



## **COVID-19 Protection Advocacy Note**

### **Key messages for engaging with national and local authorities**

**Interim note - 30.03.2020**

This note is intended to guide country-level protection advocacy with national and local authorities in the context of the current COVID-19 pandemic. In developing this note, the Global Protection Cluster (GPC) has reviewed and extracted protection advocacy messages from critical online resources developed by UN agencies, international NGOs and global/regional initiatives for prevention, preparedness and response related to the COVID-19 pandemic.

This advisory note is a living document that will be updated regularly with the development of the COVID-19 operational context, drawing upon the expertise of the global protection community. Key messages can be adapted to diverse audiences.

For the purpose of this document, vulnerable population groups include internally displaced people, returnees and other people of concern, especially vulnerable groups such as children and youth, women, survivors of gender-based violence, persons with disabilities and/or chronic illness, older persons, victims of abuse and violence, LGBTQI, people in detention and other closed facilities and other marginalized groups such as ethnic, religious or linguistic minorities and/or indigenous peoples.

### **ADVOCACY MESSAGES**

- National and local measures to prevent the spread of COVID-19 (e.g. movement restrictions, quarantine, separation) should uphold fundamental human rights, and be strictly necessary, proportionate, limited in time, and neither arbitrary nor discriminatory in nature or in its application.
- National and local measures to prevent the spread of COVID-19 (e.g. movement restrictions, quarantine, separation) should not be used to arbitrarily limit or deny access to life-saving humanitarian assistance and protection.
- Civilian populations should be provided with non-discriminatory exceptions to movement restrictions to access life-saving medical care, humanitarian assistance and protection.
- Humanitarian actors should be provided with exceptions to movement restrictions to ensure provision of life saving assistance whether related to COVID-19 or any other humanitarian needs.
- All people, including vulnerable population groups, have the right to access public health information and health services, including lifesaving testing and treatment, without discrimination whether based on age, gender and other diversity elements.
- COVID-19 preparedness and response plans must give special considerations to the protection of most vulnerable categories of the target populations, including children on the move, children working and/or living in the streets, children with disabilities, etc.
- Official government messages and communications on the COVID-19 pandemic should be accessible to all people, including those in camps and camp-like settings, hard-to-reach areas and dispersed in rural, urban and semi urban areas. Critical information must furthermore be



available in all relevant languages and shared through all forms of communication (e.g. social media, radio, television, posters).

- Health providers should not deny help to people who lack identity documents. Any existing civil documentation requirements to access medical services, particularly testing and treatment of COVID-19, should be suspended in anticipation of, and during the outbreak.
- Family separation should be minimized at all times. When health care protocols and other measures result in isolation of care givers, measures need to be put in place to care for children, older persons, people with disability or any other dependant, and enable contact between families facilitate family reunification as soon as possible.
- Camps, camp-like settings, transit centres and other types of community hosting areas are at particular risk of contamination and should thus be prioritized in terms of monitoring and measures that can prevent exposure to and the spread of COVID-19.
- People living in detention or closed facilities, (e.g. residential care homes, prisons, psychiatric hospital) should have access to appropriate prevention and response measures and receive continuous care to prevent abuse and neglect.
- Public messaging must be evidence-based, respectful and free of bias, avoid stigmatizing and targeting deliberately and arbitrarily specific populations groups for example as responsible for the outbreak or rise in COVID-19 transmission.
- Vulnerable and crisis-affected population groups and people should be included in coordination mechanisms and structures for prevention, preparedness and response related to the COVID-19 pandemic so that their specific needs are recognized, understood and addressed.
- First responders must be trained on how to handle disclosure of violence and rights violations, particularly gender-based violence, and how to prevent sexual exploitation and abuse, in line with international standards.
- It is essential to monitor and address the secondary impacts of the pandemic and the measures to contain them as these will have far reaching consequences on the economic, social and political stability of countries, during and after the health emergency.