



COVID-19 AND PARLIAMENT'S ROLE DURING A PANDEMIC

INTRODUCTION

On March 11, 2020, the World Health Organization (WHO) [declared COVID-19 a global pandemic](#). It is a rapidly evolving global health crisis with the number of confirmed cases and deaths in the Americas and the Caribbean increasing on a daily basis. [Up-to-date data](#) on the geographic distribution of cases and deaths in the region is provided by the Pan American Health Organization (PAHO).

THE PURPOSE OF THIS PUBLICATION IS TO PROVIDE:

1. An overview of the public health and socioeconomic implications of the pandemic;
2. Mitigation and adaptation recommendations for sustaining parliamentary functions during the pandemic; and
3. A reflection on the important role of parliament and parliamentarians during a health crisis.

This publication is not a complete overview of the current situation or potential actions. Rather, it is intended as a tool for dialogue within parliaments and to assist in the establishment of corresponding preparedness and response plans.

KEY TERMS AND CONCEPTS

Coronavirus: a family of viruses that cause a range of mild to severe illnesses. The recently discovered novel coronavirus, named SARS-CoV-2, causes the disease COVID-19.

Incubation period: the time period between catching a virus (in this case, SARS-CoV-2) and beginning to experience symptoms of the disease (COVID-19).

Epidemic: a sudden increase in a disease beyond what is considered normal in a given population.

Pandemic: an epidemic that has spread worldwide (i.e., to several countries/regions).

Self-quarantine/self-isolation: staying away from others after having been or having potentially been exposed to a contagious disease.

Social distancing: any preventive measure (e.g., working from home, avoiding public places or transportation) for reducing person-to-person contact in order to slow the spread of a contagious disease. Should being in a public place be unavoidable, many local health authorities recommend staying at least 2 metres away from others.

Transmission classification: the WHO classifies transmission based on available official data. Multiple types of transmission can exist within countries. From highest to lowest category, the classification encompasses:

- ✓ **Community transmission** (the chain of transmission for a large number of cases is unidentified);
- ✓ **Local transmission** (source of infection is within the reporting location);
- ✓ **Imported cases only** (all cases have been acquired outside the reporting location);
- ✓ **Interrupted transmission** (there is demonstrated interruption of transmission).

Sources: Kaiser Family Foundation, [COVID-19 outbreak glossary](#); WHO, [COVID-19 situation reports](#); WHO, [Q&A on coronaviruses \(COVID-19\)](#).

PUBLIC HEALTH AND SOCIOECONOMIC IMPLICATIONS

The [WHO](#) and [PAHO](#) are trustworthy sources of information for parliamentarians to stay informed on new developments related to the COVID-19 pandemic.

PUBLIC HEALTH IMPLICATIONS

The immediate [health risks](#) for individuals range from mild symptoms to life-threatening situations. Certain groups of people are particularly vulnerable to contracting and/or developing serious health complications from COVID-19, including:

- Older adults (particularly over age 60);
- Individuals with underlying medical conditions (e.g., heart disease, diabetes, and chronic respiratory diseases); and
- Individuals with compromised immune systems (e.g., people living with HIV or undergoing chemotherapy).

Occupational factors also make certain groups vulnerable because of increased risk of exposure, including in the health sector. In Latin America and the Caribbean, [women make up half the doctors and 80% of the nurses](#), the highest percentage in the world; they also perform the majority of unpaid care work, indicating important gender considerations in responding to COVID-19.

Other indirect health and social effects include [mental health and psychosocial effects](#), such as those related to isolation and stress (e.g., for overworked health care workers), as well as [social stigma](#) as a result of health misinformation. Moreover, COVID-19 has the potential to overburden health care systems, which in turn affects the provision of care for all medical conditions.

SOCIOECONOMIC IMPLICATIONS

Socioeconomic factors also make certain groups of people more vulnerable during a health crisis. Overcrowded living conditions and settings with poor water and sanitation—commonly seen with refugee and internally displaced populations and prison populations, for example—amplify the risk of outbreaks. Such conditions expedite person-to-person transmission and limit the ability to practice preventive behaviours, such as hand washing and social distancing.

Poverty, disability, and low literacy also affect access to health care and information, the ability and/or resources to act on prevention recommendations, and the resources to access basic needs for preparedness (e.g., water, food, housing, medicines). Across the Americas and the Caribbean, groups that are vulnerable due to poverty include Indigenous and Afro-descendant populations, the homeless, informal sector workers, undocumented persons, and single-parent households (which are predominantly female-headed).

The pandemic also has the potential to trigger widespread economic consequences. These are already being evidenced in many settings and include impacts on:

- Businesses, particularly small businesses that are unable to handle short-term revenue losses; and
- Families that become financially strained as a result of:
 - Job loss, unstable employment, and inflexible working conditions, including in the informal sector;
 - Unexpected health care costs;
 - Increased caregiving needs, which disproportionately [burden women](#); and
 - Housing instability (e.g., due to loss of income).

The [UN Trade Agency](#) predicts that COVID-19 is likely to cost the global economy US\$1 trillion during 2020, when compared with forecasts from September 2019, as a result of a slowdown in the global economy to under 2% growth this year. This economic downturn is likely to disproportionately harm vulnerable and marginalized groups and further exacerbate income and gender inequality. As such, it is crucial that women and marginalized groups be included in the development of immediate and long term responses.

ROLE OF CLIMATE CHANGE IN EXACERBATING GLOBAL HEALTH CRISES

Climate change impacts [social and environmental determinants of health](#)—such as food and water security, clean air, and secure shelter—and these effects make people more susceptible to contagious diseases like COVID-19 (see e.g., the water shortage experienced in [Antigua and Barbuda](#)). Moreover, due to changing climate and weather patterns, certain regions are at risk of becoming more suitable environments for infectious diseases to live and propagate. For example, [vector-borne diseases are becoming more prevalent](#) because of global warming, allowing vectors (e.g., mosquitoes and ticks) to live in traditionally colder areas. Climate change, environmental degradation, and [land use change](#) also affect habitats and landscapes, forcing species that may be disease carriers to relocate closer to human settlements. As countries experience and adjust to the realities of a pandemic, it is crucial to consider how climate inaction affects environmental, social, and economic sustainability around the world.

ADDITIONAL RESOURCES

- ✓ PAHO, [COVID-19 geographic distribution in the Americas](#): interactive map of cases and deaths in the Americas.
- ✓ Public Health Agency of Canada, [Vulnerable populations and COVID-19](#).
- ✓ RCCE Working Group, [COVID-19: How to include marginalized and vulnerable people in risk communication and community engagement](#).
- ✓ UN Conference on Trade and Development (UNCTAD), [Coronavirus \(COVID-19\): news, analysis and resources](#): ongoing analysis on manufacturing, trade, foreign direct investment, and economic growth in relation to the COVID-19 pandemic.
- ✓ UN Economic Commission for Latin America and the Caribbean (ECLAC), [COVID-19 Global, regional and national impacts](#): presentation on likely impacts in Latin American and the Caribbean.
- ✓ WHO, [Climate change and infectious diseases](#).
- ✓ WHO, [COVID-19 situation \(map\)](#): interactive map of cases and deaths globally.
- ✓ WHO, [COVID-2019 situation reports](#): global updates published daily.
- ✓ WHO, [YouTube channel](#): WHO's daily press briefings and COVID-19 health education videos.

MITIGATION AND ADAPTATION STRATEGIES FOR PARLIAMENTS

The COVID-19 pandemic has created unique challenges for the continuity of parliamentary functions. However, certain mitigation and adaptation measures can help further the goal of limiting transmission, while allowing parliaments and parliamentarians to fulfill their roles of representation, legislation, and oversight.

Parliaments can create a Crisis Management Team composed of high-level members of the parliamentary administration. This team could be responsible for closely monitoring the rapidly evolving COVID-19 pandemic to protect the health and safety of employees and mitigate its impact. This team could remain in regular communication with local public health agencies to ensure that it is receiving the most current information and guidance and based on this information, implement corresponding mitigation and adaptation measures.

MITIGATING THE SPREAD OF COVID-19

The following are a list of temporary mitigation measures with varying degrees of stringency intended to promote social distancing and limit the contraction and transmission of the virus by parliamentarians and parliamentary staff. These can be considered in accordance with the advice of international and local health authorities.

TRAVEL

- Restrict all non-essential domestic and international travel by parliamentarians and staff (see e.g., the decision to advise against all non-essential travel, including of parliamentarians, by the [Government of The Bahamas](#))
- Require all parliamentarians and staff who have travelled to self-quarantine for 14 days upon their return to reduce the risk of unknowingly transmitting COVID-19

PARLIAMENT BUILDINGS

- Suspend public visits of the parliament (see e.g., the [Parliament of Trinidad and Tobago](#));
- Increase the frequency of cleaning and disinfecting in high-traffic areas and areas that individuals touch regularly (e.g., access points to swipe in and out of the building)
- Install hand sanitizer stations in high-traffic areas (see e.g., the [National Assembly of El Salvador](#))
- Restrict the use of public touch screen devices and appliances
- Require journalists and other visitors to disclose any travel within the last 14 days and/or any symptoms of illness
- Take the temperature of individuals entering the parliament (see e.g., the [National Assembly of Panama](#))

PARLIAMENTARY SESSIONS AND RELATED MEETINGS

- Suspend parliamentary plenary sessions or limit sittings to plenary sessions that address essential legislation
- Allow parliamentarians to work from their constituency office or home
- Conduct all sittings with only the necessary personnel and without a physically-present public audience
- Suspend in-person committee meetings or limit committee meetings to those focusing on legislation relevant to the health situation or oversight of the government's response to the situation
- If in-person plenary sessions or committee meetings are necessary, ensure there is sufficient space (following distancing recommendations from the WHO or local health authorities) between individuals
- Make plenary sessions and committee meetings less frequent and of shorter duration (see e.g., reduced debate times in the [Chamber of Deputies of Mexico](#))
- Create mechanisms for journalists to participate in press briefings remotely
- Suspend functions and events on the parliamentary precinct, including training sessions, workshops, conferences, public hearings, town halls, etc.

PARLIAMENTARY ADMINISTRATION

- Limit physical work attendance to essential staff (see e.g., decision by the [Chamber of Deputies of Argentina](#))
- Rotate essential staff to limit the overall number of individuals in the building
- Implement remote work arrangements, permitting flexible hours (see e.g., telework measures by the [Congress of Colombia](#))
- Maintain pay for non-salaried staff who have been asked to stay home
- Allow staff who are considered vulnerable to COVID-19 because of age or medical conditions to stay home with pay (see e.g., decision on staff attendance from the [Chamber of Deputies of Mexico](#))
- Allow staff of all genders who no longer have access to child care to work from home or take leave with pay (due to school or daycare closures)
- Provide parliamentarians, staff, and their respective families with access to a medical advisory service to specifically deal with health issues potentially related to COVID-19 (see e.g., notice from the [House of Commons of Canada](#))
- Conduct capacity building trainings or briefings with health specialists for parliamentarians (see e.g., training from the [National Assembly of Cuba](#))
- Make parking spaces available to staff who are required to work in the parliamentary precinct and inform them of their location (to avoid the need for staff to take public transit)
- Close cafeterias, dining rooms, stores, and gyms

ADAPTING PARLIAMENTARY FUNCTIONS TO SOCIAL DISTANCING

The following adaptation strategies and recently emerging examples provide a range of options that can help parliaments and parliamentarians adapt practices to fulfill their representation, oversight, and legislative duties.

STRATEGIES	EXAMPLES
<p>Use information and communication technologies (ICTs) to facilitate remote work with parliamentarians and staff, such as:</p> <ul style="list-style-type: none">• Using video conferencing technologies (e.g., Zoom, Skype, Bluejeans)• Providing access to long distance calling, as needed• Providing secure remote access to work files	<p>The National Assembly of Ecuador adopted a Regulation for the implementation of virtual session and teleworking and trained Permanent Secretaries of their respective committees on using video conferencing systems; moderating virtual sessions, including voting on proposals; and transmitting, processing, and storing digital information.</p>
<p>Adopt legislation or amend standing orders to allow essential plenary meetings to take place virtually and to establish a mechanism for electronic voting by parliamentarians.</p>	<p>The National Assembly of Ecuador adopted a Regulation for the implementation of virtual session and teleworking which allows plenary sessions to take place virtually, parliamentarians to vote remotely, and sessions to continue to be livestreamed.</p>

STRATEGIES

EXAMPLES

The [Chamber of Deputies of Paraguay](#) presented a bill to allow parliamentarians to sit in plenary sessions virtually.

The [Chamber of Deputies of Brazil](#) adopted a law to establish a Remote Deliberation System which allows plenary sessions to take place virtually, parliamentarians to vote remotely, and sessions to continue to be livestreamed.

The [Congress of Chile](#) adopted a constitutional reform that allows it to hold sessions virtually under exceptional circumstances, parliamentarians to vote remotely, and sessions to continue to be livestreamed.

The [Senate of Spain](#) passed a resolution in 2013 to allow senators who are unable to be physically present in plenary sessions to vote virtually. [Read more](#) on how the Senate was able to use technology to respond to COVID-19.

In accordance with the parliament's standing orders and with a multi-partisan agreement, organize in-person sessions with only the required number of parliamentarians needed to reach quorum in each chamber, while ensuring proportionate cross-party representation and that parliamentarians who attend do not need to travel by air, in circumstances where emergency or other essential legislation needs to be passed and virtual voting is not an option.

The Parliaments of [Canada](#), the [United Kingdom](#), and [Queensland](#) (a local parliament in Australia) are considering this strategy to provide legislative approval to proposed emergency measures related to the crisis.

Conduct virtual committee meetings and allow virtual witness testimony via video conferencing technologies.

The National Assembly of Ecuador adopted a [Regulation for the implementation of virtual session and teleworking](#) which allows committee sessions to take place virtually, parliamentarians to vote remotely, and sessions to continue to be livestreamed.

STRATEGIES

EXAMPLES

Continue public engagement while adhering to social distancing by implementing:

- Digital question and answer sessions with constituencies via video conferencing
- Call-in “office hours”
- Access to parliamentarians and staff via WhatsApp
- Updates on social media (Facebook, Twitter, Instagram) and traditional forms of communication, such as newspapers, radio, and bulletins in public spaces
- An online info-bulletin to constituents to inform them of official sources of information regarding the situation and resources available to them
- Updates to information on how to communicate with the parliamentary departments responsible for access to information and citizen participation
- Reminders of where the public can find live transmission of plenary sittings online, on the parliamentary television network, or on the radio
- Virtual outreach to community organizations, such as health centres, food banks, women’s shelters, etc. to identify support required

The [Senate of Chile](#) has implemented measures to enable witnesses to participate in committee meetings via teleconference.

The [Chamber of Deputies of Argentina](#) is allowing parliamentarians from vulnerable groups to participate in committee meetings via Zoom.

The [Legislative Assembly of Costa Rica](#) is facilitating citizen participation using WhatsApp, a dedicated website, drop-point mailboxes, and email.

The [Legislative Assembly of Panama](#) has informed citizens on their protocol for streaming plenary sessions through different platforms.

The ParlAmericas Open Parliament Portal (Parltools.org) offers a [section on digital tools](#) used by parliaments to engage with citizens. These tools can be helpful for general parliamentary engagement, committee engagement, or for individual legislators who want to connect with their constituents during a health crisis.

PARLIAMENT’S ROLE DURING A HEALTH CRISIS

As with other crisis situations, the COVID-19 pandemic has put significant pressure on governments around the world to respond to a rapidly evolving situation with many unknown variables. In addition, such crises exacerbate pre-existing social and economic inequalities. As Latin America and the Caribbean remains the most unequal region in the world [according to ECLAC](#), it is clear that the devastations

that are already beginning to occur will be aggravated without significant and immediate government spending. If appropriate measures are not taken, social distancing is unlikely to succeed, increasing the mortality rate and causing other losses. When families are worried about meeting their basic needs—or if employers are not obligated to discontinue risky work activities—the likelihood of spreading the virus increases exponentially.

In response to COVID-19, many countries in the hemisphere are not only taking measures to bolster their public health systems and social services, but are also debating emergency packages that will be of critical importance to people's immediate livelihoods, such as their ability to maintain employment and afford groceries and medical expenses. In addition to the informal economy, the sectors that will be most affected include retail, tourism, airlines, and entertainment. These packages may also play an important role in peoples' longer-term wellbeing, and even their survival. The economic recovery from the impacts of COVID-19 will not be rapid. The fiscal measures adopted should therefore consider extreme volatility in the market, disruptions to both the supply and demand side of economies, interruption of global value chains, and inflation. Front-loaded spending can help to stabilize the situation by ensuring that as much money as possible is flowing into the economy quickly.

Parliamentarians have a crucial function to oversee this response, as well as evaluate and swiftly pass emergency legislation to approve national funds to meet the needs of the populations they serve. They can also promote transparency around global and national developments surrounding COVID-19, which is key to maintaining the public's trust in the government's response to the pandemic. In this sense, they can also complement communication efforts, where possible, to ensure that their constituencies receive the information they need.

The following series of questions identifies oversight considerations for parliamentarians:

PUBLIC HEALTH RESPONSE

WHAT STEPS IS THE GOVERNMENT TAKING TO...?

- Prepare the health system for COVID-19, including to procure the necessary medications, supplies, and equipment (including for testing) and to protect health care workers;
- Coordinate the response between health authorities at all levels of government;
- Strengthen epidemiological surveillance systems that are able to rapidly detect community-level outbreaks of COVID-19 and produce disaggregated data (including by gender) on differential impacts, rates of infection, etc.;
- Monitor and respond to the burden on the health system;
- Protect personal data by collecting and sharing only the minimal amount needed to inform prevention and containment measures, and by respecting national data privacy legislation (see e.g., statement by the [National Institute of Transparency, Access to Information and Protection of Personal Data](#) of Mexico - in Spanish);
- Ensure that vulnerable groups, regardless of immigration status, have equitable access to prevention and health care resources that they require, as well as to specialized services when required; and
- Adopt gender-responsive approaches to all preparedness and response measures taken to mitigate COVID-19, with special attention to preventing gender-based violence.

EMERGENCY RELIEF RESPONSE

WHAT STEPS IS THE GOVERNMENT TAKING TO...?

- Increase funding to hospitals and the health sector, and ensure that testing and treatment for COVID-19 is available to all free of charge, regardless of insurance or immigration status;
- Provide universal employment insurance, including paid sick leave for those who have contracted COVID-19 and their caregivers;
- Allow for payment deferrals or suspensions (loans, student debt, rent and mortgage, utilities, etc.);
- Grant funds to support the survival of small and medium enterprises;
- Take into account the sudden increase in care work that already disproportionately falls on women, including those previously in paid employment;
- Expand non-contributory social protection programs;
- Provide back pay, wage replacement, or layoff protections;
- Incorporate tax exemptions or credits;
- Present logical criteria for bailout recipients;
- Allow for any emergency construction and manufacturing that may be required; and
- Provide support for some of the most vulnerable communities in your constituency:
 - Informal workers;
 - Those experiencing homelessness, or those at risk of it;
 - Undocumented migrants;
 - Single-parent households;
 - Domestic workers;
 - People living with disabilities;
 - Indigenous peoples;
 - Women and children in shelters and anyone at risk of domestic violence during social isolation;
 - Non-profit organizations (as they may be ineligible for business loans or grants); and
 - Frontline health care workers, among others.

COMMUNICATION WITH THE PUBLIC

WHAT STEPS IS THE GOVERNMENT TAKING TO...?

- Provide timely and accurate information to the public on risks, preventive measures at the community level (such as social distancing and self-isolation for recent travellers), other relevant government measures being implemented, and the availability of public resources, including eligibility for relief programs;
- Demonstrate leadership and communicate with the public regularly, such as through the establishment of a Chief Public Health Officer, filled by a qualified public health professional who provides independent reporting on actions adopted and progress made;
- Counter the spread of misinformation;
- Ensure, as much as possible, the public's continued access to the internet;

- Disseminate information in all major languages spoken in the country, including Indigenous languages;
- Disseminate information via various ICTs (e.g., online, radio, television), including to those who may not have access to the internet;
- Respond to the elevated dangers, including domestic violence, that may be faced by women and other groups while self-isolating and practising social distancing; and
- Disseminate information that is user-friendly and accessible to those with various disabilities, including by making plain language, pictorial (e.g., infographic), and braille resources readily available.

Consider recommendations of the [Inter-American Commission on Human Rights](#) to protect access to and free flow of information during a pandemic.

ANTI-CORRUPTION MEASURES

WHAT STEPS IS THE GOVERNMENT TAKING TO...?

- Prevent the diversion or mismanagement of public funds within the health system and other governmental agencies involved in the response;
- Ensure open and transparent contracting processes for the procurement of goods and services;
- Protect the work of journalists, including by upholding access to information laws and provisions;
- Provide whistleblower protection and mechanisms for reporting wrongdoing, price gouging, and other predatory practices; and
- Ensure the open publication of research into vaccines and treatments.

PARLIAMENTARY COMMUNICATIONS WITH THE PUBLIC

Parliaments and parliamentarians can also contribute to public communications regarding the situation. In doing so, they may consider the following suggestions:

Institutional Communications:

Publish, in a timely manner, any mitigation and adaptation measures adopted by the parliament on the homepage of its website;

Disseminate this information via various ICTs (e.g., online, radio, television), including to those who may not have access to the internet;

Publish references to official websites where the public can obtain up-to-date information about the situation.

Communications by Parliamentarians:

Disseminate an info-bulletin to constituents with official updates on the situation, links to official websites for further information, as well as any measures that impact constituency offices and the channels through which the public can engage with their parliamentary representative;

Publish, in a timely manner, any mitigation measures adopted by the parliamentarian on their website;

Counter misinformation circulating on social media by notifying the platform and identifying it publicly as misinformation;

Explore possible steps to ensure access to vital information in constituencies, such as working with community leaders to disseminate information; and

Identify vulnerable groups in the constituency represented and consider options to ensure that they have timely access to information about the situation.

Consider PAHO's [COVID-19 Guidelines for communicating about coronavirus disease](#).

This document will be updated as the situation around COVID-19 develops. The ParlAmericas International Secretariat would therefore be pleased to receive any thoughts and learn about mitigation and adaptation measures being undertaken by member parliaments at parlamericasopn@parlamericas.org.

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