian origin”.

Yet public figures and politicians play a key role in promoting racial equality and non-discrimination principles. In this regards, it is dismaying to witness State officials adopting alternative names for the COVID-19 coronavirus. Indeed, instead of using the internationally recognized name of the virus, these officials have adopted names with geographic references, typically referring to its emergence in China. This sort of calculated use of a geographic-based name for this virus is rooted in and fosters racism and xenophobia. It serves to isolate and stigmatize individuals who are, or are perceived to be of Chinese or other East Asian descent.

I wish to emphasise that such irresponsible, discriminatory State rhetoric is no minor issue. As noted by the World Health Organization in 2015: “disease names really do matter to the people who are directly affected [...] certain disease names provoke a backlash against members of particular religious or ethnic communities [...] . This can have serious consequences for peoples’ lives and livelihoods”.

Not surprisingly, leaders who are attempting to attribute COVID-19 to certain national or ethnic groups are the very same nationalist populist leaders who have made racist and xenophobic rhetoric central to their political platforms. My first report to the General Assembly in 2018 focused on the threat of ethnonationalist populism to racial equality. It highlighted the direct threat to racial, ethnic and religious minority communities. In many countries populist regimes are exploiting and fueling national anxieties about the pandemic, doubling down on demonization of racial, ethnic and religious minorities, while flouting or eliminating checks and balances on their power. The pandemic layed bare how dangerous climates of intolerance, and of racialized and religious suspicion and fear, can be to the social fabric required to sustain prosperous and safe communities. It is also laying bare just how dangerous intolerance, suspicion and

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3 Ibid.
fear of this kind can be to the multilateral institutions and processes that are essential for a globally coordinated response to the pandemic.6

Reports received also indicate instances of violence, discrimination, arbitrary denial of services and exclusion in the COVID-19 crisis against other groups including religious minorities, Roma, people of African Descent, indigenous peoples, refugees, asylum seekers, migrants, stateless persons, and internally displaced persons. For instance, in Europe Roma were blamed for spreading the virus and subjected to discriminatory measures and hate speech including by high level officials during the pandemic. In China, Africans and people of African descent have been subjected to discriminatory measures in response to the COVID-19; they were evicted from their residences, refused access to restaurants, and got their passports confiscated.7

Despite some robust national responses implemented to end the COVID-19 pandemic, in too many countries unfortunately public health responses to the pandemic have been securitized and militarized. Some countries deployed their counterterrorism apparatus and personnel to play a greater role in shaping their response to the pandemic.8

In addition, the individuals and groups more subjected to racial discrimination and exclusion were often omitted from States’ responses to the COVID-19. For instance as highlighted by the Working Group of Experts on People of African Descent, States have not recognised the specific health risks faced by people of African descent or how racial discrimination and implicit bias

6 Ibid.
11 Ibid.
and racial stereotypes may pervade policy. No protection efforts have focused the public health response on the specific vulnerabilities of people of African descent\(^\text{12}\).

In order to ensure equitable and non-discriminatory public health responses, States must include racial, ethnic and religious minority communities in public health decision-making and resource allocation. This requires more than surveying these populations, and considering their needs in the implementation phase of policies. It requires ensuring they have a meaningful seat at the table from the very start, from framing the nature of the problem to developing and implementing appropriate solutions\(^\text{13}\). Additionally, States should actively ensure that human rights, equality and non-discrimination principles are articulated in public health and all other government policy. It is the obligation of States to equip public health officials to deploy a human rights approach.

I would like to emphasize that we are facing a global pandemic that requires leaders to defend and protect the dignity of all people, irrespective of race or ethnicity\(^\text{14}\). Governments must ensure that their response to the COVID-19 pandemic does not contribute to xenophobia and racial discrimination, and must eradicate xenophobia throughout all State policy and messaging\(^\text{15}\). Political responses to the COVID-19 that stigmatize, exclude, and make certain populations more vulnerable to violence are inexcusable, unconscionable, and inconsistent with States’ international human rights law obligations\(^\text{16}\). Furthermore, political rhetoric and policy that stoke fear and diminish the equality of all people is counterproductive.

As highlighted by the UN Network on Racial Discrimination and the Protection of Minorities, collecting and publishing data on testing, cases and deaths related to COVID-19 disaggregated by sex, age, racial or ethnic origin, migration status and disability in compliance with the human rights based


\(^{16}\) Ibid.
approach to data collection is crucial to assess how the pandemic is affecting particular groups.\(^\text{17}\)

States must also monitor, investigate and prosecute any incident of COVID-19 related expressions of racism, xenophobia, hatred, intolerance, and violence; and ensure access to justice, remedies and reparations to the victims.

There is also a need for greater and more substantive education in law schools and elsewhere on racial and xenophobic discrimination as human rights problems subject to a comprehensive international human rights legal framework. Some might say that education on the International Convention on the Elimination of All Forms of Racial Discrimination will not end racial discrimination. Of course—education alone is not enough. At the same time, combating racial discrimination requires a shared understanding of the problem, its history, its contemporary implications and the broad spectrum of legal and policy tools that can be brought to bear on this problem. Similarly, if public officials have no real understanding of the meaning and requirements of international human rights racial equality and non-discrimination principles, it is less likely they can fully leverage the potential of these principles.

I would like to conclude by emphasizing that States should commit to achieve racial equality and non-discrimination for all, and acknowledge that our work remains unfinished. As States across the world engage in their coordinated efforts to end this pandemic, I call on all actors to ensure that their work contributes to a holistic concept of health and well-being, including freedom from racism and xenophobia."\(^\text{18}\) As the High Commissioner for Human Rights Michele Bachelet said: "COVID-19 is a test for our societies. Human dignity and rights need to be front and centre in that effort, not an afterthought"

I thank you for your attention.
