

окремими її органами; реформування державної влади; оптимізація засад діяльності та системи суб'єктів публічного адміністрування, а також визначення ключових критеріїв розподілу владно-управлінських повноважень та сфер відань між ними; зміцнення судової гілки влади у забезпеченні дотримання прав, свобод та інтересів суб'єктів публічних правовідносин; розбудова європейської моделі організації здійснення державної влади та ін.

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### **CONCERNING HUMAN RIGHTS IN THE UK IN CONDITIONS OF THE FIGHT AGAINST COVID-2019**

Pandemic played an important role in the state policy of every country in the world concerning the fight with COVID-2019.

The global community has got one more reason for its internal differently directed changes to give a rather quick reaction for its further existence and development in conditions of the fight against COVID-2019 [1, p. 439].

COVID-19 is added to the list of infectious diseases. Persons actually or potentially infectious who constitute a serious or imminent threat of incidence or transmission of the virus may be compulsorily detained, isolated and screened. The police may direct isolation and screening and may restrict or prohibit events and gatherings [2, p. 88].

Extraordinary times can call for emergency legislation with extraordinary measures. However, it is crucial that the measures we invoke to battle the coronavirus pandemic are compatible with human rights [3, p. 13].

The government should have particular regard to its human rights obligations when taking decisions under the Coronavirus Act and adopt a constructive approach to any human rights challenges [4, p. 11].

The Act appears to have five principal aims: 1) to increase the available health and social care workforce; 2) to ease the burden on frontline staff; 3) to slow and contain the virus; 4) to manage the deceased with respect and dignity; 5) to support people (especially the vulnerable, namely those 70 or older, those with an underlying health condition, and pregnant women) [2, p. 86].

A great deal of research is currently being performed to search for a vaccine that will afford protection against the devastating effects of Covid-19. Indeed, the development of an effective vaccine is a possible contender for an

exit strategy from the widespread public health restrictions that are currently enforced across the world. In that context, it is important to note that neither the Regulations nor the CA authorize the imposition of compulsory treatment, including vaccination, in response to the coronavirus. Moreover, the PHA does not authorize a JoP to order such treatment and explicitly prohibits future regulations from including provisions mandating medical treatment (including vaccinations) [3, p. 13-14].

As the crisis evolves, and as the government begins drawing up measures to lift the lockdown, the government should take care to avoid any legal uncertainty that might arise if there is any ambiguity as to the adequacy of existing powers [4, p. 11].

The question of compulsory vaccination raises salient human rights questions that I cannot address here, potentially engaging the right to freedom of religion (Art 9), freedom of expression (Art 10), right to private life (Art 8), and possibly the right to freedom from inhuman and degrading treatment (Art 3). However, if a vaccine proves to be the most viable exit strategy from our current predicament, the pandemic may yet require us to confront the question of whether compulsory vaccination could be a necessary and proportionate response to this public health threat, and how far we might be willing to revise existing limits to regulations that the Secretary of State may make in response to a pandemic threat [3, p. 14].

The United Kingdom (UK) is a single international state, but it comprises a sort of federation of four “nations”: England, Scotland, Wales and Northern Ireland. We live in an age of devolution, and health is a devolved matter and health law differs quite markedly throughout the four nations. Therefore, much of the 2020 Act is concerned to harmonize UK law, and respect the devolution principle, as the virus is no respecter of geographical and national boundaries [2, p. 89].

The prevention of human rights violations is a key part of the protective policy of every country in the world [5, p. 585].

Fear for health has led people to willingly give up their traditional freedom in return for security, health security. A real sense of community has come about through the NHS. The people are content for the moment to support Government [2, p. 89].

In conclusion, we have to express the support of the UK’s position concerning human rights protection in the pandemic period. As Hogarth R. rightfully admitted, to ensure that the UK’s coronavirus response it is needed, in particular: 1) the government should engage with ordinary forms of parliamentary scrutiny, working with parliament to adapt these as necessary to allow for social distancing; 2) if the government decides to keep current “lockdown” restrictions in force, it should seek a parliamentary resolution approving those restrictions as soon as possible; 3) ministers should address the

legal issues that have been identified with the lockdown regulations, and bear in mind the legal risk of using secondary legislation; 4) the government should make statements to parliament explaining the basis of any decisions taken in the mandatory “reviews” of the lockdown, and should make provision for regular parliamentary renewal of the regulations. If further regulations are required, the government should seek parliament’s approval for these prospectively, rather than using the emergency procedure and seeking parliament’s approval retrospectively; 5) the government should ensure measures taken under the Coronavirus Act 2020 are subject to scrutiny and safeguards equivalent to those provided for in the Civil Contingencies Act 2004; 6) if the government needs to take further powers to respond to the crisis, it should ensure those powers are subject to scrutiny and safeguards equivalent to those provided for in the Civil Contingencies Act 2004 [4, p. 1-2].

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