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## Human rights protections are needed alongside PPE for health-care workers responding to COVID-19

On May 6, 2020, the International Council of Nurses reported that worldwide an estimated 90 000 health-care workers had been infected with COVID-19.<sup>1</sup> Other sources have reported more than 50 dead and 3000 infected in China (as of April 3, 2020),<sup>2</sup> and 27 dead and 9282 infected in the USA (as of April 9, 2020).<sup>3</sup> In Russia, in mid-May 2020, 260 doctors have reportedly died of COVID-19.

Health-care workers have experienced violence, harassment, and discrimination in their communities, and have been forced to move from their homes or physically attacked.<sup>4</sup> Qian Liu and colleagues (June, 2020)<sup>5</sup> examined health workers' experience responding to COVID-19 in Hubei province, China. The authors highlight three key themes, related to duty and sacrifice, the challenges of working in a crisis setting, and resilience amid challenges.<sup>5</sup>

Absent from this picture were two themes reported elsewhere—the Chinese government failing to protect health-care workers or censoring and detaining them for speaking out. In February, 2020, a nurse from Wuhan Central Hospital posted a devastating picture of neglect of health workers and fear of government reprisal on social media, writing that the actual situation was “not as good as reported. The situation is more serious...Nobody dare[s] to speak the truth...Now nobody has time to care for us. Supplies are not distributed. We can only report good news not bad news...There is certainly gratitude, but more is [sic] anger.”<sup>6</sup>

In China, speaking critically of the government can bring about harsh punishment. Since January, 2020,

numerous people have been detained for their online speech, and often accused of rumour-mongering. Dr Li Wenliang, who first raised the alarm about COVID-19, was forced to sign a confession in which he was accused of making false statements that disturbed the public order.<sup>7</sup> The Chinese government is currently detaining three Beijing-based activists who operated a webpage to collect censored COVID-19 stories, and two citizen journalists after reporting on the pandemic.<sup>8</sup> The message to health-care workers is clear—resilience amid challenges does not include demanding adequate personal protective equipment (PPE) or speaking out about conditions.

Censorship and attacks on health-care workers responding to COVID-19 are not limited to China. In the Indian state of West Bengal, a criminal complaint was registered against a doctor who spoke out about the lack of PPE for frontline health workers.<sup>9</sup> From March 1, to April 30, 2020, the non-governmental organisation Insecurity Insight identified 360 events in 77 countries, ranging from protests, to blocking health-care facilities, to threats and attacks on health workers in the context of COVID-19.<sup>10</sup>

The nightly demonstrations of appreciation for health-care workers taking place worldwide have been heartening, and there is no doubt that workers are showing a sense of duty, forbearance, and resilience. But these workers need more than PPE and appreciation. They also need their human rights to be respected, including the right to speak out and to be protected from attack, government intimidation, harassment, and arrest.

I declare no competing interests.

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Published Online  
May 25, 2020  
[https://doi.org/10.1016/S2214-109X\(20\)30252-7](https://doi.org/10.1016/S2214-109X(20)30252-7)