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**AS/Per (2020) PV 04**

15 September 2020

## **Standing Committee**

### **Minutes**

**of the meeting held by videoconference  
on 26 June 2020**

## 1. OPENING OF THE MEETING

**Mr Rik Daems**, President of the Assembly, **opened** the meeting at 10 am. He paid tribute to the Director of General Services of the Parliamentary Assembly, Mr Horst Schade, who was attending his last meeting, for his great dedication throughout his 24-year career at the Assembly.

## 2. EXCHANGE OF VIEWS WITH MR MILTIADIS VARVITSIOTIS, ALTERNATE MINISTER OF FOREIGN AFFAIRS OF GREECE, CHAIRMAN OF THE COMMITTEE OF MINISTERS OF THE COUNCIL OF EUROPE

CM/Inf (2020) 9  
CM/Inf (2020) 10

**The President** welcomed Mr Varvitsiotis, Alternate Minister of Foreign Affairs of Greece and Chairman of the Committee of Ministers of the Council of Europe, who had also been a member of the Parliamentary Assembly from 2004 to 2019. The documents taking stock of the Georgian Presidency of the Committee of Ministers and setting out the priorities of the Greek Chairmanship of the Committee of Ministers were included in the files.

**Mr Varvitsiotis** said that he had indeed spent very many years at the Parliamentary Assembly and hoped that the health situation would improve so that he could address the Assembly during its October 2020 plenary session. He presented the priorities of the Greek Chairmanship, which had been altered to take account of the Covid-19 pandemic and its consequences, in particular regarding the measures taken by the member States, which called for ongoing vigilance to protect human lives and public health. In Greece, the measures taken had been adopted in line with democratic procedures and had been ratified by parliament, but this had not been the case in some countries. The question of access to justice and the holding of elections was crucial here. Effective responses to the unprecedented health crisis had to be in full compliance with human rights and the principles of democracy and the rule of law. In close consultation with the Secretary General, the Greek Chairmanship had therefore considered that that should be the central theme of its Chairmanship and, in this connection, had identified certain priorities: defining the implications of the pandemic for our societies, our democracies and our economies; identifying lessons to be learned from the pandemic and best practices in the context of our response to the crisis; and analysing the conditions under which the precautionary emergency measures adopted by States were in conformity with the provisions of the European Convention on Human Rights. This ambitious agenda would be implemented digitally, and it would therefore be an “e-Chairmanship” that would be open towards civil society and experts so as to determine the challenges and the common responses needed. At the time when the 70<sup>th</sup> anniversary of the European Convention on Human Rights was being celebrated, the 130<sup>th</sup> ministerial session scheduled for November 2020 would be an opportunity to reiterate member States’ commitment to the principles and values the Council of Europe stood for, which were humankind’s prized assets, and to adopt a political declaration on how to protect human rights in the context of a pandemic.

Investing in young people and focusing on future generations was a key strategy supported by the Greek Chairmanship, with a number of thematic priorities:

- education and democratic culture in a digital era, in particular access to school and educational facilities and access to information, the involvement of young people in the democratic process and civic life and protection against the hazards looming in disinformation and distortion of reality on social media;
- protecting children as vulnerable persons at risk of poverty, violence, trafficking and forced labour, including unaccompanied migrant minors;
- safeguarding the right of younger generations to enjoy cultural heritage unaffected by the impact of climate change, following on here from the priorities of the outgoing Georgian Presidency and recognition of the right to a healthy environment, while also focusing on protecting cultural heritage and the right of younger generations to enjoy heritage protected from the effects of climate change.

The European Social Charter and the protection of social rights, in particular in connection with the impact of the health crisis on the rights of vulnerable social groups and access by them to healthcare and with regard to the risks of discrimination, were also a priority of the Greek Chairmanship. There should be no place for marginalisation or stigmatisation.

Lastly, Mr Varvitsiotis announced the key dates on the agenda of the Greek Chairmanship, including a conference of justice ministers in September on the independence of justice and the rule of law and a conference of education ministers in October on the establishment of an observatory on history teaching in Europe, which was a vital initiative, as well as a conference of culture ministers and a conference of ministers responsible for sport.

In general, the population had observed States' responses to the Covid-19 pandemic overall with a great sense of maturity and respect for human life. Nevertheless, the restrictions imposed to protect human lives and public health did not mean that democratic values and fundamental freedoms could in future be restricted easily or without appropriate explanations whenever emergency situations arose. The measures taken had to be necessary, temporary, proportionate and constantly reviewed, as had been reiterated by all Council of Europe institutions.

**The President** pointed out that drawing up standards was the very core of the Council of Europe's work and that it would therefore be very important for the Athens Declaration to lay down a number of standards to be complied with for future crises in terms of freedoms, rights, democracy and the rule of law because, unfortunately, a similar situation could arise again in future. Europe's values had to remain intact. He also welcomed the fact that the Chairmanship was taking account of the link between the environment and human rights. Climate and environmental issues were crucial because nature had made us the most valuable gift, namely life – Article 2 of the Convention referred to the "right to life". It was therefore obvious that these two important issues, i.e. the environment and human rights, should be linked.

**Mr Chatzivasileiou** fully supported the priorities of the Greek Chairmanship and congratulated the minister on the preparatory work for the Chairmanship. The current health crisis could help in terms of anticipating and dealing with similar crises in future. Even though preserving human lives was the overriding priority, democracy, the rule of law and human rights had to be respected even in exceptional circumstances. Most member States had taken steps that ensured such respect, but others had failed to comply with the standards of the European Convention on Human Rights. Consideration had to be given to a common framework.

**Ms Schou** said that Europe was facing a difficult period with the Covid-19 pandemic and that Greece was confronted with a major challenge as a country that had taken in many migrants and refugees. She wondered about the health situation in the camps.

**Ms Stienen** thanked the minister for his excellent speech, especially the focus on the inclusion of young people. As Assembly rapporteur on "Upholding human rights in times of crisis and pandemics: gender equality and non-discrimination", she noted that the crisis had heightened inequalities in European societies. Women, the youngest people, the oldest people, migrants, the Roma community and Travellers were affected in different ways. What could be done to achieve more inclusive policies?

**Mr Varvitsiotis** thanked the Greek parliamentary delegation for its contribution to the Assembly's work. Although he could talk for many hours about the situation of the migrants, the good news was that there had not been any deaths in the migrant and refugee camps or any outbreaks of the epidemic in the hotspots on the Greek islands. The bad news was that there was overcrowding of migrants because of the mass arrivals in the last quarter of 2019 and at the Greek border where migrants had arrived in large numbers in February-March 2020 following the violation by the Turkish authorities of the agreements with the European Union when the pandemic had already started. New reception centres had been built on the islands and still more would be built during the summer. The legislation on asylum seekers had been amended to enable applications to be processed more quickly and the backlog to be dealt with. In general terms, the situation was returning to normal, but it was vital that Greece did not have to cope with fresh influxes of refugees, which was the message which he had passed on to his Turkish counterpart. It was necessary to ensure respect for human rights and the right of asylum, while regulating the burden which migrants were placing on stability and security, as well as bilateral relations, in the region. The economic and social consequences of the pandemic must not leave any room for potential destabilising factors. Steps had also been taken in Greece concerning the elderly, women and the fight against domestic violence, and the Roma community so as to identify specific responses for each of these vulnerable groups.

**Mr Kox** mentioned the approach followed by Greece concerning the Covid-19 pandemic and the awareness-raising campaign that had been promoted widely in the media. He asked whether the list of media outlets which had received funding should not be published for the sake of transparency. He also referred to the judgments of the European Court of Human Rights in the cases concerning Selahattin Demirtaş and Osman Kavala and wondered about the willingness of the Greek Chairmanship of the Committee of Ministers to give the issue top priority so as to have the judgments executed by Turkey.

**Mr Maire** pointed out that the Assembly had issued a message of solidarity at the Standing Committee meeting in March 2020 when Greece was on the front line in taking in migrants and he asked for more information about the health situation in the migrant and refugee camps during lockdown. He welcomed the Greek initiative to have a declaration adopted at the ministerial session in Athens and hoped that it would take account of the work of the Assembly's committees on the pandemic and its consequences.

**Mr Gutiérrez** mentioned the 2008 economic and financial crisis, which had hit the countries of southern Europe hardest, while there was now recognition in some quarters that it could have been dealt with differently. At present, northern European countries were being reluctant about setting up an EU recovery fund to deal with the economic fallout of the pandemic. Given the lack of solidarity on the part of some countries, with confrontation between the North and the South and the East and the West, did the future of the EU depend on the responses to these issues?

**Mr Varvitsiotis** stressed that the awareness-raising campaign in Greece had indeed been quite successful and the population had clearly understood the purpose of the restrictive measures which had been taken. In the case of the migrant and refugee camps, the necessary health measures had been taken during lockdown and followed strictly, in particular to ensure the protection of those groups and provide them with masks and all the equipment needed. This had limited the spread of the pandemic in the hotspots and camps throughout the country. Hospital facilities had also been set up in preparation for any worsening of the pandemic. Recovering from the pandemic was a huge economic challenge and Europe had to come up with answers to limit the impact of the expected economic recession. In Greece, the economic sectors which had taken some time to recover from the financial crisis had been very hard hit by this new crisis, with unemployment rising sharply again. Europe's response had to be generous and based on solidarity. The future of the EU could indeed be at stake and it would be determined more on a political level than on an economic one. Lastly, it should be noted that the Committee of Ministers was supervising the execution of the judgments in the cases of Selahattin Demirtaş and Osman Kavala, which raised the issue of freedom of expression in Turkey, and had notified the Turkish authorities that if no progress was recorded by June 2021, it would adopt an interim resolution.

**Mr Pocij** commented that the pandemic had caused difficulties for all European economies but that Greece was faced with an additional challenge with the migrants. Had Greece received European solidarity and had it felt that it was being supported?

**Mr Tornaritis** pointed out that the Greek Chairmanship of the Council of Europe coincided with the 70<sup>th</sup> anniversary of the European Convention on Human Rights. What would be the added value of the declaration which the Chairmanship was intending to present in Athens in the very demanding context of the pandemic and its consequences?

With reference to the events in March, **Mr Kiliç** pointed out that the Council of Europe had asked Greece to stop turning back migrants and to investigate the practices concerned. On the subject of freedom of religion, he also wondered whether the Greek Chairmanship was intending to examine the issue of the freedom to practise the Muslim faith in Greece.

**Sir Roger Gale** wondered what the Greek Chairmanship could do to help ensure freedom of movement, with reference in particular to the northern part of Cyprus, which was occupied illegally by Turkey, and Georgian territory, Crimea and eastern Ukraine, which were occupied illegally by Russia.

**Mr Varvitsiotis** returned to the challenge of migration. While the financial compensation was generous, the same could not be said about the refugee resettlement policy. The resettlement of vulnerable groups and unaccompanied minors was a necessity and should be a priority for Europe. The policy here had worked well on a bilateral basis, with Luxembourg, Portugal, Germany and France. A real European asylum policy was needed, including a resettlement plan at European level. Securing borders should not rule out a humanitarian response. With regard to the allegations about migrants being turned back, on land or at sea, Greece had in no way been involved in any illegal action of that kind, not least because the migrants were coming from Turkey, which was regarded as a safe State. Any loss of human life was a tragedy. The European Convention on Human Rights was the foundation of Europe's civilisation. The relevance of the convention with regard to domestic legal systems in terms of guaranteeing fundamental human rights and democratic values effectively throughout Europe, on the one hand, and the accession of the EU to the convention, while preserving the primacy of the Court, were the two key issues to be resolved. In terms of freedom of religion, the Assembly had considered reports on the situation of the Greek minority in Imbros and Tenedos and of the Muslim minority in Greece, in Thrace. Although Greece was a relatively homogenous country, it sought to preserve the rights of its minorities. The Turkish decision to open Hagia Sophia again to Muslim worship, as a mosque, called into question its status as a world heritage monument and was a source of concern for the international community and UNESCO. It was important for some monuments to retain their intercultural dimension. Lastly, it was important to reassert the principles of the Council of Europe and the United Nations concerning the violation of the territorial integrity of States, even though the two organisations did not really have the means to ensure borders were respected. While conflicts could not be resolved during a six-month chairmanship, it was necessary to reiterate principles and values with determination.

**The President** warmly thanked the minister for the fruitful exchange of views and his readiness to answer members' questions.

### 3. EXAMINATION OF NEW CREDENTIALS

Doc. 15120

The Standing Committee **ratified** the credentials of new members and substitutes in respect of the parliamentary delegations of Estonia, Germany, Hungary, Slovak Republic and the United Kingdom, as set out in Doc. 15120.

### 4. MODIFICATIONS IN THE COMPOSITION OF COMMITTEES

Commissions (2020) 06 and addendum

The Standing Committee **ratified** the changes in the composition of Assembly committees in respect of the delegations of Estonia, France, Germany, Hungary, Slovak Republic, Switzerland and the United Kingdom, as set out in document Commissions (2020) 06, as well as the changes in the membership of the Committee on the Honouring of Obligations and Commitments by Member States of the Council of Europe (Monitoring Committee) and of the Committee on the Election of Judges to the European Court of Human Rights, as set out in document Commissions (2020) 06 addendum.

### 5. AGENDA

AS/Per (2020) OJ 05 rev3

The revised draft agenda was **adopted**.

### 6. MINUTES OF THE MEETINGS OF THE STANDING COMMITTEE (30 APRIL AND 7 MAY 2020)

AS/Per (2020) PV 02

AS/Per (2020) PV 03

Both minutes of the meetings of the Standing Committee held on 30 April and 7 May 2020 were **adopted**.

### 7. REFERENCES TO COMMITTEES

AS/Per (2020) 05

The Standing Committee **ratified** the references to committees (see Appendix I).

### 8. OBSERVATION OF THE EARLY PARLIAMENTARY ELECTIONS IN AZERBAIJAN (9 FEBRUARY 2020)

Doc. 15090

**Mr Schwabe** presented the findings and conclusions of the ad hoc committee comprising 23 members divided into 14 observer teams and praised the very good co-operation with the OSCE/ODIHR. The committee had noted that, despite the large number of candidates, there had been no genuine competition and voters had not been provided with a meaningful choice. The widespread violations of counting procedures had raised serious concerns about the results of the voting in general. A number of candidates had been prevented from running, in contradiction of the judgments of the European Court of Human Rights and the repeated requests from the Council of Europe in the cases of Ilgar Mammadov and others. The Council of Europe had called on Azerbaijan several times to release Mr Mammadov and quash his conviction. While Mr Mammadov had been released, after spending five years in detention, his conviction had not been quashed, which had prevented him from running. The restrictive legislation and political environment had prevented genuine competition and voters had not had a meaningful choice. The longstanding recommendations by the Venice Commission, including those relating to fundamental freedoms, the media environment and candidate registration, now had to be implemented. Some 23 judgments of the European Court of Human Rights concerning violation of the right to free elections had still not been executed, which had prevented some candidates from running. A total of 1 314 candidates, 21% of whom were women, had stood. In spite of the constitutional guarantees, freedom of expression, assembly, association and movement, and access to information, had been severely curtailed by legislation. The media had failed to provide voters with information on contestants and their platforms, and some candidates' campaigns had simply not been covered by broadcasters. Many candidates had campaigned on social media, but this had not compensated for the lack of coverage by the traditional media. The central election administration had functioned properly and acted transparently, but the observer teams had noted significant procedural irregularities during the counting and tabulation of votes on election day, which

had raised concerns as to the honesty of the results: voter lists had not been made available and protocols had not been provided, the counting process had not been transparent, it had been done hastily and sometimes had appeared to be a formality carried out to officialise results which had been established in advance, etc. The ad hoc committee had urged Azerbaijan to implement the judgments of the European Court of Human Rights, the repeated requests of the Assembly and the recommendations of the Venice Commission and GRECO.

He had sought to conduct the election observation mission with the aim of achieving an honest, transparent and impartial assessment. It was clear that there had been much falsification on election day to prevent any victories by opposition candidates. Moreover, some 57 election observation missions organised by Azerbaijan had also been deployed, but only one – that of the OSCE and the Parliamentary Assembly – had had any legitimacy. Nevertheless, some members of the Parliamentary Assembly had taken part in these national missions: rules were therefore needed to prohibit participation in such third-party missions which undermined the work of the Assembly.

**Mr Seyidov** welcomed the co-operation with the Parliamentary Assembly and the Council of Europe and pointed out that Azerbaijan had invited them to observe the parliamentary elections. A pre-electoral mission had also been arranged. In a sign of change, the Azerbaijani Parliament now had a female speaker, Ms Sahiba Gafarova, who was a former member of the Assembly. He also wondered why the Assembly's observer mission should monopolise the assessment of the elections. 883 international observers from the United States, France and other international organisations had also been accredited and it was not acceptable for only the assessment by the OSCE and Assembly observation mission to be taken into account. The Central Election Commission had assessed the conduct of the elections and had actually been more critical on some points than the Assembly's observers; in particular, it had invalidated the results in four constituencies. The elections had been conducted democratically and, in spite of some shortcomings, had on the whole been much freer and fairer than those held in the past. That would be reflected in the composition of the new parliamentary delegation. Lastly, he confirmed that Ilgar Mammadov's conviction had indeed been quashed and that compensation had been paid to him.

Following the somewhat contradictory statements by Mr Schwabe and Mr Seyidov, **Mr Kiliç** asked for clarification regarding the personal situation of Mr Mammadov, who was now free but had been prevented from standing for election. In addition, with regard to the international observers invited by the national authorities, there was nothing in the Rules of Procedure to prevent national parliamentarians who were also Assembly members from taking part in election observation missions other than those organised by the Assembly at the invitation of a State.

**Mr Schwabe** explained that there were two sides to Mr Mammadov's case. While he had been released, he had on the other hand been prevented from taking part in the elections. His political party had been able to put forward candidates, but the fraud had been so great – as he himself had witnessed – that there had been no possibility of their winning. Acknowledging that the elections had been freer and fairer than the previous ones meant agreeing that past elections had been neither free nor fair. It had to be said clearly: the Assembly had carried out its election observation mission in the best way possible; it was unacceptable for observation missions to be arranged in parallel for the sole purpose of discrediting the Assembly's work. New rules were needed.

**The President** pointed out that any Assembly members present in a country during elections without being members of the Assembly's observation mission could not claim to speak as members of the Assembly or give the impression that they were speaking on the Assembly's behalf. Otherwise, sanctions could be imposed by the Assembly.

## **9. EXCHANGE OF VIEWS WITH DR TEDROS ADHANOM GHEBREYESUS, DIRECTOR-GENERAL OF THE WORLD HEALTH ORGANISATION**

**Dr Tedros Adhanom Ghebreyesus** thanked the Standing Committee for inviting him to exchange views, information and guidance. European member States of WHO had played a key role in the Covid-19 response and showed continuous support for a multilateral approach to confront this crisis in Europe and beyond. Many European Heads of State had expressed their support and solidarity at the World Health Assembly in May 2020, including Chancellor Merkel, President Macron, Prime Minister Sanchez and Prime Minister Conte. WHO very much appreciated the expression of political, financial and technical support from Germany and France – 500 million euros from Germany and 50 million from France, and a further 100 million in masks for the WHO Health Academy. This complemented the strong support of the European Commission in launching

the Access to Covid-19 Tools Accelerator, to speed up the development, production and equitable distribution of vaccines, diagnostics and therapeutics.

Parliaments played a critical role in translating international instruments into national laws that advance health, in approving budgets to ensure people get the services they need, including during health emergencies, and in monitoring policies and strategies to ensure effective, efficient and transparent implementation. To perform these functions properly, parliaments should be informed, involved and engaged, and regional platforms like PACE played a critical role in doing that. Every year at the World Health Assembly parliamentarians were encouraged to join national delegations and participate in specific sessions to discuss how parliaments could contribute to the global health agendas. The very first Parliamentary Forum during the Assembly should have been held this year, but it had been postponed to next year because of the situation. For the first time, WHO had established a program of engagement with parliaments, which was coordinated centrally at WHO headquarters in Geneva, working in close collaboration with all regions. WHO was also working hand in hand with the Inter-Parliamentary Union and had signed in 2018 a Memorandum of Understanding to strengthen co-operation in three areas: universal health coverage, global health security, and promoting health for vulnerable groups, including women, children and adolescents. In 2019, the IPU Assembly had adopted a landmark resolution, committing to leverage the power of parliaments to make progress towards universal health coverage. Parliaments had therefore a critical role in the response to the Covid-19 pandemic.

More than 9.2 million cases of COVID-19 had now been reported to WHO, and almost 480 000 deaths. The pandemic was still accelerating, the virus was still circulating, and it was still deadly. In the first month of this outbreak, less than 10 000 cases had been reported to WHO. In the last month, almost 4 million cases had been reported. A total of 10 million cases and 500 000 deaths might be expected within the next week. Although transmission had been suppressed in many European countries, Europe should be on its guard. In other regions, some countries were continuing to see a rapid increase in cases and deaths. Some countries that had successfully suppressed transmission were now seeing an upswing in cases as they reopened their societies and economies. All countries were facing a delicate balance between protecting their people, while minimizing the social and economic damage, and respecting human rights. But it was not a choice between lives, livelihoods and human rights. Countries should preserve them all. All countries were urged to double down on the fundamental public health measures that worked: find, isolate, test and care for every case, and trace and quarantine every contact. At the same time, these measures could only be effective if each and every individual would take measures to protect themselves and others: maintain physical distance; continue cleaning your hands; and wear a mask where appropriate.

The health effects of the pandemic went far beyond the suffering caused by the virus itself. The pandemic had jeopardized the achievement of most Sustainable Development Goals by 2030. In the WHO European Region, 68% of countries reported that the pandemic had disrupted services to manage noncommunicable diseases. 66% of services for hypertension management, and 58% of those to manage diabetes and its complications had been partially or completely disrupted. We had also observed up to a 60% reduction in TB detection, which led to late start of treatment and an increase in mortality. National immunization services had been interrupted in some countries, with others experiencing a significant drop in coverage. This backlog of unattended care should be addressed and these and other vital services should be reopened with the utmost urgency but in safe conditions for frontline workers and patients alike.

WHO was especially concerned about the pandemic's impact on people who already struggled to access health services, often women, children and adolescents. Early evidence suggested people in their teens and 20s were at greater risk of depression and anxiety, online harassment, physical and sexual violence and unintended pregnancies, while their ability to seek the services they needed was reduced. Refugees were also particularly at risk of Covid-19 because they often had limited access to adequate shelter, water, nutrition, sanitation and health services. Everything should be done to prevent, detect and respond to transmission of Covid-19 among refugee populations. WHO had developed guidance for health facilities and community activities, on maintaining essential services, including for women, newborns, children and adolescents. This included ensuring women and children could use services with appropriate infection prevention and control measures and respectful maternal and newborn care.

Since 31 December 2019, when WHO had received the first report of cases in China, WHO had been working day and night to coordinate the global response, provide evidence-based scientific and technical guidance, catalyse research and development, and provide direct support to countries most in need. It had rung the alarm bell early and often, declaring a global health emergency – the highest level of alert – on the 30 January, when there had been less than 100 cases outside China, and no deaths. It had brought together thousands of experts to analyse the evolving evidence and distil it into guidance. It had launched a large international trial to find answers fast about which drugs were the most effective. It had shipped millions of test kits and tons of protective gear all around the world, focusing on those countries most in need of support. It had trained millions

of health workers around the world through the OpenWHO.org online learning platform. It had worked with tech companies to fight the infodemic. And it had formed a global collaboration to accelerate the development, production, and equitable distribution of Covid-19 diagnostics, therapeutics and vaccines.

But no organisation and no country could fight this pandemic alone and it was only by working together that this global threat could be overcome. The greatest threat was not the virus itself, but the lack of global solidarity and global leadership. Together, we must work to ensure the lessons of this pandemic were learned. The World Health Assembly in May passed a resolution on the collective response to Covid-19, which recognised the key leadership role of WHO and called for an independent and comprehensive evaluation of the international response – including, but not limited to, WHO's performance. Such an evaluation would be initiated at the earliest appropriate moment. All recommendations and proposals were valuable, in particular any initiative to strengthen global health security, and to strengthen WHO, and to help make the world safer. WHO was committed to transparency, accountability and continuous improvement.

The enormous impacts of Covid-19 were a reminder that preparedness was not a cost but an investment in the future. Since 2017, WHO had strengthened its ability to respond to health emergencies and to support countries to prepare. It had created a division focused on improving emergency preparedness in countries around the world, especially the most vulnerable. With the World Bank it had also established the Global Preparedness Monitoring Board, to identify vulnerabilities in global health security. For the first time, WHO had created a Science Division, to strengthen its normative function, and to drive research and development in many areas of global health, including emerging pathogens. An agreement was signed in 2019 with France to establish the WHO Academy, which could be a game changer in global health education. It had already trained over 3.7 million people.

The International Health Regulations provided an important legal framework for countries to work together for mutual security. The IHR had been last updated in 2005 in the wake of SARS. The recent Ebola outbreak in the Democratic Republic of the Congo and the current Covid-19 pandemic had both demonstrated that some parts of the IHR needed to be strengthened to make them more fit for purpose.

The world did not lack the tools, the science, or the resources to make it safer from pandemics. What it lacked was a sustained commitment to use the tools, the science and the resources at its disposal – a shared commitment that would last for a long time. Three concrete steps could be taken together: first, a structured dialogue should be initiated between WHO and the Parliamentary Assembly, in order to facilitate regular collaboration on relevant health issues and WHO participation in the Assembly's activities; second, WHO should be supported beyond the immediate context of the pandemic with regard to the importance of long-term investment in strong, resilient health systems as the foundation for sustainable development; third, Europe should continue to play a leading role in the spirit of solidarity, in particular in research and development, delivery of essential health services and fair access to diagnostics, vaccines and therapeutics across Europe and beyond.

The world was learning the hard way that health was not a luxury item but the cornerstone of security, stability and prosperity. It was essential that countries should not only respond urgently to the pandemic, but also invest in strong health systems domestically, and in global health security. WHO's focus now was fighting the pandemic with every tool at its disposal. In the present situation and debate on a safer, healthier future for Europe and the world, every voice matters.

**The President** responded positively to the three proposals that had been made, pointing out that the Council of Europe was a values-based multilateral co-operation organisation which developed long-term standards. He welcomed the prospects for an enhanced dialogue with WHO and would certainly forward to it the Assembly's recommendations arising from its five reports on the Covid-19 pandemic. He took note of two messages: first, the pandemic was active and extreme caution was called for; and second, the pandemic must not become a social or humanitarian pandemic, and human values must be resolutely promoted.

**Ms Åberg** asked about the most appropriate means of combating the pandemic and commented that, among the countries that had been most effective in this fight, Taiwan was not a WHO member.

**Ms Brynjólfssdóttir** spoke of the humanitarian consequences of the pandemic on migrants, especially the most vulnerable among them. How could these groups' rights to health be ensured? WHO had raised the issue of the resurgence of the pandemic in hotspots.

**Ms Schou** referred to the US criticisms of WHO and its management of the pandemic and asked about the consequences of the US withdrawal for the Organisation and its funding.



**Dr Tedros** said that Taiwan was involved in the work of WHO at technical level and took part in working meetings of experts and scientists; in addition, there were a number of structures in place to exchange information. It was the WHO member States alone that were competent to decide on the accession of a new State. The US position was a matter of regret; the US withdrawal had been announced but no official notification had yet been received. Nonetheless, WHO continued to work with various American institutions and experts. WHO had done everything in its power in the management of the pandemic. If one wished to criticise constructively, then it was better to remain a member of the organisation and take an active part in the assessment process. For WHO, it was not the loss of US funding that was important, but the loss of US leadership. The world was divided, and it was not possible to fight a pandemic in a state of division. This was why WHO was calling for unity and global solidarity; Covid-19 must not be politicised. He expressed WHO's great concern about the seriousness of the coronavirus: this virus circulated extremely quickly and was a killer! In order to fight this common enemy, countries needed to be united in implementing a harmonised policy.

**Dr Michael Ryan**, Executive Director, WHO Health Emergencies Programme, said that on the issue of migrants, co-operation had been established with the Office of the United Nations High Commissioner for Refugees and a joint working group had drawn up guidelines on refugees, including access to medical care. WHO was closely monitoring refugees and displaced populations in certain countries such as Syria, Yemen, Libya, South Sudan, Mali and Somalia. There were two problems with regard to migrants: access to the best care, and the transmission of the disease, which was not detected quickly. Working, living and housing conditions, in makeshift shelters or overcrowded dormitories, drastically increased the clusters in which the virus spread. Many clusters had been identified in industrial sectors that depended on migrant labour. But it was above all housing conditions that fuelled the spread of the virus. In Western Europe, the virus was on the decline and the European Union generally speaking had managed to limit transmission and reduce incidence and mortality rates. This was not the case in other countries, including some European ones, and the virus might start to rise again, particularly with the continuing presence of epidemic clusters. It was essential to be extremely vigilant and to remain ready to react with the recommended solutions of detection by test, quarantine and isolation. In Eastern Europe, the Western Balkans and Central Asia, the pandemic had not been halted and the virus was progressing. Europe must also remain watchful with regard to its neighbouring regions. Two challenges would have to be taken into account as winter approached: fighting a possible second wave of Covid-19 and probably fighting two epidemics at the same time – the seasonal influenza wave and Covid-19 – which would require increased efforts in terms of diagnosis, detection, oversight and dealing with the consequences of these epidemics in terms of health care and hospital capacity. It would therefore be necessary to promote the vaccination of populations against seasonal influenza, in the absence of a coronavirus vaccine.

**Ms Trisse** referred to the criticism levelled at WHO in its management of the Covid-19 crisis because of the delay in declaring a pandemic. With hindsight, what lessons could WHO learn about changes to its own functioning and in the processes of early warning, raising the awareness of decision-makers and populations, and policy co-ordination?

**Mr Kox** thanked Dr Tedros for the detailed information he had provided on the pandemic situation. He asked what he thought about the two proposals made by Mr Hunko in his report on *“Lessons for the future from an effective and rights-based response to the COVID-19 pandemic”*: first, that WHO should be more dependent on public funding and less on voluntary contributions, and second, that it should develop some kind of parliamentary monitoring based on co-operation between the Parliamentary Assembly and WHO.

**Mr Kiliç** concurred with Ms Trisse on the criticisms regarding the use of data. He referred to the fake news circulating on social media and more generally on internet about the coronavirus and WHO. He also asked whether he thought that there was sufficient international co-operation between countries or groups of countries, and with the European Union.

**Dr Tedros** stressed that WHO took criticism seriously, but such criticism had to be in good faith in order to be meaningful. There was an external oversight mechanism, with independent experts, who had already carried out an assessment of how WHO had responded during the period from January to April 2020. This Independent Oversight Advisory Committee would continue its work, but an Independent Expert Group to evaluate the management of the pandemic would also be set up. Without prejudging the work of this new committee, he said that, with regard to the alert system, WHO could not be faulted for having declared the global emergency late; on the contrary, WHO had acted at the right time, and had declared the highest level of urgency on 30 January, when there had been only 98 cases worldwide, most of them in China, which had enabled all countries to begin to prepare. WHO had warned in mid-February about the great danger posed by this virus, yet its assessment had been criticised as excessive! WHO was therefore completely open to an assessment process. As far as the funding of the Organisation was concerned, WHO had an annual budget of some USD 2.3 billion and had 154 offices around the world operating on a single budget. By way of comparison, the Presbyterian Hospital in New York had a budget three times that of WHO. The resources might well be insufficient, but it was above all the

method of funding - 80% voluntary contributions - that deprived the organisation of the ability to operate in accordance with its own priorities and with the necessary adaptability. He had repeatedly sounded the alarm and called for greater flexibility and independence. On parliamentary oversight, it was hardly conceivable and reasonable for WHO, which was an international organisation, to be scrutinised by one regional organisation, nor was it reasonable for it to be scrutinised by all the many regional organisations around the world. WHO already enjoyed excellent co-operation with the IPU. It had its own assessment system and its own organisational structure with an Assembly – the World Health Assembly – a decision-making body that brought together delegations from all its member States. In this context, he therefore thought it would be difficult to establish oversight mechanisms with the regional assemblies.

**Dr Ryan** said that WHO was dealing with both a pandemic and an “infodemic”, i.e. the information circulating about the pandemic. There was poor quality information but also intentional misinformation designed to disrupt the response to the pandemic. WHO, in its management of the information tsunami, had developed an emergency communication and information network on the pandemic, in co-operation with both public and private institutions, international economic organisations, managers of social networks, the media, trade unions, religious organisations, etc. It was a question of dealing with the international health emergency in the best possible way; health and the response to the pandemic were in fact the sovereign responsibility of individual States. There was an issue of subsidiarity and there were differing views on the role of the European Union and its European Centre for Disease Prevention and Control (ECDC), in relation to existing national systems. WHO considered that the response to the pandemic in an emergency situation must be international and that this action should be based on the International Health Regulations. The IHR had been negotiated and adopted by some 190 States; this legal instrument contained all the standards and operational procedures for disease reporting and assessment of surveillance and response capacity and applied to everyone. There was a need to assess what WHO’s real and practical powers were and there was a disconnect between people’s perception of WHO’s powers and the reality of those powers. WHO had the powers that its member States had given it. WHO had been at the forefront of the management of and emergency response to the pandemic! Its Director-General had significantly increased the number of missions in the field. WHO was not perfect and it could doubtless improve, but States must give it the means to do so, in line with the expectations placed on it.

**Mr Seyidov** expressed Azerbaijan’s gratitude to WHO, as his country had been scrupulously following the Organisation’s recommendations. When the restrictive measures had been lifted, the figures had risen again and there was fear of a second wave. But the economy had to start moving again. He asked what WHO’s recommendations were in this context.

**Mr Hunko** agreed with Dr Tedros on the need for international solidarity and global co-operation. With regard to the WHO budget, he noted that in the course of 30 years the 80%-20% proportion had been reversed between funding from the ordinary budget and voluntary contributions. He asked whether it was conceivable to change the system and have a budget based entirely on funding from member States.

**Ms Bayr** raised the issue of sexual and reproductive health, the problem of access to care, the increase in gender-based violence and cases of domestic violence. These issues were at the centre of our priorities and efforts, firmly rooted in a high level of health, supported by the necessary budgets. She asked how WHO could ensure access to reproductive health care.

**Ms Stienen** felt that the Covid-19 crisis had accelerated social inequalities of all kinds. If, as Dr Tedros had said, all voices counted, how would it be possible to ensure that minorities, women, the elderly, the young, vulnerable groups were included in discussions on the health crisis?

**Dr Maria Van Kerkhove**, Head of the WHO’s emerging diseases unit, felt that there was now a need to learn more from each other about the measures that had been put in place at national level, the best methods for implementing lockdown and lifting lockdown restrictions and the use of epidemiological data, by zones, to assess where the pandemic was best under control. Lockdown was not a sustainable solution. With a pandemic still evolving and the risk of a second wave already in a number of countries, it was essential to ensure that affected countries could respond quickly by deploying the necessary health resources and infrastructure to identify and isolate clusters, in order to reduce the risk of transmission. The strategy covered the next six months. It involved stepping up efforts on four priorities: stopping the spread of the virus; reducing mortality; building community links to protect loved ones and reduce the spread of the virus, especially among vulnerable groups; and promoting strong governance. The necessary tools to do all of this were there.

**Dr Ryan** added an extra ingredient: trust. As the health crisis unfolded, citizens had not trusted their leaders and any trust there was had eroded very quickly; governments had lost leadership. Building trust, the social contract, between government and society took years or even decades, but it could crumble in no time at all. International organisations were the means to build this trust. Ideology must be excluded and must not dictate policy choices

in the prevention and control of the pandemic. Wearing a mask or not, respecting social distancing or not, going to this or that place or not, these were public health decisions and not ideological choices.

**Dr Tedros** confirmed that 30 years previously, 80% of WHO's budget had been covered by the ordinary budget, and that this proportion had now been reversed and that resources were dependent on voluntary contributions. While the level of funding was broadly the same, expectations had increased. The pandemic was an opportunity to identify the mistakes of the past and correct them, particularly on the budgetary issue. WHO must benefit from broader and sustainable financial support from States, and this was what had to change. The German and French health ministers whom he had met the previous day had committed themselves to this. There was a gap between the expectations, the international presence of WHO and the reality of its resources. As for sexual and reproductive health, to which more importance and effort must be devoted, he said that services had suffered from the pandemic and that access had been reduced, as was the case for the treatment of malaria, tuberculosis and AIDS. Continuity of services must be restored while leading the fight against coronavirus. WHO had issued clear guidelines. It had invested in the core area of reproductive health and had developed extensive programmes over the previous two to three years. Nevertheless, it had been criticised for this. On the necessary participation of all, he cited the example of the Africa 2025 strategy aimed at accelerating the development of vaccines, diagnostics and treatment and ensuring that there was equitable access to them. Civil society representatives had been included in the discussions on each of these key issues. These groups needed to endorse the overall policy and therefore needed to be involved beforehand. As far as assessment was concerned, an independent external committee had been opted for, but this did not rule out a global discussion in which members of society could take part, without any barriers. The pandemic had affected all sectors of society, starting with children. This process must be made global and the Assembly could contribute to this process by promoting the involvement of all groups in society. He thanked the Assembly once again for its invitation and reiterated the importance of partnership in developing health for all.

**The President** thanked Dr Tedros and his team for this very interesting exchange. The Assembly would finalise its recommendations in the five reports drafted by its committees, one of which would be debated now - the other four would be debated at the Assembly's October part-session.

## 10. SOCIAL AFFAIRS, HEALTH AND SUSTAINABLE DEVELOPMENT

**Mr Andrej Hunko**, rapporteur of the Committee on Social Affairs, Health and Sustainable Development, presented a report on "*Lessons for the future from an effective and rights-based response to the COVID-19 pandemic*" (Doc. 15115). This important report had been drawn up urgently but in a thorough and serious manner; it did not, however, address all aspects of the issue, as four other Assembly reports would provide further analysis. He expressed his gratitude to the secretariat for its valuable assistance. The report aimed to draw lessons learned in the management of the pandemic and to assess its social and health consequences. The first recommendation concerned the reform of WHO, which should no longer be funded through voluntary contributions so that the organisation could carry out its core functions more effectively and independently, while being subject to independent, ideally parliamentary, oversight. The second recommendation called for a better understanding of the epidemiology of the coronavirus because the data we had on the virus were not satisfactory. There was a need for international co-operation and for coordination and joint work at all levels, regional, national and international. States facing future pandemic crises must be able to act quickly with effective and proven measures, implemented in a transparent and rights-based manner. Responses must be data-driven and evidence-based. Finally, all public health response measures must respect human rights. In a democratic framework, parliamentary oversight must be exercised and might be restricted only to the extent necessary. The world must fight the pandemic together and united.

**Mr Kox** thanked the rapporteur and recalled that the recommendations contained in the report would constitute the Assembly's contribution to the declaration to be adopted by the Committee of Ministers in Athens. Such recommendations were useful and relevant to the question of how to better manage this type of crisis in the future. It included recommendations to the WHO, to member States and to ourselves, including the reconstitution of the Steering Committee on Public Health. This last recommendation was addressed to the Committee of Ministers and was crucial if we were to better anticipate and manage such health situations in the future. For WHO, increased public funding was vital. Finally, better communication, making information more accessible, and promoting international solidarity, especially for vaccines, medicines and tests, must be priorities. Finally, there was a need to assess the state of health systems in member States and to improve these health systems, ensuring affordable access to high quality health care for all.

**Ms Stienen** congratulated the rapporteur on his excellent report which demonstrated that there was no conflict between citizens' health and respect for citizens' rights. Human rights were not a luxury but a necessity. This was clearly highlighted in the report, as was the complexity of the situation, with a range of dilemmas facing States.

She proposed that the President of the Assembly should organise a meeting of the five rapporteurs to consider the follow-up to these various debates.

**Mr Maire** joined in the compliments on the quality of the work. There was a need to strengthen the powers and capacities of WHO and its independence from its donors, as well as the International Health Regulations. He wondered about the purpose of the recommendation on the Steering Committee on Public Health. There was a kind of competition between different levels of legitimacy and governance, between States and within States, as all institutions wished to demonstrate their usefulness in the fight against the health crisis. Each must work to avoid destroying the legitimacy of the others.

**Mr Hunko** considered that health systems and the organisation of care by health institutions should be reviewed, given the number of deaths, particularly among the elderly. He agreed with Ms Stienen that there should be no conflict between health and human rights. Indeed, there was a need for coordination between the rapporteurs, although the other four reports had not yet been adopted. It was important to avoid at all costs that a State found itself isolated in the struggle, as Italy had done at the beginning of the coronavirus pandemic. The recommendations in the report must be taken up by all, as they would enable States to respond better to epidemics of any kind.

**The President** declared that the quorum of 20 members was met. The draft resolution was **adopted** by 19 votes in favour, one against and one abstention.

After the vote, **Ms Christoffersen** indicated that she had intended to vote in favour and not against.

The Standing Committee considered amendment 1 to the draft recommendation. **Mr Leite Ramos** said that the Committee on Social Affairs, Health and Sustainable Development was in favour of the amendment. The amendment **was agreed** to with 19 votes in favour, with two abstentions.

The Standing Committee **adopted** the draft recommendation, as amended, by 21 votes in favour, with one abstention.

**Ms Doreen Massey**, rapporteur of the Committee on Social Affairs, Health and Sustainable Development, presented a report on "*Addressing sexual violence against children: stepping up action and co-operation in Europe*" (Doc. 15109). Violence against children was everyone's business; it concerned all countries and all levels of society. Governments had a duty to combat violence against children and to address the challenges in all areas and institutions where it was widespread. In the midst of a health crisis, violence increased, reinforced in emergencies, as seen in the Ebola epidemic and as seen with the Covid-19 crisis. This affected children's rights, their physical and mental health, their human dignity. The impact of Covid-19 was worrying on children's schooling. Political action was needed at all levels – European, national and local. We needed to ensure that all the recommendations of the Council of Europe would be followed and that all the national laws we had supported would be implemented. Leadership was important. There should be a children's ombudsman, like the independent commissioner for child sex abuse issues that existed in Germany. There should be an observer seat for the Council of Europe on the UN Committee on the Rights of the Child. There was also a need to develop child-friendly structures for reporting abuse and where children could receive protection, assistance and support. In addition, there was a need to develop appropriate education, school-based sexuality education and awareness-raising programmes, including on social networks, as well as an anti-harassment policy. Sexual violence against children had an economic and social cost. In 2015 the economic burden of child sexual abuse had been estimated at US\$9.3 billion in the USA.

**The President** welcomed Ms Najat Maalla M'jid, Special Representative of the United Nations Secretary-General on Violence against Children, since 2019. From 2008 to 2014, she had served as United Nations Special Rapporteur on the Sale of Children, Child Prostitution and Child Pornography. It was in this capacity that the Assembly had welcomed her in October 2011 on the occasion of a joint debate in plenary on *Combating "child abuse images"* and *Violent and extreme pornography*.

**Ms Najat Maalla M'jid** thanked the Assembly for its invitation and congratulated Baroness Massey on her excellent report. In carrying out her mandate, she acted as an independent spokesperson who worked with determination for the elimination of violence against children. Sexual exploitation and sexual abuse of children were one of the most serious forms of violence. Her mandate was based on international human rights standards and 2030 Agenda for the Sustainable Development Goals. The Convention on the Rights of the Child and its additional protocol obliged States to prevent and combat sexual violence, protect victims and ensure access to justice. The SDGs obliged States to end all forms of violence against children by 2030. She welcomed the Assembly's involvement in promoting these goals and international standards. Regional international organisations such as the Council of Europe were crucial partners in the implementation of her mandate.

By promoting standards, raising awareness and monitoring their implementation, the Council of Europe played an indispensable role in this field. The role of parliamentarians, in aligning national legislation with international standards, providing the necessary budgetary resources and overseeing government action, was also fundamental in promoting the cause of children. However, there was a long way to go.

In all these decades of action, she had seen the disastrous effects of sexual violence on children and the barriers they faced. The dangers to children had changed but they continued to be targets, and technological developments allowed for new forms of sexual abuse and exploitation. The rapid emergence of the health crisis, including confinement, school drop-out, lack of access to health and social facilities, and increased time spent on the internet, had shown that a rapid change in approach to child protection in the face of increasing risks was essential. A comprehensive approach was needed to promote a child-based prevention and protection system, and to dismantle the traditional legal institutional framework by putting in place agencies and mechanisms where the voice of the child would be heard. The prevention component required raising public awareness, promoting educational measures and strengthening social responsibility with clear commitments. Mechanisms must be developed to implement the effective accountability of the private sector, high standards must be developed, human rights institutions for children must be established, and protection and support services for victims must be accessible. Multisectoral co-operation must become a reality. Legislation, including on extraterritoriality, must be strengthened to ensure that those responsible for sexual violence would be prosecuted and convicted. Above all, a change of mindset was needed to ensure that legislation and services were child-centred. The participation of children and victims must be encouraged in the development of legislation, good practice and a monitoring system. Victims of sexual violence had been ignored for too long and it was time to listen to them and respect their dignity.

The Covid-19 pandemic had created new challenges that required a collective response in the fight against sexual violence against children, which must remain a priority notwithstanding the pressure on State budgets. The goal for the international community was to eliminate sexual violence, in all its forms, within the next ten years.

**The President** considered that this objective could only be adhered to, and he assured Mrs M'jid of the Assembly's support. The elimination of sexual violence against children was also a clear priority for the Assembly.

**Sir Roger Gale** congratulated Baroness Massey on her seminal report, because as parents and grandparents there was nothing more important than children. Combating sexual violence required a pan-European strategy, because States alone were powerless to combat a global scourge effectively.

**Ms Brynjólfssdóttir** also considered the report to be essential and welcomed the fact that the Icelandic model was taken as an example, particularly for judicial proceedings. Sexual violence and sexual exploitation of children must be considered seriously, as it was also a pandemic! It impacted on health services, and above all on the health and lives of so many people. This report dealt very rigorously with pornography and, having in mind that children between the ages of 9 and 11 were the most exposed to pornography, we could only support strong measures to combat this scourge. National parliaments must respond by quickly promoting the recommendations set out in the report.

**Baroness Massey** shared with Ms M'jid the same passion for the defence of children. Children needed to go to school. The school was where children could receive support from social services; a large proportion of reports were made by school structures. The absence of schooling led to children suffering, deprived of socialisation, access to culture and sports. Children had access to adult pornography, and adults found it difficult to control this access because children were more proficient in technology and the Internet. These issues of access to the Internet and the use of new technologies required a great deal of thought, as they could be very destructive for young people.

**Ms Jufereva-Skuratovski** mentioned the detection of cases of violence against children and pointed out that, in addition to the school environment, it was above all a sense of civic responsibility which must be called upon and that any witnesses of such acts, for example neighbours, must report them to the police or the social services. There was a real need to focus public awareness on this point. In her experience in territorial administration in Tallinn, she observed that parents were often the perpetrators of violence in the family home, and that vigilance by neighbours could be helpful.

**Mr Leite Ramos** stressed the great importance of the work of the Committee on Social Affairs, Health and Sustainable Development which he chaired and congratulated the rapporteurs – Baroness Massey and Mr Hunko – who today presented the outcome of the committee's reflections on fundamental and urgent issues.

**Ms M'jid** recalled that sexual violence occurred anywhere: the family home, school, institutions, the street. There was a continuity between "physical" sexual violence and online violence. Reporting must be encouraged, which meant developing awareness-raising actions, and ensuring that children did not feel guilty. Children who were victims of sexual violence or who witnessed sexual violence had different profiles, and these differences needed to be taken into account when measuring the impact of such violence on their health and mental health. The behaviour and psychology of these children should be better understood, as this was part of the solution. She thanked the Parliamentary Assembly for its continued commitment.

**Baroness Massey** emphasised the need to promote co-operation between different institutions and collaboration between the police, social workers, educational institutions, etc. Raising everyone's awareness about the importance of reporting violence was of paramount importance.

**The President** noted that the quorum was met. The draft resolution was adopted unanimously by 24 votes in favour.

The draft recommendation was **adopted** unanimously by 24 votes in favour.

**Ms Åberg** indicated that for technical reasons she had been unable to take part in the vote although she wished to support the text adopted.

**The President** warmly thanked Ms M'jid for her contribution to the debate and the rapporteur.

## 11. EQUALITY AND NON-DISCRIMINATION

**Ms Petra Bayr**, Rapporteur of the Committee on Equality and Non-Discrimination, presented the report on "*Empowering women: promoting access to contraception in Europe*" (Doc. 15084 and addendum). The way the family was composed, whether or not one had children, as well as the number of children, played a crucial role in everyone's life and everyone should be able to decide freely. Two prerequisites for this choice, which was essential for the empowerment of women, were sexuality education and access to modern and safe contraception without any barriers. Access to contraception increased women's empowerment and decision-making power and enabled them to better reconcile work and private life. The financial barrier was the main obstacle. Public authorities and public health insurance schemes should provide reimbursement. Sex education and awareness raising activities throughout life were essential, especially to overcome cultural and social barriers. Access to sexual and reproductive health and rights, including access to contraception, should be high on the list of health policy priorities. This was all the more true in times of pandemic, as mentioned in the morning, which had seen a major increase in cases of domestic and gender-based violence and barriers to access to sexual and reproductive health care. Solutions to facilitate this access existed and must be generalised. Access to contraception and maternal health care were essential health services to be maintained during the crisis.

**Mr O'Reilly** congratulated the rapporteur and supported in particular the proposal to make contraception free of charge. This report also fit in with the more general reflection on the evaluation of the management of the Covid-19 pandemic and in particular the issue of domestic violence and the care of vulnerable people.

**Ms Stienen** also congratulated the rapporteur and pointed out that, in normal times, access to sexual and reproductive health and to information enabling an informed choice in this area was a fundamental right. But in times of crisis, this was not always possible everywhere – for example, some people had not been able to get tested for STIs in the Netherlands. The Assembly's recommendations were therefore fundamental in the follow-up to the health crisis.

**The President** indicated that the six amendments tabled had been approved unanimously and would be considered adopted unless any member objected.

**Ms Trisse** proposed to amend amendment 1 by an oral sub-amendment to replace "should be prioritised" by "shall remain a priority".

**Ms Bayr** did not support the sub-amendment, and explained why the committee had opted for this wording: hospitals had had to give priority to Covid-19 patients; sexual and reproductive health was not a priority at that time, and therefore amendment 1 reflected the situation at that time.

**The President** noted that the quorum was met.

The sub-amendment was **adopted** by 20 votes in favour, 2 against with one abstention. Amendment 1, as subamended, was **adopted** by 21 votes in favour, with two abstentions.

The other amendments, 2 to 6, were **adopted unanimously**.

The draft resolution was **adopted** by 24 votes in favour, 1 against.

## 12. OTHER BUSINESS

None.

## 13. NEXT MEETING

The Standing Committee **decided** to hold its next meeting in Chania (Crete, Greece) on 15 and 16 September 2020.

## APPENDIX I

### Decisions on documents tabled for references to committees

#### A. REFERENCES TO COMMITTEES

1. **Artificial intelligence and climate change**  
**Motion for a resolution tabled by Mr Alvisio Maniero and other members of the Assembly**  
**Doc. 15068**
2. **Anchoring the right to a healthy environment: need for enhanced action by the Council of Europe**  
**Motion for a resolution tabled by the Committee on Social Affairs, Health and Sustainable Development**  
**Doc. 15108**

Reference of both motions to the Committee on Social Affairs, Health and Sustainable Development *for a single report*

3. **Deinstitutionalisation of persons with disabilities**  
**Motion for a resolution tabled by the Committee on Social Affairs, Health and Sustainable Development**  
**Doc. 15106**

Reference to the Committee on Social Affairs, Health and Sustainable Development *for report* and to the Committee on Equality and Non-Discrimination *for opinion*

4. **Eradicating extreme child poverty in Europe: an international obligation and a moral duty**  
**Motion for a resolution tabled by the Committee on Social Affairs, Health and Sustainable Development**  
**Doc. 15107**

Reference to the Committee on Social Affairs, Health and Sustainable Development *for report*

5. **Safe third countries for asylum seekers**  
**Doc. 15111**  
**Motion for a resolution tabled by the Committee on Migration, Refugees and Displaced Persons**

Reference to the Committee on Migration, Refugees and Displaced Persons *for report*

6. **Alternative care for unaccompanied and separated migrant children**  
**Doc. 15112**  
**Motion for a resolution tabled by the Committee on Migration, Refugees and Displaced Persons**

Reference to the Committee on Migration, Refugees and Displaced Persons *for report* and to the Committee on Social Affairs, Health and Sustainable Development *for opinion*

7. **Climate and migration**  
**Doc. 15113**  
**Motion for a resolution tabled by the Committee on Migration, Refugees and Displaced Persons**

Reference to the Committee on Migration, Refugees and Displaced Persons *for report*

#### B. MODIFICATION OF REFERENCE

1. **Democracies facing the COVID-19 pandemic**  
**Bureau decision**  
**Reference 4512 of 7 May 2020 – validity: 7 November 2022** (reference to the Committee on Political Affairs and Democracy *for report*)

Reference to the Committee on Political Affairs and Democracy *for report* and to the Committee on the Honouring of Obligations and Commitments by Member States of the Council of Europe (Monitoring Committee) *for opinion*



## APPENDIX II

## List of participants / Liste des participants

**President of the Parliamentary Assembly / Président de l'Assemblée parlementaire**

Mr Rik DAEMS Belgium / Belgique

**Chairpersons of Political Groups / Présidents des groupes politiques**

Mr Frank SCHWABE Socialists, Democrats and Greens Group (SOC) /  
Groupe des socialistes, démocrates et verts (SOC)

Mr Aleksander POCIEJ Group of the European People's Party (EPP/CD) /  
Groupe du Parti populaire européen (PPE/DC)

M. Jacques MAIRE Alliance of Liberals and Democrats for Europe (ALDE) /  
Alliance des démocrates et des libéraux pour l'Europe  
(ADLE)

Mr Tiny KOX Group of the Unified European Left (UEL) /  
Groupe pour la gauche unitaire européenne (GUE)

**Vice-Presidents of the Assembly / Vice-président-e-s de l'Assemblée**

Sir Roger GALE United Kingdom / Royaume-Uni

Mr Kimmo KILJUNEN Finland / Finlande

Mr Egidijus VAREIKIS Lithuania / Lituanie

Ms Susanne EBERLE-STRAUB Liechtenstein

Mr Antonio GUTIÉRREZ Spain / Espagne

Mme Nicole TRISSE France

Mr Andreas NICK Germany / Allemagne

M. Petr TOLSTOI Russian Federation / Fédération de Russie

Mr Oleksandr MEREZHKO Ukraine

Mr Akif Çağatay KILIÇ Turkey / Turquie

Mr Lars Aslan RASMUSSEN Denmark / Danemark

Ms Inese LIBINA-EGNERE Latvia / Lettonie

Mr Irakli KOBAKHIDZE Georgia / Géorgie

Mr Alvis MANIERO Italy / Italie

**Chairpersons of National Delegations / Président-e-s de délégations nationales**

Mr Ervin BUSHATI Albania / Albanie

Ms Mònica BONELL Andorra / Andorre

Mr Ruben RUBINYAN Armenia / Arménie

Mr Reinhold LOPATKA Austria / Autriche

Mr Samad SEYIDOV Azerbaijan / Azerbaïdjan

M. Christophe LACROIX Belgium / Belgique  
(representing the Chairperson /  
*représentant le Président*)

Ms Alma ČOLO Bosnia and Herzegovina / Bosnie-Herzégovine

Mr Nicos TORNARITIS Cyprus / Chypre

Mr Lars Aslan RASMUSSEN Denmark / Danemark

Ms Maria JUFEREVA-SKURATOVSKI Estonia / Estonie

Mr Kimmo KILJUNEN Finland / Finlande

Mme Nicole TRISSE France

Mr Irakli KOBAKHIDZE Georgia / Géorgie

Mr Andreas NICK Germany / Allemagne

Mr Anastasios CHATZIVASILEIOU Greece / Grèce  
(in the absence of the Chairperson /  
*en l'absence de la Présidente*)

Mr Zsolt NEMETH Hungary / Hongrie

Ms Rósa Björk BRYNJÓLFSDÓTTIR	Iceland / Islande
Mr Joseph O'REILLY	Ireland / Irlande
Mr Alvis MANIERO	Italy / Italie
Ms Inese LIBINA-EGNERE	Latvia / Lettonie
Ms Susanne EBERLE-STRAUB	Liechtenstein
Mr Predrag SEKULIČ	Montenegro
Ms Petra STIENEN	Netherlands / Pays-Bas
Ms Lise CHRISTOFFERSEN (representing the Chairperson / <i>représentant la Présidente</i> )	Norway / Norvège
Mr Zbigniew RAU	Poland / Pologne
Mr Pedro BACELAR DE VASCONCELOS	Portugal
Mr Titus CORLATEAN (in the absence of the Chairperson / <i>en l'absence du Président</i> )	Romania / Roumanie
M. Petr TOLSTOI	Russian Federation / Fédération de Russie
Mr Antonio GUTIÉRREZ	Spain / Espagne
Ms Boriana ABERG	Sweden / Suède
M. Olivier FRANÇAIS (representing the Chairperson / <i>représentant le Président</i> )	Switzerland / Suisse
Mr Akif Çağatay KILIÇ	Turkey / Turquie
Ms Yelyzaveta YASKO	Ukraine
Sir Roger GALE	United Kingdom / Royaume-Uni

**Chairperson of the Committee on Political Affairs and Democracy /  
Présidente de la Commission des questions politiques et de la démocratie**  
Dame Cheryl GILLAN United Kingdom / Royaume-Uni

**Chairperson of the Committee on Legal Affairs and Human Rights /  
Présidente de la Commission des questions juridiques et des droits de l'homme**  
Mr Boriss CILEVIČS Latvia / Lettonie

**Chairperson of the Committee on Social Affairs, Health and Sustainable Development /  
Président de la Commission des questions sociales, de la santé et du développement durable**  
M. Luis LEITE RAMOS Portugal

**Chairperson of the Committee on Migration, Refugees and Displaced Persons /  
Président de la Commission des migrations, des réfugiés et des personnes déplacées**  
M. Pierre-Alain FRIDEZ Switzerland / Suisse

**Chairperson of the Committee on Culture, Science, Education and Media /  
Président de la Commission de la culture, de la science, de l'éducation et des médias**  
M. Olivier BECHT France

**Chairperson of the Committee on Equality and Non Discrimination /  
Président de la Commission sur l'égalité et la non-discrimination**  
Ms Petra BAYR Austria / Autriche

**Chairperson of the Committee on the Election of Judges to the European Court of Human Rights /  
Président de la Commission sur l'élection des juges à la Cour européenne des droits de l'homme**  
Mr Volker ULLRICH Germany / Allemagne

**Committee on Rules of Procedure, Immunities and Institutional Affairs /  
Commission du Règlement, des immunités et des affaires institutionnelles**  
Ms Ingrid SCHOU Norway / Norvège

**Rapporteurs (not members of the Standing Committee / non-membres de la Commission permanente)**

Mr Andrej HUNKO Germany / Allemagne  
Baroness Doreen MASSEY United Kingdom / Royaume-Uni

**Other members of the Parliamentary Assembly**

Mr George LOUCAIDES Cyprus / Chypre  
Ms Anne-Mari VIROLAINEN Finland / Finlande  
Mr Jean-Pierre GRIN Switzerland / Suisse

**Invited personalities / Personnalités invitées**

Mr Miltiadis VARVITSIOTIS Alternate Minister of Foreign Affairs of Greece, Chairman of the Committee of Ministers of the Council of Europe / ministre délégué aux Affaires européennes de la Grèce, Président du Comité des Ministres du Conseil de l'Europe  
Dr Tedros Adhanom Ghebreyesus Director-General of the World Health Organization / Directeur général de l'Organisation mondiale de la Santé  
Ms Najat Maalla M'JID Special Representative of the United Nations Secretary-General on Violence against Children / Représentante spéciale du Secrétaire général des Nations Unies chargée de la question de la violence contre les enfants

**Secretaries of National Delegations / Secrétaires de délégations nationales**

Ms Nadine DRAGAN Austria / Autriche  
Mr Georg MAGERL Austria / Autriche  
Ms Lala BABAYEV Azerbaijan / Azerbaïdjan  
Mr Emin MAMMADOV Azerbaijan / Azerbaïdjan  
Ms Sonja LANGENHAECK Belgium / Belgique  
Mr Tom de PELSMACKER Belgium / Belgique  
Ms Adisa FIŠIĆ-BARUKČIJA Bosnia and Herzegovina / Bosnie-Herzégovine  
Ms Martina PETEK-STUPAR Croatia / Croatie  
Ms Gabriella MARANGO D'AVERNAS Cyprus / Chypre  
Ms Kamilla KJELGAARD Denmark / Danemark  
Ms Eva VALIUS Estonia / Estonie  
Ms Gunilla CARLANDER Finland / Finlande  
Ms Maria FAGERHOLM Finland / Finlande  
Mme Claire MOISSET France  
M. Laurent SAUNIER France  
Mr Michael HILGER Germany / Allemagne  
Mr Dan TIDTEN Germany / Allemagne  
Ms Voula SYRIGOS Greece / Grèce  
Ms Judit GOTSCHALL Hungary / Hongrie  
Ms Bylgja ÁRNADÓTTIR Iceland / Islande  
Ms Eileen LAWLOR Ireland / Irlande  
Ms Fabrizi BIENTINESI Italy / Italie  
Mr Martins OLEKSS Latvia / Lettonie  
Ms Sandra GERBER-LEUENBERGER Liechtenstein  
Ms Selija LEVIN Lithuania / Lituanie  
Ms Jovana KOVACEVIC Montenegro  
Ms Femmy BAKKER-DE JONG Netherlands / Pays-Bas  
Mr Arjen WESTERHOFF Netherlands / Pays-Bas

Ms Marija STEFANOVA	North Macedonia / Macédoine du Nord
Mr Artur ZANIEWSKI	Poland / Pologne
Ms Carmen IONESCU	Romania / Roumanie
Mr Razvan TANASE	Romania / Roumanie
Ms Maria Teresa GOMEZ-BERNARDO	Spain / Espagne
Mr Luis Manuel MIRANDA	Spain / Espagne
Ms Petra SJOSTROM	Sweden / Suède
Mr Daniel ZEHNDER	Switzerland / Suisse
Mr Hakan MURAT	Turkey / Turquie
Mr Borys KOLISNYCHENKO	Ukraine
Mr Iaroslav ZHYDENKO	Ukraine
Mr Nicholas WRIGHT	United Kingdom / Royaume-Uni
Mr Yaron GAMBURG	Israel / Israël

**Other participants / Autres participants**

Dr Michael RYAN	World Health Organization, Executive Director / Organisation mondiale de la Santé, Directeur exécutif
Dr Maria VAN KERKHOVE	World Health Organization / Organisation mondiale de la Santé, Head of the emerging diseases unit
M. Nassif MARYEM	Vice Consul, Consulate General of Morocco / Vice Consul, Consulat Général du Maroc

**Secretaries of Political Groups / Secrétaires des Groupes politiques**

Ms Francesca ARBOGAST	SOC
Ms Denise O'HARA	EPP/CD / PPE/DC
Ms Maria BIGDAY	ALDE / ADLE
Mr Tom VAN DIJCK	EC/DA / CE/AD
Ms Anna KOLOTOVA	UEL / GUE

**Secretariat of the Parliamentary Assembly / Secrétariat de l'Assemblée parlementaire**

Mr Wojciech SAWICKI	Secretary General / Secrétaire Général
Ms Marja RUOTANEN	Director of Committees / Directrice des commissions
Mr Horst SCHADE	Director of General Services / Directeur des Services Généraux
Mr Mark NEVILLE	Head of the Private Office / Chef de Cabinet
Mr Alfred SIXTO	Head of the Table Office / Chef du Service de la Séance
Mme Valérie CLAMER	Deputy Head of the Table Office / Chef adjointe du Service de la Séance
Ms Micaela CATALANO	Head of the Communication Division / Chef de la Division de la communication
Mme Isild HEURTIN	Head of the Secretariat of the Bureau / Chef du Secrétariat du Bureau
Mme Martine MEYER	Administrative assistant of the Standing Committee / Assistante administrative de la Commission permanente
Ms Susan FELLAH	Assistant of the Standing Committee / Assistante de la Commission permanente
Mme Annick SCHNEIDER	Assistant to the Secretary General / Assistant to the Bureau Assistante du Secrétaire Général / Assistante du Bureau

**Private Office of the Secretary General and Deputy Secretary General /**

**Cabinet du Secrétaire Général et de la Secrétaire Générale adjointe du Conseil de l'Europe**

Ms Gabriella BATTAINI-DRAGONI	Deputy Secretary General of the Council of Europe / Secrétaire Générale adjointe du Conseil de l'Europe
Mr Markus ADELSBACH	Adviser, Private Office of the Secretary General and Deputy Secretary General of the Council of Europe / Conseiller, Cabinet du Secrétaire Général et de la Secrétaire Générale adjointe du Conseil de l'Europe

**Council of Europe / Conseil de l'Europe**

Mr Bjorn BERGE	Secretary to the Committee of Ministers / Secrétaire du Comité des Ministres
Mr Alexander GUESSEL	Director, Directorate of Political Affairs / Directeur, Direction des affaires politiques
Ms Leyla KAYACIK	Deputy Secretary to the Committee of Ministers / Secrétaire adjointe du Comité des Ministres