Seven principles for a rights-based public health response to COVID-19

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Responses to COVID-19 are an opportunity to protect the lives, dignity and well-being of everyone, everywhere. Human rights provide a framework to strengthen the effectiveness of these responses[1] and can help us assess whether public health measures are appropriate or not.

As public health measures were introduced around the world, HelpAge staff involved in our COVID-19 response wanted to assess whether they were appropriate. Guiding principles were seen as a way to support this. Staff input was sought on an initial set of principles which were then revised, tested in a workshop, refined and further feedback sought.

Here are seven principles you can use to assess whether public health measures being suggested or used respect the rights of older people.

1. Dignity

Dignity is our inherent value because we are human. We feel it in a sense of our own self-worth and other people's respect for us.[2]

- Does the measure uphold and respect everyone's dignity, regardless of their age?
- Is the service being provided in ways that treat older people with dignity and do not put them in undignified situations?
- Does the measure reinforce negative, ageist stereotypes, prejudices or behaviour towards older people or stigmatise them?[3]

2. Non-discrimination

Discrimination is treating people differently with the intention or result of denying them their human rights on an equal basis with others.[4]

- Does the measure discriminate against people based on their age, gender, disability, or other characteristics, or a combination of two or more of these (called 'intersectional discrimination')?
- Which rights are being negatively affected, for example the right to health or the right to participate in society?

To work out if older people have been discriminated against because of their age use the table below:

Question 1: Is a decision or action (or the lack of it) based on age?	Question 2: Does this decision or action (or the lack of it) have a negative impact on the older person's rights compared to younger people?	Outcome
Yes	Yes	Age discrimination
No	Yes	Indirect age discrimination
Yes	No	No age discrimination

3. Equality

Equality is the full participation and inclusion of everyone, including older people, in society based on an equal respect for their dignity.[5]

- Have the authorities done an assessment to identify and eliminate any discriminatory impacts of the measures they introduce?
- Does the measure respond to and accommodate the different needs of diverse people, taking into account their multiple identities, for example age, gender and disability (or 'intersectionality')?
- Does the measure create or exacerbate existing inequality?
- Which rights are being negatively affected?

4. Autonomy

Autonomy is making choices and decisions, with support if necessary, according to your own will and preferences.[6]

- Have the authorities provided everyone with the information they need to make informed decisions and exercise their judgement?
- Can individuals, including older people, give their free, prior and informed consent to medical treatment, including being able to express their wishes in advance and refuse or withdraw from treatment?

5. Accountability

Accountability is accepting responsibility for and giving an account of your actions

- Are the authorities being transparent and keeping everyone informed about the status of the pandemic, the measures they are taking and the justification for them?
- Is information and a channel for raising concerns and complaints accessible to everyone, including older people?

6. Participation

Public health measures are most effective when the community participate in decision-making processes and agree with the measures introduced.

- Are the authorities consulting with the community, including older people, before introducing a measure and when reviewing it?
- Are older people being given the opportunity, with support if necessary, to speak for themselves?
- Which rights are being negatively affected?

7. Proportionality

Proportionality is ensuring that any restriction or harm caused by a public health measure is no more than is absolutely necessary to achieve a legitimate aim.[7]

- Is the aim of the measure legitimate?[8]
- What harm will the measure cause?
- Which rights are being negatively affected?
- Is the measure the least restrictive or harmful option possible?
- Could a less restrictive or harmful measure be used to achieve the same aim?
- Is the measure being regularly reviewed so it is only used when it is strictly necessary?

Endnotes

[1] WHO, *Addressing Human Rights as Key to the COVID-19 Response*, April 2020

[2] HelpAge International, *Ageing in a just world*, 2020

[3] Stigma is the disapproval or disgrace society attaches to a particular characteristic or illness. To stigmatise someone or a group of people is to apply that disapproval to them.

[4] HelpAge International, *FAIR Guidelines*, 2019

[5] HelpAge International, *Entitled to the same rights*, 2017

[6] HelpAge International, *Freedom to decide for ourselves*, 2018

[7] See the Siracusa Principles on the Limitation and Derogation Provisions in the International Covenant on Civil and Political Rights, 1985.

[8] A legitimate aim is one which is a real, objective consideration, and not in itself discriminatory. For example, ensuring the health and safety of others would be a legitimate aim. Employers wanting to save money when the way to do it is discriminatory (e.g. using mandatory retirement ages) is not a legitimate aim.

HelpAge International is a global network of organisations promoting the right of all older people to lead dignified, healthy and secure lives.

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