



NORTHERN
IRELAND
HUMAN
RIGHTS
COMMISSION

**Response to the Women and Equalities
Committee Inquiry into the Government's
Response to Covid-19: Human Rights
Implications**

April 2020

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Summary of Recommendations

The Northern Ireland Human Rights Commission (NIHRC) recommends that:

- 1.3 the NI Executive Office introduces legislation that will strengthen, simplify and harmonise equality law within a Single Equality Act, taking inspiration from the Equality Act 2010.**
- 2.3 the emergency legislation is in place for no longer than absolutely necessary to address the COVID-19 pandemic and the contained powers are only utilised when it is necessary and proportionate to do so.**
- 3.5 comprehensive disaggregated data that accurately reflects the spread and impact of COVID-19 across the UK, including Northern Ireland, is developed immediately and is under constant review. The gathering and publication of such data should be standardised and comparable across the UK.**
- 4.4 sufficient Personal Protective Equipment is made immediately available to all employees and unpaid carers in health and social care settings who are at risk of exposure to COVID-19 in the course of their work. This equipment should adequately fit the particular individual to ensure satisfactory protection.**
- 4.6 triage protocols are developed and implemented based on assessing individual medical needs and the best scientific evidence available with immediate effect.**
- 4.8 provision for visitors in exceptional circumstances is immediately extended to relatives of patients receiving palliative care in all settings.**
- 4.11 the Health and Social Care Trusts immediately assist women to adapt birthing plans during this time and assist women who wish to give birth at home.**
- 4.12 perinatal health services are immediately adapted to assist women at home, including offering telemedicine services.**

- 4.18 the two-child limit and the benefit cap are removed immediately.**
- 4.20 carer's allowance is immediately increased to meet the needs of carers during the COVID-19 period.**
- 4.23 the No Recourse to Public Funds condition is suspended immediately for at least the course of the pandemic.**
- 4.24 in the absence of not suspending the No Recourse to Public Funds condition, Discretionary Support payments are not treated as 'public funds' for immigration law purposes to enable such individuals and families to be eligible for such payments.**
- 4.29 an immediate awareness raising campaign on domestic violence and abuse is launched across the UK, including Northern Ireland. This campaign should be accessible and include clear options of support and assistance available to victims.**
- 4.30 in the longer term, comprehensive research is conducted to measure the impact of the pandemic on domestic violence and abuse, identify specific issues and provide recommendations (which are subsequently implemented) for addressing such issues in the future.**
- 4.32 additional educational and health and social care support is immediately available for the duration and after the crisis for children particularly affected by school closures, including making broadband and computer arrangements to ensure all children have access to the internet.**
- 4.35 where required, additional financial support is immediately available to ensure childcare challenges presented by school closures do not increase household poverty due to loss of earnings.**
- 4.38 parents in Northern Ireland are not required to pay childcare fees to childcare providers that are not operating during COVID-19 and that such parents can maintain their existing childcare places. Furthermore, government support should be provided to**

childcare providers to ensure they can reopen after COVID-19. Ireland provides an example of how this can be implemented.

4.39 childcare provision for pre-school ages is provided for children of key workers. Wales provides an example of how this can be implemented.

5.2 with immediate effect safeguards are in place to ensure that trainees that have their health and social care qualifications fast-tracked have the minimum standard of knowledge and skill required to gain such a qualification and that retirees returning to the workforce have received the most up-to-date training relevant to the role that they will be undertaking.

5.4 with immediate effect all health and social care professionals that identified as vulnerable, including retirees that have returned to the frontline, are provided with all the protections needed to effectively mitigate the risk to their health.

5.6 with immediate effect when reconfiguring services and redirecting resources, full account is taken of the impact on other vulnerable patients and groups and that full cognisance is taken of the need to ensure the highest attainable standard of health for all is pursued. This includes ensuring care arrangements are subject to constant review.

5.8 additional exceptions are permitted and additional specialised support is available to ensure the most vulnerable are not placed in harm's way, particularly those relying on carers, people with learning difficulties, those experiencing mental ill-health, or subject to domestic or residential abuse.

5.10 that restoring the economy and raising revenue, given the increase in public expenditure due to COVID-19 should be done in a way that does not penalise those households on low income and the already disadvantaged, including those with protected characteristics.

1.0 Introduction

- 1.1 This submission from the NI Human Rights Commission (NIHRC) follows the Women and Equalities Committee's format, dealing with each posed question in turn.
- 1.2 To put this submission in context, Northern Ireland does not have a Single Equality Act. Instead, equality duties are contained in section 75 of the Northern Ireland Act 1998 and protected characteristics remain protected under a piecemeal collection of legislation.¹
- 1.3 The NIHRC continues to recommend that the NI Executive Office introduces legislation that will strengthen, simplify and harmonise equality law within a Single Equality Act, taking inspiration from the Equality Act 2010.**

2.0 Human Rights Compliance

- 2.1 Human rights has a framework for dealing with emergency circumstances enabling human rights and equality and other freedoms to be curtailed. There is discretion to enhance or limit protections, except in cases of absolute rights.² The Siracusa Principles for example, clarify that any limitations on individuals' rights must respond to a pressing public or social need and be proportionate in pursuing that legitimate aim.³ The restriction must be no more than required in the circumstances. Prevention of the spread of COVID-19 and to preserve the life and health of those affected or under threat of infection is a legitimate aim, as confirmed by the World Health Organisation. The Siracusa Principles outline that due regard shall be had to the international regulations of the World Health Organisation.⁴

¹ Equality Act 2010 does not extend to NI. This is unlike the rest of the UK that has the single Equality Act 2010. See Employment Equality (Age) Regulations (NI) 2006; Disability Discrimination Act 1995; Special Educational Needs & Disability (NI) Order 2005; Equal Pay Act (NI) 1970; Sex Discrimination (NI) Order 1976; Race Relations (NI) Order 1997; Fair Employment & Treatment (NI) Order 1998; Employment Equality (Sexual Orientation) Regulations (NI) 2003; Equality Act (Sexual Orientation) Regulations (NI) 2006; Northern Ireland Act 1998.

² Absolute rights include Articles 3 (prohibition of torture), 4(1) (prohibition of slavery), 7 (no punishment without law) of the European Convention on Human Rights. These rights should not be limited or interfered with under any circumstances.

³ Principle 10(a), Siracusa Principles on the Limitation and Derogation Provisions in the International Covenant on Civil and Political Rights 1985.

⁴ Principle 26, Siracusa Principles on the Limitation and Derogation Provisions in the International Covenant on Civil and Political Rights 1985; Sarah Boseley, 'WHO declares coronavirus pandemic', *The Guardian*, 11 March 2020.

2.2 The NIHRC welcomes the introduction of a six-month Parliamentary review⁵ and the requirement on the Secretary of State to report every two months.⁶ The restrictions should last no longer than is absolutely necessary. However, the NIHRC is concerned that the emergency legislation applies for two years,⁷ with the ability to extend or to suspend/revive the powers resting with Ministers/devolved Departments.⁸ The NIHRC is also concerned that some of the limits placed on rights set out in the measures could be mainstreamed.

2.3 The NIHRC recommends that the emergency legislation is in place for no longer than absolutely necessary to address the COVID-19 pandemic and the contained powers are only utilised when it is necessary and proportionate to do so.

3.0 Effects of COVID-19 or the Response to It

3.1 It is too early to tell the full extent of how people will be affected by the Covid-19 illness and the UK Government's response to it, however, a number of issues are already emerging with implications on individuals' human rights and wider equality issues. The NIHRC is concerned about the effect of Covid-19 and the responses to it disproportionately affecting the most vulnerable in society.

3.2 Responses to Covid-19 could exacerbate pre-existing discrimination against women and girls. The current chair of the UN Working Group on Discrimination against Women, Meskerem Geset Techane has stated that "women are particularly exposed, with many on the frontlines in the COVID-19 fight, providing essential medical and other services, and keeping communities running".⁹

3.3 Many already disadvantaged people are particularly impacted by the COVID-19 measures including those experiencing poverty, migrants, children, carers and those living in remote rural areas. Other individuals and groups face particular challenges, including the homeless, asylum

⁵ Section 98, Coronavirus Act 2020.

⁶ Section 97, Coronavirus Act 2020.

⁷ Section 89, Coronavirus Act 2020.

⁸ Section 88, Coronavirus Act 2020.

⁹ UN Working Group on Discrimination against Women and Girls, 'Press Release: Responses to the COVID-19 pandemic must not discount women and girls', 20 April 2020.

seekers and those with the immigration status of No Recourse to Public Funds, who have lost their income.

3.4 Comprehensive, timely and accurate statistics enable the UK Government to establish who is particularly vulnerable and where to direct resources. For example, figures published by the NI Statistics and Research Agency on COVID-19 related deaths show that of the 256 total deaths involving COVID-19, occurring up to 17 April 2020, 166 (60.1 per cent) occurred in hospital, 93 (33.7 per cent) occurred in care homes, 3 (1.1 per cent) occurred in hospices and 14 (5.1 per cent) occurred at residential addresses or another location.¹⁰ The 96 deaths in care homes and hospices involved 44 separate establishments.¹¹ There have been inconsistencies in how statistics are recorded and published across the UK, making it difficult to compare Northern Ireland's situation and response with the rest of the UK. Notably, the statistics in Northern Ireland were not as comprehensive from the beginning as they could have been. For example, prior to 17 April, the statistics for COVID-19 deaths in Northern Ireland were limited to those that had occurred in hospital.¹² By contrast and showing that it was possible, in Ireland the statistics for COVID-19 deaths recorded wider than hospitals from their inauguration, including deaths that had occurred in care homes.¹³

3.5 The NIHRC recommends that comprehensive disaggregated data that accurately reflects the spread and impact of COVID-19 across the UK, including Northern Ireland, is developed immediately and is under constant review. The gathering and publication of such data should be standardised and comparable across the UK.

4.0 Specific Impacts on those with Protected Characteristics

4.1 Those with protected characteristics, as well as individuals with particular vulnerabilities, are disproportionately affected by Covid-19 and the UK

¹⁰ NI Statistics and Research Agency, 'Deaths Registered in Northern Ireland: Weekly Statistics – Week Ending 17 April 2020 (Week 15)' (NISRA, 2020), at 2.

¹¹ NI Statistics and Research Agency, 'Deaths Registered in Northern Ireland: Weekly Statistics – Week Ending 17 April 2020 (Week 15)' (NISRA, 2020), at 2.

¹² Eimear Flanagan, 'Coronavirus deaths: Why NI's statistics are changing', *BBC News*, 15 April 2020.

¹³ Gov.ie, 'Latest Updates on COVID-19 (Coronavirus)'. Available at: <https://www.gov.ie/en/news/7e0924-latest-updates-on-covid-19-coronavirus/>

Government's response. There are a number of issues emerging, some of which cut across those with multiple protected characteristics.

Personal Protective Equipment

4.2 Personal Protective Equipment is not designed to fit women, even though the majority of key workers in high risk roles are women.¹⁴

4.3 Care home employees, community healthcare and domiciliary teams and carers, who are predominately women, have not been provided with adequate Personal Protective Equipment.¹⁵

4.4 The NIHRC recommends that sufficient Personal Protective Equipment is made immediately available to all employees and unpaid carers in health and social care settings who are at risk of exposure to COVID-19 in the course of their work. This equipment should adequately fit the particular individual to ensure satisfactory protection.

Triage decisions and palliative care

4.5 NICE guidelines indicate that difficult decisions will be made.¹⁶ The UN Special Rapporteur on Older Persons warns "triage protocols must be developed and followed to ensure such decisions are made on the basis of medical needs, the best scientific evidence available and not on non-medical criteria such as age or disability".¹⁷ The Commissioner for Older People NI has released a joint statement with civil society representatives raising concerns that "any suggestion that treatment decisions can be blanket ones, based on age alone or with a person's age given undue weight as against other factors, such as their usual state of health and capacity to benefit from treatment, would be completely unacceptable".¹⁸ In an additional statement, the Commissioner for Older People NI has

¹⁴ Maya Oppenheim, 'Coronavirus: Women's minister insists PPE not gender-specific despite doctors warning gear designed for men putting female health workers at risk', *The Independent*, 23 April 2020.

¹⁵ Evidence provided to NI Assembly Committee for Health by Pauline Shepherd a representative of Independent Health and Care Providers, 19 March 2020; Commissioner for Older People NI, 'Press Release: New figures released by NISRA regarding Covid-19 related deaths: Statement from the Commissioner', 17 April 2020; Donna Traynor, 'Coronavirus: District nurse voices COVID-19 PPE concerns', *BBC News*, 9 April 2020; Allan Preston, 'Coronavirus: NI healthcare providers 'seriously worried' over personal protection equipment supply', *Belfast Telegraph*, 19 March 2020.

¹⁶ National Institute for Health and Care Excellence, 'COVID-19 Rapid Guideline NG159: Critical Care in Adults' (NICE, 2020).

¹⁷ UN Special Rapporteur on Older Persons, 'Press Release: "Unacceptable" – UN expert urges better protection of older persons facing the highest risk of the COVID-19 pandemic', 27 March 2020.

¹⁸ Commissioner for Older People NI, 'Press Release: The rights of older people in the UK to treatment during this pandemic', 30 March 2020;

expressed concern that older and vulnerable people are feeling pressurised into signing Do Not Attempt CPR forms.¹⁹ For example, a 73 year old woman with Multiple Sclerosis was admitted to the Causeway Hospital in Coleraine with suspected COVID-19 and asked to sign a Do Not Attempt CPR form shortly after arrival. The Northern Health Trust has since apologised for “any anxiety caused”.²⁰

4.6 The NIHRC recommends that triage protocols are developed and implemented based on assessing individual medical needs and the best scientific evidence available with immediate effect.

4.7 The Department for Health and Social Care in England has issued revised guidance allowing for visits to people receiving end of life care.²¹ In Northern Ireland provision is made for hospital visitors in exceptional circumstances,²² however, this has not yet been extended to relatives of patients receiving palliative care in other settings.²³

4.8 The NIHRC recommends that provision for visitors in exceptional circumstances is immediately extended to relatives of patients receiving palliative care in all settings.

Reproductive healthcare services

4.9 Many pregnant women are worried about contracting the virus in hospital and as a result some are choosing to give birth at home.²⁴

4.10 Due to Covid-19 there is limited follow-up healthcare support from midwives or social workers for new mothers.²⁵ Perinatal mental health services do not currently exist in Northern Ireland, which is a particular concern.

4.11 The NIHRC recommends that the Health and Social Care Trusts immediately assist women to adapt birthing plans during this time and assist women who wish to give birth at home.

¹⁹ Commissioner for Older People NI, ‘Press Release: Protecting the rights of older people – Commissioners’ joint statement on older people being pressurised to sign Do Not Attempt CPR forms’, 6 April 2020.

²⁰ Sara Girvin, ‘Trust apologies over DNR conversation’, *BBC News*, 7 April 2020.

²¹ Department of Health and Social Care, ‘COVID-19: Our Action Plan for Adult Social Care’ 15 April 2020.

²² Department of Health, ‘COVID-19 Visiting Update HSC – 9 April 2020’. Available at: <https://www.health-ni.gov.uk/sites/default/files/publications/health/COVID-19%20%20Visiting%20Update%20HSC.pdf>

²³ Claire Simpson, ‘Arlene Foster says relatives could be allowed to visit gravely ill coronavirus patients’, *Irish News*, 16 April 2020.

²⁴ NI Women’s Policy Group Meeting, 8 April 2020.

²⁵ NI Department of Health, ‘Press Release: Plans in place to protect children’s and maternity services’, 3 April 2020.

4.12 The NIHRC recommends that perinatal health services are immediately adapted to assist women at home, including offering telemedicine services.

4.13 Delays in the implementation of the Abortion (NI) Regulations 2020 mean that women and girls are unable to access terminations in Northern Ireland on the same terms as the rest of the UK. Temporary plans within health and social care trusts to provide an interim service until full services were in place were put on hold following an intervention from the Department of Health suggesting that delivery of the services was a matter that needed to be referred to the NI Executive.²⁶ The Department has since written to the Royal College of Gynaecologists and Obstetricians advising that it has received legal advice to allow for the introduction of planned services by some health and social care trusts in Northern Ireland without requiring approval from the NI Executive.²⁷ To date, neither interim nor final guidance has been issued by the Department of Health around the provision of services during the crisis.

4.14 The NIHRC welcomes reports that following interventions by the Commission and others with the Department of Health and with NI Assembly Committee for Health, it appears termination services up to ten weeks are now available in some health trusts in Northern Ireland.²⁸ This process is being facilitated by Informing Choices NI, who are acting as a central access point.²⁹ In person consultation with a doctor is required and the first pill must be taken at the clinic, with the second pills taken at home. Following guidance from the Department of Health in England, and the Welsh Government and the Chief Medical Officer in Scotland, a 'telemedicine' option is now available for women and girls seeking a termination up to ten weeks in other parts of the UK.³⁰ This allows for an initial consultation with a doctor to happen by telephone and for early medical abortion pills to be sent by post. An equivalent service is not available from the National Health Service in Northern Ireland. In response to the initial withdrawal of services, the independent charity British Pregnancy Advisory Service has extended its 'telemedicine option' to

²⁶ Jayne McCormack, NI health trusts 'stopped from carrying out early abortions', *BBC News*, 9 April 2020.

²⁷ Jayne McCormack, Abortions 'can now be carried out' in Northern Ireland', *BBC News*, 9 April 2020.

²⁸ Brendan Hughes, 'Central access point' launched for abortion services in Northern Ireland, *Irish News*, 16 April 2020.

²⁹ Informing Choices NI, 'Central Access Point'. Available at: <https://informingchoicesni.org/central-access-point>

³⁰ Department of Health and Social Care, 'The Abortion Act 1967 – Approval of a Class of Places' 30 March 2020; Welsh Government, 'The Abortion Act 1967 – Approval of a Class of Place for Treatment for the Termination of Pregnancy (Wales) 2020', 31 March 2020; Chief Medical Officer Directorate, 'Abortion – COVID-19 – Approval for Mifepristone to be Taken at Home and Other Contingency Measures', 31 March 2020.

Northern Ireland.³¹ At present it is too early to tell whether the services are effectively and comprehensively meeting the needs of women across Northern Ireland.

4.15 The NIHRC recommends that comprehensive guidance is immediately provided to clinicians on terminations in NI, in light of the Abortion (NI) Regulations 2020, and State-sponsored provision is made immediately available for telemedicine terminations up to 10 weeks in Northern Ireland on the same terms as England, Scotland and Wales.

Social security

4.16 Amendments to national insurance, Universal Credit and statutory sick pay are welcomed.³² However, increased Universal Credit claims has the potential to cause delays and increased poverty.³³ Statutory sick pay is limited in terms of amount and who it applies to. The additional Discretionary Support Payments in NI is welcomed.³⁴ The additional support provided to those reliant on social security must be placed in the context of the freezing of key means-tested benefits lasting four years, the introduction of the two child policy within Universal Credit and other means-tested benefits alongside other restrictions on social security entitlements. The easing of local housing allowance rules within housing benefit simply restored claimants to a position that applied after the initial cut to the provisions were first introduced. Consideration should be given to maintaining additional support once the COVID-19 crisis has ended.

4.17 As the NIHRC's cumulative impact assessment of tax and social security changes from 2010 through to proposals in the pipeline to 2020 demonstrates, low-income households, lone parents and households with an adult or child with a disability have been particularly adversely impacted by policy changes.³⁵ People in low income households have little or no financial resilience, such as savings, to weather the current crisis and are unable to make decisions to reduce costs in the way higher income

³¹ British Pregnancy Advisory Service, 'Pills by Post - Remote Abortion Pill Treatment'. Available at <https://www.bpas.org/abortion-care/abortion-treatments/the-abortion-pill/remote-treatment/>

³² Sections 72-76, 77(1) and 77(2), Coronavirus Act 2020.

³³ Jayne McCormack, 'Coronavirus: Almost 20,000 new NI claims for universal credit', *BBC News*, 26 March 2020.

³⁴ Department for Communities, 'Press Release: Minister announces further support for those affected by COVID-19', 24 March 2020.

³⁵ Howard Reed and Jonathan Portes, 'Cumulative Impact Assessment of Tax and Social Security Reforms in NI' (NIHRC, 2019).

households can. For example, the economic provisions offered are not sufficient to cover sudden loss of regular income,³⁶ which limits ability to pay for bulk food items or home deliveries as well as increased expenditure on gas and electric. Women are also particularly affected by the two-child limit and the benefit cap though the benefit cap is not being applied in Northern Ireland under the mitigations package.³⁷

4.18 The NIHRC recommends that the two-child limit and the benefit cap are removed immediately.

4.19 Carer's allowance has not changed to address increasing needs due to COVID-19, this particularly affects women who make up the majority of carers in Northern Ireland.³⁸ A Carers UK survey of more than five thousand carers carried out between 3 April and 14 April 2020 found that 70 per cent of unpaid carers are providing more care during the pandemic and that more than half of those surveyed feel overwhelmed.³⁹

4.20 The NIHRC recommends carer's allowance is immediately increased to meet the needs of carers during the COVID-19 period.

4.21 Those whose immigration status is based on having 'no recourse to public funds' have also not been effectively provided for. The reliance on local authority provision as an alternative source of support is a problem in Northern Ireland where local councils do not have responsibility for housing, social services or education.

4.22 In Northern Ireland, the Department for Communities has made additional Discretionary Support payments in NI.⁴⁰ In the absence of suspending 'no recourse to public funds' this payment could be discounted as public funds for the duration of the COVID-19 crisis and utilised to support those with 'no recourse to public funds'.

4.23 The NIHRC recommends that the No Recourse to Public Funds condition is suspended immediately for at least the course of the pandemic.

³⁶ Sections 42-44, 47, 72-76, 77(1) and 77(2), Coronavirus Act 2020.

³⁷ Howard Reed and Jonathan Portes, 'Cumulative Impact Assessment of Tax and Social Security Reforms in NI' (NIHRC, 2019).

³⁸ Raymond Russell, 'Research and Information Service Briefing Paper: Background Information and Statistics on Carers in Northern Ireland' (NI Assembly, 2017).

³⁹ Carers UK, 'Caring Behind Closed Doors: Forgotten Families in the Coronavirus Outbreak' (Carers UK, 2020).

⁴⁰ Department for Communities, 'Press Release: Minister announces further support for those affected by COVID-19', 24 March 2020.

4.24 In the absence of not suspending the No Recourse to Public Funds condition, the NIHRC recommends that Discretionary Support payments are not treated as 'public funds' for immigration law purposes to enable such individuals and families to be eligible for such payments.

Domestic violence and abuse

- 4.25 The UN chief António Guterres has called for measures to address a "horrifying global surge in domestic violence" directed towards women and girls, linked to lockdowns imposed by governments responding to the COVID-19 pandemic.⁴¹
- 4.26 The UN Special Rapporteur on Violence against Women, Dubravka Simmonovic has also stated that "it is very likely that rates of widespread domestic violence will increase, as already suggested by initial police and hotline reports. For too many women and children, home can be a place of fear and abuse. That situation worsens considerably in cases of isolation such as the lockdowns imposed during the COVID-19 pandemic".⁴²
- 4.27 The UN Special Rapporteur has expressed particular concerns about women at higher risk of domestic violence, such as women with disabilities, undocumented migrant women and victims of trafficking.⁴³
- 4.28 There have been four domestic killings in Northern Ireland since the start of the COVID-19 lockdown.⁴⁴ Nexus NI, a domestic abuse charity in Northern Ireland, has said that it saw a 13 per cent rise in calls the week commencing 13 April 2020, on top of a 27 per cent rise in the first week of April.⁴⁵ Nexus NI also confirmed that the number of visits to its domestic and sexual abuse website had doubled. As the lockdown continues, Nexus NI has stated there has been an increase in callers worried that if they leave home, they could get Covid-19.⁴⁶ UNICEF has expressed concerns that "children are at a heightened risk of abuse, neglect, exploitation and violence amidst intensifying containment measures".⁴⁷

⁴¹ UN News, 'Press Release: UN chief calls for domestic violence 'ceasefire' amid 'horrifying global surge', 6 April 2020.

⁴² UN Special Rapporteur on Violence against Women, 'Press Release: States must combat domestic violence in the context of COVID-19 lockdowns – UN rights expert', 27 March 2020.

⁴³ UN Special Rapporteur on Violence against Women, 'Press Release: States must combat domestic violence in the context of COVID-19 lockdowns – UN rights expert', 27 March 2020.

⁴⁴ Jayne McCormack, 'Coronavirus: Four domestic killings since lockdown began', *BBC News*, 28 April 2020.

⁴⁵ 'Increase in NI Domestic Violence Calls', *ITV News*, 13 April 2020.

⁴⁶ 'Increase in NI Domestic Violence Calls', *ITV News*, 13 April 2020.

⁴⁷ UNICEF, 'Press Release: Children at heightened risk of abuse, neglect, exploitation and violence amidst intensifying containment measures', 20 March 2020.

4.29 The NIHRC recommends that an immediate awareness raising campaign on domestic violence and abuse is launched across the UK, including Northern Ireland. This campaign should be accessible and include clear options of support and assistance available to victims.

4.30 The NIHRC recommends that in the longer term, comprehensive research is conducted to measure the impact of the pandemic on domestic violence and abuse, identify specific issues and provide recommendations (which are subsequently implemented) for addressing such issues in the future.

School closures

4.31 Home schooling for any period may negatively impact children from households with low levels of income and in rural areas due to the challenges in obtaining the necessary computer or broadband arrangements.⁴⁸ Children with special educational needs may be negatively impacted due to the lack of specialised support available at home.⁴⁹

4.32 The NIHRC recommends additional educational and health and social care support is immediately available for the duration and after the crisis for children particularly affected by school closures, including making broadband and computer arrangements to ensure all children have access to the internet.

4.33 Closure of schools impacts on parents/guardians' ability to work. The potential loss of wages and limited paid parental leave available, risk increasing household poverty. This applies particularly to parents of disabled children, as childcare for children with disabilities is extremely limited even in ordinary circumstances.

4.34 The risk is greatest for single parents, who already are more likely than other groups to experience poverty and debt.⁵⁰

⁴⁸ Robbie Meredith, 'Coronavirus: Executive 'should give disadvantaged children iPads', *BBC News*, 20 April 2020.

⁴⁹ NI Commissioner for Children and Young People, 'Press Statement: "Not every home is a safe place for our children, particularly when it is the only place available" says NI Children's Commissioner', 1 April 2020.

⁵⁰ UN Special Rapporteur on Extreme Poverty and Human Rights, 'Statement on Visit to the United Kingdom', 16 November 2018, at 18.

4.35 The NIHRC recommends, where required, additional financial support is immediately available to ensure childcare challenges presented by school closures do not increase household poverty due to loss of earnings.

4.36 There remains a lack of clarity in Northern Ireland around whether parents are expected to continue to pay childcare fees to childcare providers that are not operating during COVID-19. Ireland has provided parents with a reassurance that they are not required to pay childcare fees during this COVID-19 crisis, while providing them with reassurance that they will maintain their childcare places.⁵¹ Ireland has also committed to reimbursing childcare employers to ensure the childcare sector is in a position to reopen after COVID-19.

4.37 In Northern Ireland, some schools have remained open for the purpose of providing childcare and education for key workers. However, there is a lack of childcare provision for pre-school ages. In Wales, free childcare has been rolled out children of key workers aged under five years old.⁵² Childcare for workers employed outside school hours is also particularly difficult to source.

4.38 The NIHRC recommends that parents in Northern Ireland are not required to pay childcare fees to childcare providers that are not operating during COVID-19 and that such parents can maintain their existing childcare places. Furthermore, government support should be provided to childcare providers to ensure they can reopen after COVID-19. Ireland provides an example of how this can be implemented.

4.39 The NIHRC recommends that childcare provision for pre-school ages is provided for children of key workers. Wales provides an example of how this can be implemented.

5.0 Unforeseen Consequences of Measures

Health and social care workforce

⁵¹ Gov.ie, 'Press Release: Minister Katherine Zappone announces measures to support Childcare Providers and Parents during COVID-19 closures', 25 March 2020.

⁵² Welsh Government, 'Coronavirus: Childcare for Under Five Year Olds Parents Guidance' (Welsh Government, 2020).

- 5.1 The emergency powers to expand the health and social care workforce may reduce scrutiny of whether trainees are qualified to join the workforce. It is unclear if sufficient safeguards are in place to ensure the trainees that are fast-tracked have the minimum standard of knowledge and skill required to gain their qualification. In terms of retirees re-joining workforce, it is common practice for health and social care professionals to receive continuous training throughout the course of their careers. Those that have retired may not have received the most up-to-date training relevant to the role that they will be undertaking and it is unclear if sufficient safeguards are in place to address this.
- 5.2 The NIHR recommends that, with immediate effect safeguards are in place to ensure that trainees that have their health and social care qualifications fast-tracked have the minimum standard of knowledge and skill required to gain such a qualification and that retirees returning to the workforce have received the most up-to-date training relevant to the role that they will be undertaking.**
- 5.3 Given the on-going issue with lack of Personal Protective Equipment, it is unclear what safeguards are in place to protect retirees that have returned to the workforce, many of whom would fit within the category of most vulnerable if they contracted COVID-19. For example, at least two retired doctors that have returned to the frontline to help tackle COVID-19 have died of the virus in England.⁵³
- 5.4 The NIHR recommends that with immediate effect all health and social care professionals that identified as vulnerable, including retirees that have returned to the frontline, are provided with all the protections needed to effectively mitigate the risk to their health.**
- 5.5 The NIHR understands the need to reassign health and social care staff during a time of immense pressure, such as during the current pandemic. However, reassigning staff is likely to affect health and social care provision for those with non-COVID-19 related conditions and may impact an individual's ability to live independently, particularly for persons with disabilities.

⁵³ Kate Ng, 'These are the names of the NHS workers who have died in the fight against coronavirus', *The Independent*, 23 April 2020.

5.6 The NIHRC recommends that, with immediate effect when reconfiguring services and redirecting resources, full account is taken of the impact on other vulnerable patients and groups and that full cognisance is taken of the need to ensure the highest attainable standard of health for all is pursued. This includes ensuring care arrangements are subject to constant review.

Restricting movements

5.7 Restricting movement necessarily affects access to carers, impacts mental health and increases risk of domestic and care home abuse.⁵⁴ There is a lack of clarity around whether the reasonable grounds for going out extend to specific circumstances, such as mental well-being, escaping domestic abuse, checking on general welfare of friends and family and accommodating routines of individuals with special needs, for example autism.

5.8 The NIHRC recommends additional exceptions are permitted and additional specialised support is available to ensure the most vulnerable are not placed in harm's way, particularly those relying on carers, people with learning difficulties, those experiencing mental ill-health, or subject to domestic or residential abuse.

Increase in public expenditure

5.9 There will be a need to restore the economy and raise revenue, given the increase in public expenditure. However, as Philip Alston states "the regressive or progressive nature of a State's tax structure shapes the allocation of income and assets across the population, and thereby affects various types of inequality".⁵⁵ Arrangements to manage public finances after the pandemic should ensure that changes impact most on higher income households and recognises equality considerations where appropriate.

5.10 The NIHRC recommends that restoring the economy and raising revenue, given the increase in public expenditure due to COVID-19 should be done in a way that does not penalise those households

⁵⁴ Sections 48, 50, 41 and 52 and Schedules 20, 21 and 22, Coronavirus Act 2020.

⁵⁵ Philip Alston, 'Tax Policy is Human Rights Policy: The Irish Debate', Keynote Address at Christian Aid Conference on The Human Rights Impact of Tax and Fiscal Policy in Dublin, 12 February 2015.

on low income and the already disadvantaged, including those with protected characteristics.

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