Key policy issues for COVID-19
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The COVID-19 pandemic has resulted in both a public health emergency and a humanitarian crisis with immediate and long-term impacts on the lives, health and livelihoods of people around the world. The crisis is also exacerbating the challenges faced by some of the world's most vulnerable groups.

National Red Cross and Red Crescent Societies are deeply engaged in responding to the outbreak all around the world, through their nearly 14 million community based volunteers and their special connection to the public authorities as auxiliaries. They are facilitating prevention and control measures and addressing misinformation, rumours and panic. They are also supporting affected communities to maintain access to basic social and protective services, and reduce the economic, social and psychological impact of this virus. But they cannot resolve the challenges alone. Below are some specific recommendations for governments, donors and international community on how we can work together to promote health and dignity for all.

Ensuring an effective public health response

Addressing primary and secondary health needs

An effective public health response to this pandemic requires investing in and scaling up prevention, mitigation and control efforts - including effective community engagement. Prevention is crucial to save lives and community-level activities must not be neglected – they may eventually save more lives than all hospitals and ventilators combined. Public health responses - including epidemic control measures and, community engagement - will need to be sustained in order to prevent further waves of cases. We will also need a global collective commitment to ensure equitable access to any and all diagnostics, treatments, therapeutics, personal protective equipment (PPE) and, once developed, any vaccine.

We must also ensure continuous access to essential health services to treat non-COVID health issues. Control measures and response efforts to COVID should not catastrophically weaken our approach to other health needs, or more people may die from secondary impacts than from the disease itself. This means finding ways to provide immunization, reproductive, maternal, newborn and child health services, malaria prevention and treatment and treatment for critical non-communicable diseases.

Meeting mental health and psychosocial needs

The COVID outbreak is exacting a heavy toll on the mental health and psychosocial well-being of people around the world – and can be particularly difficult for those with pre-existing conditions. The public health response to COVID must also be aimed at this often neglected impact. Much can be accomplished through community level "psychosocial first aid".

Leaving no one behind

Understanding whose needs may be neglected

Some people are particularly at risk of being left behind during the current crisis. These are not necessarily those most physically susceptible to the disease, but rather those whose needs are neglected by prevention and treatment efforts, as well as those most desperate from loss of employment due to control measures. They vary from country to country, but some of the most frequently marginalized groups include migrants and displaced persons (as noted below), those living in slums, the socially isolated (especially isolated older people), those with disabilities, in detention, in unsafe home environments with high risk of violence, abuse or neglect, and those marginalized due to their ethnicity or gender. Governments and other responders should engage with any potentially marginalised groups in order to design measures to meet their specific needs.

Migrants and displaced persons

More than many other populations, migrants, refugees and other displaced persons risk intentional exclusions from pandemic prevention and support programmes and many are among those made most desperate by loss of livelihoods. In addition, in many countries, the right to non-refoulement is being unnecessarily infringed, with no benefit to public health.
Enabling an effective, local humanitarian response

Caring for volunteers and other emergency workers

Emergency responders, both staff and volunteers, are placing themselves at significant risk to care for their communities. Governments and the humanitarian community must ensure that they have access to training, to appropriate personal protective equipment (PPE) and psycho-social support. Those who fall ill in the course of their activities should be ensured coverage for their medical needs and, in case of death, compensation for their families.

Enabling National Societies to fulfil their mandate

Governments should provide National Societies and other humanitarian actors the necessary exemptions from control measures, such as movement restrictions, in order to carry out activities critical to the safety and wellbeing of communities, subject to appropriate precautionary and safety measures.

National Societies engaged in providing essential services should be included in national response planning and coordination and authorities should feel free to call on their assistance in humanitarian activities. However, they should not be pressed to take up activities that go beyond their mission or their capacities or that might compromise adherence with the Fundamental Principles.

Supporting the leadership of local actors

Donors and international humanitarian agencies should take the opportunity of the response to the pandemic to make good on their commitments to support the leadership of local actors in the delivery of humanitarian assistance. This includes leadership, as appropriate, and effective participation in relevant coordination mechanisms, partnerships that are based on principles of equality, and support, as needed, for the institutional capacities of local civil society organisations. It also requires a fair sharing of risks among donors any intermediary agencies and local responders.

Continuing support for the other humanitarian crises

Addressing ongoing humanitarian needs in existing crisis contexts

Humanitarian emergencies do not stop during pandemics. It is critical that continued international assistance is provided to persons in need in fragile and crisis contexts. COVID will not only add yet another threat to lives in these heavily burdened places, but also render the provision of aid more challenging, dangerous and expensive.

The international community must also ensure that support goes to those who need it most, based on a globally impartial approach to the allocation of funding. This means donors should aim for flexible funding and avoid earmarking.

Continuing to prepare, including climate-driven disasters

We must also continue to invest in preparedness in disaster-prone contexts and avoid diverting crucial resources. Our generation’s other global challenge – the climate crisis – is still driving future risks. Governments, humanitarian actors and donors should continue to identify imminent climate and weather-related risks, in a manner that is complementary to the COVID preparedness and response.