

MALAWI HUMAN RIGHTS COMMISSION



STATEMENT ON ESCALATING CASES OF COVID-19 IN MALAWI: AN APPEAL FOR INCLUSIVE LEADERSHIP AND COLLECTIVE RESPONSIBILITY IN OUR RESPONSE AND RECOVERY EFFORTS

The Malawi Human Rights Commission (the Commission) continues to monitor and observe with concern the escalating cases of Covid-19 in the second wave which has now claimed over 76 lives in just the past 10 consecutive days. As of 18th January 2021, Malawi had registered a total of 13,027 confirmed cases of Covid-19 with 6080 recoveries, 76 still under investigation, and 321 deaths. The Commission welcomes the decision by His Excellency, President Lazarus Chakwera to declare the State of National Disaster, and the formulation of the Vice President led Ministerial committee to review our current response strategies to Covid-19, and the appeal for all stakeholders (including the development partners) to support government's efforts in combating the pandemic.

It is in the Commission's considered view that such a decision provides a good basis on which a renewed holistic response and recovery to the second wave of Covid-19 can be built as a drive towards a lasting solution. The Commission, however, believes that for this to be successful, a decisive and inclusive leadership that appreciates the socio-economic context of Covid-19 in Malawi and adheres to the principles of good governance (rule of law, respect for human rights, transparency, responsiveness, and accountability) remains key towards a successful collective response.

LESSONS FROM THE FIRST WAVE OF COVID-19

Based on the various assessment and monitoring reports the Commission produced last year, in line with its mandate, the Commission identifies the following key lessons from the first wave of Covid-19 that can help to guide our country's response to the current wave:

1. A holistic human rights-based approach must always be at the centre of any response to any pandemic to ensure that no one is left behind. While in the initial stages, the threat of Covid-19 was largely seen as a sole public health issue, now, this threat was a human

right issue whose impacts cut across civil and political rights, economic, social, and cultural rights, disability, elderly, gender, or other vulnerable group rights.

2. That persons with disabilities and those in prisons have been left behind with prisons remaining congested and low adherence to Covid-19 measures.
3. Matters of political legitimacy to govern and “politicization of the pandemic” can undermine or promote the fight against a pandemic in the process leading to either protection or violation of the right to health and other rights in the context of Covid-19 for example.
4. The Covid-19 pandemic exposed the country’s deteriorating public health system and lack of prioritization on economic, social, and cultural rights – especially for vulnerable groups such as persons with disabilities, street children, girls, and women. Government was challenged to prioritize fixing and investing in the deteriorating public health system at the onset of the pandemic in 2020
5. Business (or life) must continue despite the pandemic. While government had the ultimate responsibility in ensuring that right to life and right to health amidst the threat of Covid-19 was safeguarded, it still had the obligations to ensure the progressive, maximum realization of other economic, social and cultural rights for all the people of Malawi.
6. Any decision around indefinite closure of schools in the context of Covid-19 must be accompanied by a well thought through strategy to ensure continuity of education as well as address psychosocial-economic plight of both teachers and learners in the context of indefinite closure of schools. The closure of schools led to many teachers and other workers losing their jobs or not getting their remuneration; continued education using technology exposed the inequalities in our society and increased cases of early marriages and teenage pregnancies.
7. The decision to re-open schools, in the context of Government (and private sector) failure to comprehensively provide and monitor adherence to Covid-19 measures (including PPEs), risks exposing learners and teachers especially those with underlying health conditions to Covid-19, lack of inclusivity of persons with disabilities in the whole process and hence threat to right to life and health.
8. Government’s complacency to enforce covid-19 guidelines and preventive measures in the context of reduced cases of Covid-19 can be disastrous in the short- and long-terms.

OUR OBSERVATIONS IN RELATION TO THE SECOND WAVE OF COVID-19

The Commission makes the following observations in relation to Malawi’s response to second wave of Covid-19:

1. The Malawi public health system has been overwhelmed with the sharp increase in COVID-19 cases, leading to health professional working beyond their capacity. It has been evidenced that in several cases health facilities have lacked necessary equipment and supplies such as flowmeters, gas cylinders and oxygen. While the public may always come

in to assist, the failure by Government to provide basic equipment is a gross violation to the right to health and a threat to right to life, and Government must undertake the obligation to ensure that such equipment is available at all times.

2. That while Government must be commended for deploying law enforcement on the streets to support the enforcement of the Covid-19 regulations such as the mandatory wearing of masks, reports that some Police officers are using force on civilians for failure to put on masks are regrettable. The Commission bemoans the failure of a clear government strategy to ensure the accessibility of masks by all Malawians.
3. That while nobody (regardless of age, race or any status) is immune from contracting Covid-19, evidence shows that the elderly and those with underlying conditions such as diabetes, cancer, asthma, high blood pressure, etc., have been at greater risk. Government has done so little in coming up with a special prevention and response plan to Covid-19 targeting these groups of people and, in the process, exacerbating their high risk. The same applies to teachers and health workers with such underlying conditions.
4. That the Government, through the Ministry of Education (in collaboration with Ministry of Health), has been slow and reactive in its preventive and response to the second wave of Covid-19 in schools. Consequently, we have observed increased cases of Covid-19 amongst some learners and teachers, leading to deaths of some teachers/lecturers from some of our tertiary institutions. These have been worrisome developments, which have instilled fear and anxiety in learners, teachers, and parents as the right to life is threatened while pursuing the right to education. However, the Commission's guidance is that the decision the Ministry of Education whether to close schools indefinitely or not should be informed by the current evidence, the learnings from the first wave of Covid-19 as well as the balance between the right to life and right to education. There is also need not only to intensify Covid-19 testing in schools but also provide psychosocial support to learners and teachers who may be directly or indirectly affected by Covid-19 as well as providing PPEs for education institutions that have government has mandated to be open.
5. That Government has not yet implemented the social protection programme to bail out vulnerable groups, small business vendors, persons with disabilities and the elderly from acute poverty and total destitution. It has been pointed out that no person with disability has received any Social Cash Transfer during the period of Covid-19 pandemic to bridge the gap created by the pandemic and its preventive measures.
6. Government should assess the capacity of private hospitals providing COVID 19 tests and case management. We note some private hospitals are now Covid-19 Referral Centres but the capacity may not be up to standard.

We urge that Government should learn from countries that are doing well in fighting the pandemic, especially on prevention, which may be cheaper for us. For example, New Zealand, Taiwan. But also, countries like UAE and Bahrain are building herd immunity with very practical vaccine strategies. What do we learn from them?

RECOMMENDATIONS

The Commission therefore recommends the following:

1. The Citizens should take heed of the precautions and preventing measures stipulated by the guidelines. This is a call to personal responsibility. There is need to enhance government efforts on communications at the grassroots levels, coupled with enforcement. Along with Government's recent comprehensive response plan and resources allocated, should be a well-articulated behavioral change communication strategy to ensure messages are not only disseminated but bring about the desired behavioral change in the citizens.
2. While Covid-19 deserves some special attention, Government should put in place mechanisms to ensure that right to health is fully enjoyed by Malawians through ensuring that other critical diseases such as HIV and AIDS, TB, Malaria and others (especially non-communicable diseases) are given the attention they deserve. Government should not neglect other critical areas of public health like mental health, which is becoming a major concern due to Covid-19.
3. Government should come up with measures that enable right to education to be enjoyed by all children while at the same time safeguarding right to life in the context of Covid-19, as it is evident the pandemic may not end soon.
4. Government should scale up the provision of adequate resources and equipment in the health sector to enable health practitioners to fully attend to COVID-19-cases while working safe.
5. Government should put in place measures that cushion the informal sector and the public at large including vulnerable groups especially regarding access to a decent standard living and food security.
6. Based on the learnings from the first wave of Covid-19, Government should enhance other important strategies to ensure that there is reduced teenage pregnancies, gender based violence and early marriages. It is critical that Government launches the long awaited National Action Plan that it mandated that National Taskforce to develop
7. Different stakeholders, Private sector, development partners and NGOs should be coordinated in their support to Government in the fight against Covid-19.
8. Government should ensure maximum accountability on Covid-19 funds. Government should learn and act on the Ombudsman observations and recommendations on usage of Covid-19 funds by the previous government. An oversight body needs to be equipped to monitor the usage of these funds, including citizen-generated funds.

Finally, while it is the duty of government to put in place prevention measures, Covid-19 prevention remains the sole responsibility of every Malawian. Being an emergency situation,

Government should ensure they cut on any bureaucratic or red tape that reinforces lethargy or inertia in the COVID-19 service delivery system. We all have to put on our gum boots, gloves and do whatever we can to protect ourselves and save lives. MHRC, as an independent human rights institution, will continue to monitor the situation on Covid-19 in Malawi and provide necessary recommendations to Government and the public.

Dated this 19th January 2021

A handwritten signature in black ink, appearing to read 'Habiba Osman', with a large, stylized initial 'H'.

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Ms. Habiba Osman
On behalf of the Chairperson