

## Article

# Human Rights in the Time of Pandemic: Policies, Transgressions, and Opportunities: The Case of Two Cities

**Frederick Iguban Rey** 

The Pontifical and Royal University of Santo Tomas, Manila, Philippines

Correspondence: [firey@ust.edu.ph](mailto:firey@ust.edu.ph)

## Abstract

*The Corona Virus Disease – 2019 (COVID-19) pandemic disrupted the perceived order of societies on a global scale. This extraordinary public health emergency exposed the vulnerabilities of peoples and institutions, particularly the fragility of the social order and existing inequalities, as highlighted by conflict theory. As a response, governments initiated containment measures to secure the well-being of their citizens. These policies represent a societal effort toward restoring equilibrium and maintaining essential social functions in the face of crisis. This study examines the responses of the Philippine government using a structural functional analysis (positivism) of the policies related to the pandemic. This approach views society as a system with interdependent parts that work together to ensure its survival, where policies serve a specific function in maintaining social stability. The Siracusa Principles were used to enhance the functional evaluation of the laws that were crafted. Phenomenology, a micro-sociological approach, was used to treat the experiential inferences, emphasizing the lived experiences and subjective interpretations of the pandemic by individuals. A structured interview schedule was devised to generate responses from the medical frontliners and the Philippine National Police, key actors whose roles and interactions were dramatically reshaped by the crisis. The City of Manila and Quezon City were considered as study sites. The results of the study examined the policies that sought to address the health crisis as well as its corresponding legislative counterparts in the local government relative to planning, aids, and funding, illustrating how various social structures adapted to perform their necessary functions in a time of widespread disruption.*

**Keywords:** *Bayanihan to Heal as One Act (RA 11469), Corona Virus 2019 (COVID-19), Human Rights, Siracusa Principles*

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## Introduction

The sudden disruption in the perceived social order brought by any emergency challenges the resolve of social institutions commissioned to execute the law.

It was manifested that the containment initiatives proposed by the State to advance collective good put individual liberties at risk (Authier 2020, Georgieva, 2020). Thus, the interest came about when institutions acknowledged the universal threats of transgressing human rights during the implementation of COVID-19 control measures. This was made more unsettling by the persistence of global bans, quarantines, and lockdowns in varying degrees and appearances.

The gap becomes apparent when the citizen and the law come into conflict against each other in their attempts to outlive the crisis. The very essence of the State to secure the well-being of its citizens comes into question when citizens perceive the State to be too imposing to the extent of despotism. The COVID-19 tragedy unfortunately exposed the unimaginable power of the State over its citizens. Marquardt (2017) explains that the devolution of power from the central government to the local government without capacity building, coordination, and exchange across jurisdictional levels (Marquardt 2017) leads to an uneven distribution of power making the decision-makers the sole centers of control and authority. It appears that the human rights issues emanating from the COVID-19 containment strategy were further aggravated by the prohibitionist mindset embodied by retired military personnel leading the national agencies. The dominance of a single mindset created a gap in the coordination and consultation processes between various administrative levels of decision-making (Marquardt 2017) consequently leading to the neglect(ing) and overrule(ing) of other actors. Marquardt (2017) further argues that such disconnect might lead to policy failure due to local opposition, lack of accountability, or weak awareness Marquardt (2017).

This research advocates for the absolute protection of human rights at all costs and at all situations; even during emergencies. It performs a policy analysis on public health legislations and how these policies affected human rights during the COVID-19 crisis.

Specifically, the research examines the following issues during this COVID-19 medical emergency: (1.) the policies that were crafted during this health crisis concerning human rights; (2.) the transgressions made by citizens and state agents concerning policies that were crafted during this health crisis, and finally, (3.) to discover learning opportunities for the human rights commission and State agencies to work together in crafting human rights centered policies during emergencies.

The COVID-19 pandemic made it known that Philippine institutions (like other countries of the world) were not ready to respond to a crisis of this magnitude. Consequently, the State in its effort to secure its citizens was trapped in a very delicate situation of robbing its citizens some of their liberties on one hand and advancing collective good on the other. This initiative seeks to lay down the foundation on how

to respond and pursue solutions to a crisis while maintaining the human rights framework.

The project frames a cordial atmosphere for the government agencies and other social institutions to be consistent in the protection of human rights while making sure that public health and safety are vigorously pursued. The COVID-19 pandemic serves as a backdrop, while the City of Manila and Quezon, City were considered as locales of this study to enhance the understanding of policy making and implementation during a crisis.

Beyond processing human rights complaints, Human Rights Commissions (HRCs) broadly advocate for human rights through research, policy development, and public education. By not limiting their advocacy to the laws they oversee (Eliadis 2014), HRCs have increased rights consciousness and demands for wider rights (Howe and Johnson 2000) and have shaped public policy (Nierbobisz et al. 2008).

The Commission on Human Rights-Philippines, similar to that of the human rights commissions in Canada, seeks to strengthen its advisory role in government's response to COVID-19 (Amnesty International Canada, 2020) through research, policy development, and public education (De Silva 2020).

## **Review of Literature**

### **Government's Response During the COVID-19 Crisis**

On March 11, 2020, the World Health Organization (WHO) officially declared Coronavirus Disease 2019 (COVID-19) as a pandemic. The pronouncement was made public after assessments were made on the global impact of the Coronavirus Disease 2019 (COVID-19) outbreak. The decision of the WHO was influenced not only by the disturbing severity and spread of the infection, but more importantly on the disappointing levels of structural incapacities exhibited by nations worldwide.

In the state of panic and confusion, one by one, nations closed their borders and created health protocols as an immediate response to the health crisis. In the Philippines, President Rodrigo Duterte on March 8, 2020, issued Proclamation No. 922 declaring the state of public health emergency in the entire archipelago. The objective was to facilitate the necessary measures to address the Coronavirus Disease 2019 (COVID-19) catastrophe. Among the initial recommendations of the government include the mandatory reporting of infection, quarantine, and disease control prevention initiatives.

Shortly, the Inter-Agency Task Force for the Management of Emerging Infectious Disease (IATF-EID) was convened on March 9, 2020, and adopted the social distancing measures to break the spread of COVID-19. Three days later, on March 12, 2020, the Inter-Agency task force (IATF-EID) issued Resolution No. 11, Series of 2020, raising the code alert system for the COVID-19 public health event to code red-sublevel two, following the recommendation of the Department of Health Technical Advisory Group on stringent social distancing measures in the National Capital Region (NCR) for a period of thirty (30) days.

The social distancing measures resulted to the suspension of classes in all levels in Metro Manila and to the prohibition of mass gatherings. The work from home (WFH) and flexible work arrangements in the private sector were encouraged to support the efforts of the central government.

The code red-sublevel two proposed by the Department of Health (DOH) empowers the State to implement lockdowns after acknowledging the continuous transmission of the virus locally. This extreme measure is perceived by the government as an effective alternative in controlling the transmission of the virus.

Further flexing the State's ability to contain the situation, the IATF--EID resolution No. 11 seeks the need for an inter-sectoral collaboration to establish preparedness and ensure efficient government response to assess, monitor, contain, control, and prevent the spread of any potential epidemic in the Philippines (<https://doh.gov.ph>). Since the first local transmission took place in a prayer hall in barangay Greenhills, San Juan City, the DOH advisory group recommended the imposition of stringent social distancing measures in the National Capital Region for a period of thirty (30) days.

The local government units (LGUs) outside of the National Capital Region were likewise advised to rally behind the government's recommendations. On March 12, 2020, President Duterte addressed the nation and announced that Metro Manila is placed on community quarantine from March 15, 2020 until April 14, 2020. The quarantine measure includes the suspension of land, domestic air, and domestic sea travels to and from Metro Manila. Furthermore, pursuant to proclamation Nos. 929, the president likewise directed all LGUs to adapt, coordinate, and implement guidelines on the imposition of an enhanced community quarantine and the stringent social distancing measures over the entire Luzon. Barangays, municipalities, cities, and provinces imposed their respective community health and quarantine protocols to assist the central government in containing the spread of the virus. Further still, Presidential Declaration 922 placed the entire Philippines under the state of public health emergency. It gave the LGUs the necessary legal backbone to access their calamity funds and empower their respective local initiatives.

## **Review of Policies**

### *The Inter Agency Task Force (IATF)*

As stated in Section 15 of Article II of the 1987 Constitution, it is the primary duty of the State to protect and promote the right to health of every Filipino. Thus in its effort to establish a strong and intelligent response to future health crises; the Inter-agency Task Force (IATF) for the Management of Emerging Infectious Diseases was created by virtue of Executive Order No. 168, series of 2014. This supra body recognizes the need for an inter-sectoral collaboration to establish preparedness and guarantee an efficient government masterplan to assess, monitor, contain, control, and prevent the spread of any potential epidemic in the Philippines (IATF Resolution No.11, 2020).

On January 30, 2020, the World Health Organization (WHO) was convinced that the new type of Coronavirus that has not been previously discovered has shaped into a public health emergency of international concern. This was twenty-three (23) days after the Chinese health authorities reported an outbreak in the Wuhan, Hubei Province, China.

Thus, various State agencies were convened on March 12, 2020, to constitute a whole-of-government approach in responding to the risks of the COVID-19 transmissions. In that meeting, the member agencies of the IATF represented by their respective delegates recommended the Code Red Sublevel Two (2).

The recommendation of the IATF-COVID-19 panel immediately laid down the blueprint on how to mitigate the impact of the infection on a national scale. Community lockdowns and quarantines were authorized, social distancing was imposed by suspending mass gatherings such as classes and community events. Furthermore, public and private corporations were compelled to form skeletal workforces and flexible work arrangements. Finally; aerial, land, and sea travels were restricted some were completely suspended.

#### *The Bayanihan to Heal as One Act*

After crafting the necessary safety protocols to ensure compliance and protection of the citizens, the Lower and Upper Houses enacted the Republic Act No. 11469, the Act Declaring The Existence Of A National Health Emergency Arising From The Corona Virus Disease 2019 (COVID-19) Situation And A National Policy In Connection Therewith, And Authorizing The President Of The Republic Of The Philippines For A Limited Period And Subject To Restrictions, To Carry Out The Declared National Policy And For Other Purposes also known the Bayanihan to Heal as One Act.

RA 11469 took the rise of COVID-19 cases as a serious threat to the health, safety, security, and lives of our countrymen, the long-term adverse effects on their means of livelihood, and the severe disruption of economic activities (Bayanihan to Heal as One Act, 2020). Thus, with the striking loss of lives and economic opportunities, legislators deemed it necessary to give the Chief Executive the emergency power needed to optimize the efforts of the President to carry out the tasks needed to implement (Bayanihan to Heal as One Act 2020) the template for containment and recovery. The law granted the President the temporary emergency power to put in effect the COVID-19 response policy.

As part of the check and balance inherent in the co-equal branches of the government, the President is ordered by law to submit a weekly report of all acts performed pursuant to the Bayanihan to Heal as One Act of 2020.

In a general sense, the Bayanihan Act allowed the State to respond using a two-pronged approach; first through its power to legislate, regulate, and restrict; and second, through its inherent obligation to nourish, protect, and promote the right to life and right to health of every constituent.

Relative to its power to legislate, regulate, and restrict; the provisions in the Bayanihan To Heal as One Act emphasized in the allocation and realignment of funds through legislative measures. The Act likewise regulated the public and private institutions as well as individuals (e.g. physical mobility, work arrangements, etc.) to ease the burden of people in lockdown areas and quarantine facilities. Furthermore, the same law enforcers restrictions to ensure people are secured during the crisis.

Relative to the State's obligation to nourish, protect, and promote the right to life and right to health, the declaration of the state of public health emergency throughout the country made it possible for the central and local governments to access its quick response funds to operationalize its programs and make sure that essential goods are available to the citizens. Similarly, the Law strives to protect all its citizens by promoting education, detection, and treatment measures.

With the enactment of the Bayanihan to Heal as One Act; the central government expects the local government units to align themselves in the protection of national interest by performing their duties as ordered by the Local Government Code (LGC) of 1991.

Months after putting in effect all its relief and recovery measures, President Duterte on September 11, 2020, signed RA No. 11494 or the Bayanihan to Recover as One Act. The Senate and the Lower House extended and amplified the temporary powers granted to the Chief Executive by suspending some institutional procedures that may dampen major efforts dedicated to health and economic aids. Republic Act 11494 gave the President the authority to realign government funds for the most vulnerable sectors of the society.

In support of the Bayanihan 1 (Republic Act No. 11469), the Bayanihan 2 (RA No. 11494) seeks to temper the adverse impact of the COVID-19 crisis by focusing on the recovery measures and providing assistance, subsidies, and other forms of relief ([grantthorton.com.ph](http://grantthorton.com.ph)).

Primary importance was given to the following sectors: health, labor tourism, transportation, education agriculture, trade and finance, social welfare, sports, and foreign affairs.

Likewise, loans were restructured and extended by banks, financing companies, lending, real estate developers, and other public and private financial institutions.

Payments for utilities such as electricity and water bills were temporarily suspended. Furthermore, a mandatory grace period of 30 days for loans and rentals were also imposed. Local government units under the supervision of the IATF-EID adapted the national action plan pursued by the central government to bring the best response set, so that economic recovery and eventual growth would be within reach ([grantthorton.com.ph](http://grantthorton.com.ph)).

## **Review of Transgressions**

Recognizing the scale, severity, and seriousness of the COVID-19 disease, public health officials recommended a number of health protocols to prevent the transmission of the virus.

Executive and legislative actions were forwarded to initiate extraordinary measures to suppress the spread of the disease. Joseph Amon (2020) narrates that in the US, 50 states, seven territories, and the District of Columbia have taken some type of formal executive action in response to the COVID-19 outbreak. As of March 23, 2020, five states (California, Illinois, New Jersey, New York, and Ohio) prohibit gatherings of any size; nine states prohibit gatherings of more than 10 individuals (Colorado, Hawaii, Louisiana, Maine, Maryland, Texas, Utah, Vermont, and Wisconsin); four states prohibit gatherings of more than 25 individuals (Alabama, Massachusetts, Oregon, and Rhode Island) and eight states prohibit gatherings of more than 50 individuals.

The extraordinary measures that were aggressively put in place is expected to restrict some of the rights of the people as the COVID-19 virus continues to threaten public health. However, human rights law recognizes the proportionality of State interventions and the gravity of the health emergency. In the context of a serious public emergency where the life of the nation is at risk, restrictions may be justified as long as it has the legal basis and the scientific evidence that the action of the State corresponds to the needs of the public.

In the Philippines, the Human Rights Watch (HRW) (2020) documented that there is a massive violation of people's rights while in custody. The Human Rights Watch (HRW) concludes that police and local officials in several parts of the country have mistreated people detained for violating COVID-19 regulations, including by confining them to dog cages and forcing them to sit for hours in the midday sun. Children are among those facing cruel, inhuman, and degrading treatment for violating pandemic emergency measures.

On September 8, 2020, it was reported that over 100,000 quarantine violators (Talabong 2020) were arrested in the country since the lockdown took effect in March 2020. The breakdown of the arrests in the three major islands in the country is as follows:

Luzon – 57, 253 arrests  
Visayas - 23,891 arrests  
Mindanao - 19,342 arrests

In the initial stages of the imposition of health protocols in the entire archipelago, several controversies shock the nation and doubted the militarized approach in a health crisis.

In Binondo, Manila, village officials arrested four boys and four girls on March 19, 2020, for violating curfew. They forcibly cut the hair of seven of the children while

the one who resisted was stripped naked and ordered to walk home (Human Rights Watch 2020).

Local officials in Santa Cruz town in Laguna province admitted locking up five youths inside a dog cage (Human Rights Watch 2020) on March 20, 2020.

In Parañaque, a city within Metro Manila, it was reported on March 24, 2020 that curfew violators were forced to sit in the intense midday sun after their arrest (Human Rights Watch 2020).

In Cavite province, on March 26, 2020, two children were locked in a coffin as punishment for violating curfew (Human Rights Watch 2020).

In Quezon City, on April 27, 2020, Michael Rubuia, a fish vendor, was mauled and dragged by deputized civilian officials from Task Force Disiplina (Rappler 2020) for failing to wear a face mask and not bringing a quarantine pass while outside of residence. Later the local government dropped its complaint against Rubuia and proceeded with investigating its personnel for a possible human rights violation.

In Pandacaqui, Mexico, Pampanga, on April 5, 2020, three members of the LGBTQ+ community were ordered by a barangay captain to kiss each other and perform a “sexy” dance in front of a minor (Rappler 2020) as a way of punishing them for violating the curfew.

In a television broadcast, reported by Aljazeera on April 2, 2020, President Rodrigo Duterte issued a disturbing instruction that may have heightened the intervention of the military, the police, and deputized personnel. Pres. Duterte warned the public that he would order the country’s police and military to shoot dead anyone “who creates trouble” during a month-long lockdown in Luzon (Aljazeera 2020).

Immediately after, on April 3, the first civilian casualty in the COVID-19 restriction protocols was a 63-year-old man who was shot dead in the town of Nasipit, Agusan del Norte after threatening village officials and police with a scythe at a coronavirus checkpoint (Aljazeera 2020).

On April 21, 2020, Winston Ragos, 34 years old, a retired soldier suffering from post-traumatic disorder following his tour of duty during the Marawi siege in 2017 was shot dead by police at a checkpoint in Quezon City (Rappler 2020).

Few weeks before the 2020 Christmas holidays, Police General Cesar Binag, commander of the Coronavirus Task Force threatened social distancing violators with caning (Reuters 2020).

## **Review of Opportunities**

The Human Rights Watch (HRW) seeks to secure the well-being of citizens by enforcing the universal protection of all under the International Covenant on Economic, Social and Cultural Rights. The Covenant in which almost all countries of the world entered into in 1966 adopted the principle that everyone has the right to the highest attainable standard of physical and mental health... and that governments are obligated to take effective steps for the “prevention, treatment and control of epidemic, endemic, occupational and other diseases (Human Rights Watch 2020).



In an event of a crisis, HWR seeks to guarantee a balance between individual freedom and the responses of the State in combating the emergency.

As such, the following international standards were recommended after a thorough examination of cases in different countries. First, protect freedom of expression and ensure access to critical information. Governments should fully respect the rights to freedom of expression and access to information... governments should ensure that the information they provide to the public regarding COVID-19 is accurate, timely, and consistent with human rights principles (Human Rights Watch 2020). Second, to ensure quarantines, lockdowns, and travel bans comply with the (human) rights norms and that governments should avoid sweeping and overly broad restrictions on movement and personal liberty and only move towards mandatory restrictions when scientifically warranted and necessary and when mechanisms for support of those affected can be ensured (Human Rights Watch 2020). Third, considers the protection people in custody and in institutions such as jails and other detention facilities by reducing its population after undergoing legal procedures. Fourth, to ensure protection of health workers and that governments should ensure that health workers have access to appropriate protective equipment and that social protection programs are in place for the families of workers who die or become ill as a result of their work (Human Rights Watch 2020). Fifth, fulfill the right to education even if schools are temporarily closed and that the States are encouraged to adopt a variety of hi-tech, low-tech and no-tech solutions to assure the continuity of learning (Human Rights Watch 2020). Sixth, to address disproportionate impacts on women and girls and that authorities should take steps to mitigate gendered impacts and ensure that responses do not perpetuate gender inequity (Human Rights Watch 2020). Seventh, to root out discrimination and stigma, protect patient confidentiality and that governments should ensure that response measures to COVID-19 do not target or discriminate against particular religious or ethnic groups, and that responses are inclusive of and respect the rights of marginalized groups including people with disabilities and older people. Governments should ensure equal access to emergency services to people with disabilities and older people (Human Rights Watch 2020). Eighth, to protect community and civil society organizations (Human Rights Watch 2020) in the conduct of their advocacies. Ninth, to promote the rights to water and sanitation and that governments should immediately suspend any water shutoffs for failure to pay. Discontinuing water services for failure to pay in any context is incompatible with human rights and can be particularly harmful in the context of public health crises like the COVID-19 pandemic (Human Rights Watch 2020). Tenth, to ensure that humanitarian aid continue and that governments should ensure that support for vital humanitarian operations carried out by the UN and other aid agencies does not suffer as a result of COVID-19 (Human Rights Watch 2020). Finally, extend economic relief that will assist low-wage workers and that governments should take policy measures to buffer the economic impacts of COVID-19, which will affect lower-wage workers first and hardest (Human Rights Watch 2020).

In summary, the function then of human rights institutions in the context of the COVID-19 response is to make sure that there is access to correct information about the crisis and continued access to formal education. Similarly, it also strives to remind the governments to protect freedom of expression and the rights of people in custody. Quarantines, lockdowns, and bans jeopardize the basic rights of the citizen thus, compliance to the commonly accepted norms is promoted.

## **Theoretical Framework**

This research examines the responses of the State using the positivistic framework. Positivism argues that the entire system must cope with external situational exigencies. It must adapt to its environment and adapt the environment to its needs (Ritzer 2011). The COVID-19 pandemic necessitates a rapid structural adjustment to mitigate the spread of infection. As such, the political system became the pivotal institution that defined the goals and laid down policies to achieve the desired level of health security. At the same time, the political institution did not only establish the pandemic goals but also regulate(d) the interrelationship of its component parts (Ritzer 2011) and tried its best to create new behavioral patterns to survive the pandemic.

The adaptive mechanisms designed by the State to restore order and equilibrium is subjected to thorough inspection to discover how these laws affected individual rights and freedom in the time of pandemic.

In additional, the Siracusa Principles were used as parameters to contextualize the functionality of the policies. The Siracusa Principles provided the research to tools to measure the policies enacted by the State during this health emergency.

These principles were adopted by the UN Economic and Social Council in 1984, and by the UN Human Rights Committee. The Siracusa Principles laid down the general framework that seeks to guide State responses during public health and national emergencies. The principle states that; any measures taken to protect the population that limit people's rights and freedoms must be lawful, necessary, and proportionate. States of emergency need to be limited in duration, and any curtailment of rights needs to take into consideration the disproportionate impact on specific populations or marginalized groups (Human Rights Watch 2020).

The response of the Philippine government is validated with the Siracusa Principles thereby contextualizing the accepted international standards for a health emergency. In this research, the following variables are used to examine the data from the field:

1. carried out in accordance with the law
2. directed toward a legitimate objective of general interest
3. strictly necessary in a democratic society to achieve the objective
4. the least intrusive and restrictive available to reach the objective
5. neither arbitrary nor discriminatory in application
6. subject to review

The six (6) principles are used as research tools to elaborate on the measures taken by the Philippine government. Furthermore, the use of this suggested universal standard serves as a model for national level policymakers on how to craft policies that humanely addresses a national crisis

## **Methodology**

This project assumes that this once in a life-time pandemic, provides an opportunity for human rights advocates and policy-makers to re-imagine policy during emergencies.

Phenomenology is used as a research approach to describe the configurations of human experiences as they present themselves to consciousness, without attachment to any theoretical orientation, deductions, or presumptions.

As a methodological practice, phenomenology seeks to describe the fulfillment and completion of the entire affair-complex producing not only an imagined or perceived act but also an embodied presence; a being in the world.

This study is both exploratory (aims to develop basic facts, a well-grounded picture of the socio-political affairs, formulate tentative or possibly fixed theories) and explanatory in its attempts to advance knowledge, build an elaborate theory, and provide a comprehensive explanation of the case being studied (Neuman 1994).

The study derives its data from the narratives of the research participants and from the content analysis of policies made by the two cities.

For the experiential inferences (phenomenology); an open-ended interview schedule was used to generate responses from the COVID-19 frontliners. Eight (8) Health workers from the City Disaster Risk Reduction Management Office (CDRRMO) and eleven (11) officers from the Philippine National Police were interviewed from the City of Manila and Quezon City. The fieldwork took place in September 2020 followed shortly by the handling, management, treatment, and analysis of data in the succeeding month.

The purpose of phenomenology in this research is to understand how the studied subjects see the world, it also allows the researcher to capture the meanings based on their individual perceptions and experiences (Corbetta, 2003) so that the research will arrive at the source or the nucleus of truth.

The research observed the six stages of generating and handling the data.

<b>Stage 1</b>	<b>Data Collection</b>	refers to the generation of responses from the field
<b>Stage 2</b>	<b>Encoding</b>	refers to the conversion of the data into an electronic form
<b>Stage 3</b>	<b>Coding</b>	refers to the breaking down facts into themes or categories making it more manageable for theorization and conceptual associations
<b>Stage 4</b>	<b>Sorting</b>	refers to thematic organization of data
<b>Stage 5</b>	<b>Memoing/Story-telling</b>	refers to process that includes the researcher's fieldnotes as relevant data. <i>Memoing is the theorizing write-up of ideas about codes and their relationships as they strike the analyst while coding... it can be a sentence a paragraph or a few pages... it exhausts the analyst's momentary ideation based on data with perhaps a little conceptual elaboration</i> (Glaser in Miles and Huberman 1994).
<b>Stage 6</b>	<b>Decoding</b>	refers to the unriddling of the phenomenon. In this phase of the research, realities that were previously unknown and distant becomes familiar and knowable.

In addition, the conduct of policy analysis was done from two perspectives first through the *content analysis and second using the contextual analysis*. The *content analysis* goes beyond the mere examination of the *provisions of the law but also casting them in some kind of general categorization using typologies or taxonomies* (Brochu, n.d.; McBride, Terry-MCelrath, Hardwood, Inciardi, & Leukefeld, 2009; MacCoun, Reuter, & Schelling, 1996; Ostrowski, 1989; Reuter, Falco, & MacCoun, 1993). While contextual analysis on the other hand examines the contextual milieu of the policy. *Thus, COVID-19 related policies must be analyzed in context and in situ, with local realities and situations taken into account of* (Ritter, Bammer, Hamilton, & Mazerolle, 2007), *while focusing and highlighting the broader historical, social, economic, political, cultural and philosophico-moral factors that shape their formulation* (Cohen, 1993; Ghodse, 2010; Harrison, Backenheimer, & Inciardi, 1996; Jelsma, 2010; McBride, et al., 2009; Sinha, 2001; Stoker, 2008).

For the policy review analysis; eighty-nine (89) legislative actions related to the COVID-19 pandemic were content analyzed using a three-layer analysis (1. Intention of the Policy; 2. Instruments to implement the policy, and 3. the intervention strategies. Sixty-two (62) legislative actions from the Quezon City Council and twenty-seven (27) legislative actions from the Manila City Council.

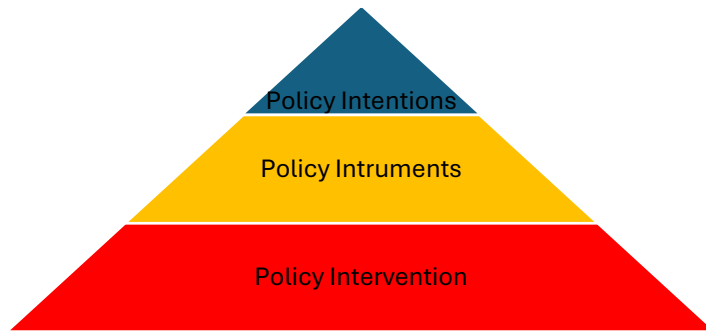
The research uses the manifest-latent analysis technique to operationalize the content and contextual analyses in analyzing the ordinances and resolutions crafted by the two cities.

In a manifest (content) analysis, the researcher performs a close reading of the text *to describe the visible and obvious in the text* (Bengtsson, 2016). This technique takes into consideration what was mentioned in the text.

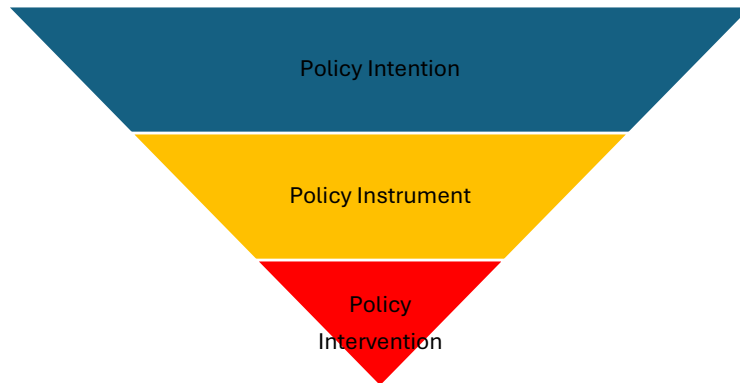
Furthermore, latent (contextual) analysis is used to perform an interpretive analysis in which the researcher tries to find the latent meaning of the text.

These techniques allow the research to consider not only the intentions, instruments, and intervention strategies suggested by the law but also its social milieu.

The first diagram shows how a policy document may be analyzed by breaking the law into three significant parts.



However, the implementation of any policy or legislative action should be examined using a reversed pyramid arguing that the policy intention should outweigh the policy intervention.



It is proposed that in most cases the militarization of policy interventions invalidate the just, humane, and life-giving nature of the law.

The narratives of these respondents as well as the policies made during the COVID-19 pandemic are used to respond to the research objectives.

## Results and Discussion

This portion of the research takes into consideration three major areas of interests; (1.) the policies crafted by the local government units of Manila and Quezon City as they align themselves to the COVID-19 law; (2.) the transgressions made by citizens and state agents in relation to the policies that were crafted during this health crisis, and (3.) lastly, serious attention is given to learning opportunities for human rights commission and State agencies to work together in crafting human rights centered policies during emergencies.

Other than the ordinances and resolutions crafted by the legislative department and approved by the local chief executive; uniformed personnel from the Philippine National Police as well as the frontline health workers deployed in the two cities were allowed to exhibit their experiences as a being in a world in crisis.

### Policies Crafted During the Health Crisis

The collapse of institutions brought about by the pandemic reveals the need for the central government to draft its concrete plans on how to handle future crises. Without such a plan, resiliency and adaptation exposes the general public to greater risks through trial and error strategies. Downplaying the massive impact of the virus

on the part of the central government led to delays in preparation and response. As a result, the LGUs scrambled to make the necessary legislative actions to protect their own.

The COVID-19 pandemic shows for example the vulnerability of health workers and the lack of preparation for relief operations for the marginalized (PNP,11). To legitimize and operationalize all efforts to protect the vulnerable, public administrators need to submit their action plans through the rigid process of legislation.

The legislative actions presented below seek to highlight the two-pronged approach by the State; first on its power to legislate, regulate, and restrict; and second, on its inherent obligation to nourish, protect, and promote the right to life and right to health of every constituent.

### **Legislative Measures On Planning, Aids, and Funding**

The natural tendency of an LGU is to mobilize funds from different sources as a preliminary response to finance the intended responses to the health crisis. As such, three supplemental budgets (ORD. No. 2909, Supplemental Budget No.1 ORD. No. 2921, Supplemental Budget No. 2, and ORD. No. 2922, Supplemental Budget No.3) were approved by the Quezon City Council to support the additional financial needs and expenditures of the city government for fiscal year 2020 concerning the suppression, control, and mitigation of the impact of the COVID-19 crisis to the community.

The Supplemental Budget No.1, General Fund for Fiscal Year 2020, is in the amount of Two Billion and Eight Hundred Million Pesos (Php 2,800,000,000.00). On the other hand, the Supplemental Budget No.2 secures the amount of Four Hundred Seventy-Nine Million One Hundred Twenty-Thousand Two Hundred Sixty-Five Pesos (Php 479,265.00). Lastly, Supplemental Budget No.3 seals the total of One Billion and Four Hundred Thirty Million Pesos (PHP 1,430,000,000.00).

The City of Manila on the other hand appropriated Sixty Million Pesos (PHP 60,000,000.00) in its Supplemental Budget No. 1 as financial aid for its employees and job order workers (ORD No. 8620). Additional funds were raised amounting to Five Hundred Ninety-One Million Five Hundred Thousand Pesos (PHP 591,500,000.00) through a series of budgetary re-alignments from the Office of the Mayor, the Manila Department of Social Welfare, and the City Development Fund under the City Ordinance No. 8625 also known as the City Amelioration Crisis Assistance Fund (CACAF) of 2020. A number of supplemental budgets were further enacted by the city of Manila to augment the COVID-19 response measures.

As of November 24, 2020, the City of Manila had passed sixteen (16) supplemental budgets, however, some of the documents were inaccessible to the researcher.

Aside from the above-mentioned fund allocations, the two cities approved resolutions and enacted ordinances that reinforce the survival of their citizens. A number of these strategies are mentioned below.

Resolution No. 8269, S-2020 sets aside One Billion Pesos (PHP 1,000,000,000.00) from the City's Annual Budget for 2021 to cover the expenses for Covid-19 Vaccines in Quezon, City upon its availability. This preparation guarantees a rapid, fair, and equitable access to Covid-19 vaccines. Ordinance No. 8668 of Manila appropriates Fifty Million Pesos (PHP 50,000,000.00) for the City of Manila's action plan against COVID-19 specifically for the purchase of Remdesivir for the treatment of COVID-19 patients, medical, dental and laboratory supplies for the use of Manila City hospitals, COVID-19 laboratory tests and for molecular laboratory and various medical equipment.

Resolution No. 8230, S-2020, gives the City Mayor the authority to enter into a Memorandum of Agreement with the Department of Agriculture (DA), Through the Bureau of Fisheries and Aquatic Resources, National Capital Region (BFAR-NCR), establishing a partnership for the Implementation of the technology demonstration on community urban aquaculture program in the City. The agreement suggests an eco-friendly system of food production by promoting an urban aquaculture with emphasis on "Aquaponics system" by providing needed structures, agricultural inputs and technical assistance to communities to ensure effective implementation.

In Manila, a reward system was put in place granting any Barangay that shall remain COVID-19 free from September 1 to October 31, 2020 a reward of One Hundred Thousand Pesos (PHP 100,000.00) (ORD. NO. 8673).

Furthermore, the City Council gave the Local Chief Executive the authority to enter into a Memorandum of Agreement with Land Bank of the Philippines- Quezon City Hall Branch for the purpose of distributing financial aid to the qualified beneficiaries of Kalingang QC with the objective of mitigating the effects of Covid-19 pandemic on the community by providing financial aid to the vulnerable residents of Quezon City (RES No. 8205, S-2020).

Special considerations were also given to health workers and frontliners of the City by providing additional benefits added to all other benefits provided by the City government. Ordinance No. 2912 appropriates Ten Million (Php 10,000,000) pesos to assist frontliners (10,000 for those who recovered and 20,000 for those who died) such as but not limited to health care workers, barangay officials, barangay staff, city employees, security guards, bank employees, service crew, garbage collectors, vendors, media personnel, reporters, broadcasters among other essential workers who were confirmed positive and their next of kin as they recover from the impact of COVID-19 on their lives and finances.

An endowment benefit is granted by the City of Manila worth One Million Pesos (PHP 1,000,000,000.00) to all health workers in the city-owned hospitals and health centers who succumbed to the Corona Virus Disease 2019 in the line of duty or while performing his/her duties to combat the spread of the disease in the city (ORD. NO. 8639).

Special Risk Allowance is dedicated to the frontline Quezon, City Public health workers who are greatly exposed to health risks and physical hardships in the line of duty and in the light of the COVID-19 pandemic under the Ordinance No. 2924 equivalent to twenty-five percent (25%) of monthly salary/pay.

Also, the same Ordinance (ORD NO. 8626) was passed by the City of Manila granting financial assistance to doctors, nurses, and allied professionals rendering service to the Manila Health Department and the six (6-) hospitals of the City of Manila.

Hazard pay (Ordinance No. 2923) of Php 500.00 is granted to Quezon City Government Personnel... including regular, contractual, or casual positions, or are engaged through contract of service (COS) and other similar schemes who physically report for work during the period of implementation of enhanced Community Quarantine Relative to the COVID-19 Pandemic. The same amount is given by the City of Manila to its personnel under Ordinance No. 8667.

### **Legislative Measures On Health, Sanitation, and General Well-being**

Aside from the generation of funds, drafting of the COVID-19 recovery masterplan, and the provision of financial aids to the residents of the two cities; its public administrators likewise established regulations to guarantee the safety of the citizens.

The three minimum health protocols (wearing of face mask, social distancing, and hygiene) during the pandemic were legislated and institutionalized. First, the Ordinance QC No. 2908 demanded for the mandatory use of facemasks or other face coverings in public places within Quezon, City to mitigate the spread of COVID-19. The Ordinance directs all persons to wear any type of face mask or face covering...at all times while in public places in QC. And that, charges may be filed for violation of section 9(e) of RA No. 11332.

The City of Manila likewise mandated all persons who are within its territorial jurisdiction to use face masks while outside of their respective residences, offices, and all other public places. And that the face mask must sufficiently cover one's nose and mouth (Manila ORD. NO. 8627, and Manila ORD. NO. 8644).

Social distancing was likewise implemented by prohibiting all mass gatherings in the territorial jurisdiction of both Cities using the following measures: first, imposition of curfew hours (QC RES No. 8151, S-2020 and Manila ORD No. 8647) ; second, empowering of the local chief executive to impose localized community quarantine and enforce disease surveillance and response systems, epidemic/outbreak and epidemiologic investigations, and rapid containment, quarantine, and isolation, disease prevention and control measures (QC ORD No. 2934); third, urging all food establishments with sit-in/dine-in services to place area dividers between seats in order to prevent physical contact (QC RES No. 8154,S-2020), the same protocol applies in the operation of Sta. Monica Cockpit (QC RES No. 8251 , S-2020); fourth, urging government offices specifically the Land Transportation Office (LTO) to adapt online registration options in order to restrain the influx of people, and ensure the safety of



LTO employees and a thousand of motor vehicle registrants (RES No. 8209 , S-2020); fifth, regulating the physical mobility of people by adopting the world travel and tourism council (WTTC) safe travels new global protocols for travel and tourism under the new normal (QC RES No. 8219 , S-2020).

Additional legislative measures enacted by the city includes the placement of hand sanitizers in workplaces in all public and private institutions and in the 142 Barangay Halls of the City to maintain collective hygiene (QC RES No. 8154, S-2020). For the skeletal work force, clean and sanitized shuttle or transports service were provided to the employees of the Quezon City government who will physically report for work during the period of Modified Enhanced Community Quarantine (MECQ) or General Community Quarantine (GCQ) under alternative work arrangements to ensure the convenience and safety of the employees and to protect them from possible exposure to COVID-19 (QC RES NO. 8193,S-2020).

Furthermore, the City seeks to protect the individual rights of people who were infected and recovering from the disease by passing the Ordinance No. 2911 that prohibits any person, whether natural or juridical from committing any act or forms of discrimination against any coronavirus (COVID-19) infected persons, recovered patients, person under monitoring or persons under investigation and against public and private doctors, nurses, health workers, emergency personnel and volunteers and other service workers who are assigned in hospitals and/or other health care institutions / centers where COVID-19 patients are being treated situated within the territorial jurisdiction of Quezon City and providing penalties for violations thereof. The same Ordinance against discrimination was enacted by the City of Manila (Manila ORD NO. 8624).

Finally, Quezon City enacted an ordinance (QC ORD NO. 2907) that establishes the protocols for the management of the deceased during the COVID-19 Pandemic following the guidelines of the DOH Dept. order No. 20202-0067 "Guidelines on the Disposal and Shipment of the Remains of Confirmed Cases of 2019 Novel Corona Virus Acute Respiratory Disease."

### **Legislative Measures for Businesses and Livelihood**

The immediate response of the City right after the declaration of the state of national emergency by President Duterte was to regulate the selling of basic necessities through the Ordinance No. 2914. This Ordinance in cooperation with the Business Permit and Licensing Department (BLPD) and the Market Development Administration Department intends to first, prevent hoarding and panic buying during calamities; second, prevent people from selling basic necessities at a very high price; third, to strictly monitor and limit the purchase of goods; fourth, to allow spot inspection of receipts and monitor compliance; lastly, the Barangays were mandated to assign focal persons for inspection of sari-sari stores within respective territorial jurisdiction.

Impact assessment was then proposed by the Council of Quezon City to determine the effect of Covid-19 pandemic on registered micro, small, and medium enterprises operating in the city (QC RES. NO. 8179, S-2020).

Quezon City Resolution No. 8220, S-2020 on the other hand seeks to provide Livelihood opportunities to Quezon City residents-jeepney, tricycle and motorcycle drivers whose income were affected by the suspension of work and restriction of public transportation. The proposal encourages the Mayor to enter into a Memorandum of Agreement with the a number of service providers namely; Lalamove Philippines, Inc. to have qualified jeepney drivers as Lalamove partner-drivers for a limited period of time to be called as the "LalaJeep Program", Partnership with FoodPanda intend to provide economic opportunities to five hundred tricycle driver-residents of Quezon City to be called "PandaTODA-Quezon City Project", Partnership with Grab Philippines intends to accommodate two thousand tricycle drivers, and work-displaced motorcycle owners as Grab Drivers known as "Grab-Quezon City Socio Economic Recovery Initiative."

A few weeks after the total ban on the sale consumption of alcoholic beverages, Quezon City Ordinance No. 2928 was enacted to relax the total prohibition and help the retailers and small businesses recover from their losses.

### **Transgressions Made by Citizens**

With the above-mentioned health protocols designed to protect the collective good; ordinary citizens manifested its seeming disregard of the law. Data in the succeeding presentation were derived from the officers of Philippine National Police (PNP) and the health workers (HW).

The PNP personnel concluded that, the violators supposed lack of concern for the well-being of the general population led to multiple arrest due to these common offenses; first, the improper wearing of face mask and face shield, (PNP1, PNP2, PNP3, PNP4, PNP6, PNP7, PNP8, PNP9, PNP10, PNP11).

However, this research argues that such public behavior is the dreadful consequence of the confusion and misinformation circulated by the Department of Health (DOH), the lead agency in this crisis. The DOH, the inter-agency task force as well as the bureaucrats tasked to address the COVID-19 crisis failed to provide a clear mindset and a transparent blueprint on how to reduce the impact of the catastrophe.

The newly appointed contact tracing czar and Baguio City Mayor Benjamin Magalong demanded local chief executives to expand their tracing and testing capabilities. Magalong states that what is happening now is LGUs tend to portray a very good COVID-19 situation in their area so tendency lower contact tracing and lower testing... especially now that we have the election, the tendency of our local executives, is to show that they are managing well their contact tracing despite the fact that they have inadequate system... we are lying to ourselves. We are lying to the public (Quismundo, 2021).

On March 2, 2020, six days before the declaration of the state of national emergency, the DOH informed the public that not everybody needs to wear a mask to protect one's self from the COVID-19 virus. It states that people with no respiratory signs and symptoms do not need to wear a medical mask. DOH recommends the use of medical masks only for the following group of people; those who are presenting with symptoms of COVID-19; those caring for individuals who have symptoms such as cough and fever, and health workers (<https://doh.gov.ph/node/19947>). The justification behind is that the DOH, together with WHO, advises the rational use of medical masks to avoid unnecessary wastage of vital resources and misuse of masks (<https://doh.gov.ph/node/19947>).

A little more than a month later, on April 9, 2020, the Department of Interior and Local Government (DILG) issued a memorandum circular No. 2020-071, instructing all government units and concerned agencies regarding the mandatory wearing of face masks or other protective equipment in public areas (DILG 2020). This was contrary to the initial stance assumed by the DOH.

Weeks later, the DOH shifted its position and argued that the wearing of masks may cut transmission rate by 67% for non-N95 masks and 96% for N-95 mask (DOH, 2020). With the scientific proof the virus being airborne, it became a universal practice all around the world that the wearing of facemask is part of the prescribed minimum health standards to ensure considerable protection from COVID-19. Succeeding months later, the DOH made further modifications and adjustments in its health protocols by introducing the "BIDA Solusyon sa COVID-19 Campaign" The program encourages the public to regularly adopt the minimum health standards as a behavioral lifestyle as we course through the new normal. As part of the BIDA campaign, the Department released a habit-forming checklist which summarizes and simplifies the minimum public health standards (DOH, 2020). As added protection, the wearing of face shield became mandatory to further reduce transmission.

The second most common transgression during the COVID-19 pandemic is the violation of social distancing (PNP2, PNP3, PNP4, PNP5, PNP6, PNP7, PNP9, PNP10, PNP11) in public places. The DOH reiterates that despite the wearing of face mask and face shield, the citizens were advised to stay at home or to maintain at least a one-meter distance from each other when in public areas. Scientific data reveals that by maintaining a physical distance of one meter reduces the risk of transmission by 80% - 82%. (DOH 2020).

The third most common transgression during the COVID-19 pandemic that is closely related to the arrest of violating the social distancing protocol is the unauthorized social gathering in private spaces (PNP4). Consequently, the Inter-Agency Task Force issued a resolution No. 80 on October 22, 2020 to restrict mass gatherings such as but not limited to, movie screenings, concerts, sporting events, and other entertainment activities, community assemblies, and non-essential work gatherings as well as religious activities in areas under General Community

Quarantine (GCQ) to strongly impress upon the population the need for physical distancing.

Finally, the fourth most common transgression during the COVID-19 pandemic is the curfew violation (PNP7, PNP8). The curfew was imposed to limit physical mobility of peoples and families. The Task Force regulated the traffic of people to only those who are working while the non-working members of the population were advised to stay indoors. It is assumed that the imposition of curfew eliminates trivial interactions and gathering of people in the communities, thus maintaining the social distancing protocol.

## **Learning Opportunities**

### *Intention versus Intervention*

Since the mindset of the Chief Executive Pres. Duterte is heavily anchored on the militarization of government solutions to almost all of its problems, the COVID-19 pandemic lends a learning opportunity on how the military and the police as an institution should respond to a crisis. In the omnibus guidelines on the implementation of community quarantine in the country the uniformed as well as its deputized personnel were reminded that in the implementation and enforcement of (curfew) ordinances, the Armed Forces of the Philippines (AFP) and the Philippine National Police (PNP) are strongly reminded to observe fair and humane treatment of (curfew) violators.

Data from the field reveals that the PNP personnel were very much aware of the need to respect human rights (PNP1, PNP6, PNP8) even under extraordinary stress. The problem however lies when the PNP (and the military) in the performance of their duties encounter many citizens that are hardheaded (PNP2, PNP9). This is where the complications arise. In some instances, the deputized and uniformed personnel in its eagerness to implement the law, commits hideous acts making it appear that the intervention strategies rooted on control, punishments, and restrictions are more prominent than the objectives of the law which is to secure the well-being of the citizens.

Further, there is a lack of proper education about the pandemic law implemented by the government and the national police as its implementing agency on the dangers of the COVID-19 virus (PNP3). There is also a need for proper education on the dangers of not following the health protocols (PNP3, PNP4, HW3, HW6, HW8). Some health workers suggested that the social media platform is an effective tool to educate the people through seminars (HW5) since this is the platform that is accessible to the masses (HW2, HW6). However, it should be noted that the social media is also a threat in the proper handling of the pandemic. The proliferation of fake news rendered crisis communication ineffective (HW9) and contributed in the massive confusion of the masses regarding the nature of the virus.

Furthermore, the proper implementation of the law (PNP5) must consider the age of the offender (PNP8, PNP10). By disregarding age as a significant variable in the

enforcement of the law, the officers can easily slide to child abuse on one hand and the vulnerable sector such as the elderly. On the other hand, it is recommended that care and understanding should be accorded to the offender. Warning should be given to protect human rights but repeat offenders must be punished (PNP10).

### *The Philippine Health System*

The COVID-19 crisis exposes the challenging situation of the health system of the country. It uncovers not only the lack of funds and preparation for health emergencies but opened up opportunities to assess the Philippine Health Insurance Corporation (PhilHealth) relative to its coverage and hospitalization packages (HW1).

The inability of the State (similar to almost all states in the world) to contain the virus created a deep sense of insecurities making people hesitant to go to hospitals and clinics for their check-up (HW2) some delay their treatments and needed surgical procedures (HW4, HW8). These people felt that their immune systems were compromised and that they fear that get the virus and infect their families (HW2, HW4, HW5, HW6).

Even medical doctors were limited by the threats of the virus. They adopted a new work arrangement like the “on call” and “work from home” format, however, this set-up hinders proper patient communication and consultation (HW2). More so, many people do not have access to tele-medicine (HW8).

Moreover, the COVID-19 pandemic revealed the country’s insufficiency in testing and treatment capabilities at the onset of the pandemic (HW9).

Aside from the fear of the patients and the absence of some medical practitioners, there is also a significant problem in space for the treatment of patients during the pandemic. This absence of space results to patients not having proper consultation (HW5) and treatment. Many hospitals in the country do not have the capacity to segregate COVID-19 patients to non-COVID-19 patients (HW8). Since the COVID-19 virus is highly contagious the limited spaces are hospitals led to the shortage of bed capacity in emergency services and intensive care units (HW8).

The loss of income of many patients (HW6) is also a major concern for patients who are further oppressed by the increased cost of treatment because of PPEs (HW4) and expensive swab tests (HW8).

It is therefore recommended that the health care system should be given priority (HW4, HW5, HW7). Investment in the health sector must be made (HW9). The health workers should be given substantial preparation and training on pandemic (HW4, HW9) scenarios. There should be a contingency plan built for epidemic/pandemic and all its associated effects (HW9). Funds should also be allotted (HW6). And the social media platform must be regulated during a crisis to strengthen risk/crisis communication (HW9).

Finally, although both the Philippine National Police and the health workers who participated in this research manifested the need to balance individual rights and the protection of collective interests even during a pandemic (PNP1, PNP2, PNP5,

PNP6, PNP7, PNP8, PNP9, PNP10, HW2); the legislative actions crafted by the two cities failed to mention specific provisions related to the preservation of human rights during this extraordinary health emergency.

## **Analysis and Findings**

The immediate response of the State to counter the perils of COVID-19 emphasized on the State's ability to control and regulate by mobilizing the military and the police to pursue the societal objective. Within the context of the Siracusa Principles, the efforts initiated by the national government using content analysis is very well within the international standards adopted by the UN Human Rights Committee.

The first Siracusa Principle is to make sure that the response of the government is carried out in accordance with the law. The enactment of the "Bayanihan Law" provides the legal framework for the government's response. The New Law in its declaration of policy explicitly manifested its eight (8) objectives (to mitigate if not contain the transmission of COVID-19; to immediately mobilize assistance in the provision of basic necessities to families and individuals affected by the imposition of Community Quarantine, especially indigents and their families; to undertake measures that will prevent the over burdening of the health care system; to immediately and amply provide healthcare, including medical tests and treatments, to COVID-19 patients, persons under investigation (PUIs), or persons under monitoring (PUMs); to undertake a program for recovery and rehabilitation, including a social amelioration program and provision of safety nets to all affected sectors; to ensure that there is sufficient, adequate, and readily available funding to undertake the foregoing; partner with the private sector and other stakeholders to deliver these measures and programs quickly and efficiently; to promote and protect the collective interests of all Filipinos in these challenging times).

These intentions sufficiently respond to the second Siracusa Principle that the government's response must be directed toward a legitimate objective of general interest.

The "Bayanihan Law" although it was crafted during an extraordinary situation, went through the commonly accepted parliamentary procedures that is necessary in a democratic society to achieve the objective. Thus, the third Siracusa Principle is fulfilled.

The fourth principle proposes that the response to the pandemic must be the least intrusive and restrictive available to reach the objective. This however is a delicate balance between the basic rights of the citizens and the restrictions demanded by bans, lockdowns, and quarantines. Undoubtedly, the response of the Philippine government encountered major setbacks since there is a clear disassociation between the intention of the law and the intervention strategies. The COVID-19 pandemic as a health emergency must be confronted from a life-giving perspective rather than from a death-giving institution like the police and the military.

Rebecca Hilsenrath, the Chief Executive of the Equality and Human Rights Commission observes that there are some human rights implications due to the COVID-19 restrictions. She mentions that we are walking a tightrope. We need to find the balance between saving lives from coronavirus and allowing people the hard-won freedoms that are the framework for those lives - such as a right to a private and family life, to freedom of assembly, and to an education. This must go hand in hand with an economic recovery that provides everyone with an adequate standard of living...as more restrictions are considered, we're calling on the government to make sure that protections are proportionate, measured, and rooted in science and the law. Any changes that restrict our rights must be flexible, with review and end points, and remain open to challenge. If we want to protect public health and save lives, then changes need to complement or enhance our human rights, not treat them as optional.

The fifth principle urges the agencies tasked by the government that the enforcement of the law should be neither arbitrary nor discriminatory. The protection of the citizens from discriminatory and autocratic behavior of the people in power is very well in place in the omnibus guidelines on the implementation of community quarantine in the country.

Lastly, the measures forwarded by the State must be subject to review. This is explicitly mentioned in the Bayanihan Law demanding from the president a weekly report to the joint congressional oversight committee.

However, although the Law is sufficient in form and substance, the way it is implemented in the ground, is a different story. The research reveals that the policies enacted by the national government were not based on a universal masterplan on how to defeat the COVID-19 virus. As a result, local government units (QC and Manila) were forced to plan and fund their own relief, health and sanitation, and containment programs.

In the absence of correct information about the crisis, various forms of transgressions by the citizens were identified in the cities studied. The civilian population failed to follow the minimum health standards (proper wearing of face mask and face shield, social distancing, curfew, and unauthorized social gathering).

Uniformed and deputized personnel in their impatient desire to control the crisis failed to extend care and understanding to the health protocol violators.

Consequently, the policy intervention centered on castigatory approach dominated the life-giving intention of the Law thereby creating a huge gap in the preservation of public-health and the well-being of autonomous individuals.

The societal community (law) and the political systems (polity) as two independent but closely related institutions failed to create an ecosystem where the citizens can satisfactorily adapt through labor, production, and resource allocation. Furthermore, once the political system relied completely on laws to regulate and control the citizens, fiduciary institutions such as the family, school, church etc. were marginalized. Norms and values embodied by the information from the related to the containment of the pandemic were not internalized since institutions were disjointed.

The central government appeared to have created a system that abandoned the possibility of social systems to operate compatibly with other systems. As a result, the efforts of the national government through its Bayanihan Laws failed to mobilize integration responses from its citizens to pursue societal objectives. The single mindedness of the State's intervention strategy failed to coordinate various components of the society making it almost impossible to achieve the intended net balance.

## **Conclusion**

This research concludes that the human rights issues encountered during the quarantine period were primarily the result of the lack of proper data to educate both the grassroots as well as the public administrators on the complexities of the crisis. In addition, the over-functioning of the police and the military led to the reckless abandonment of other institutions, thus conflicts with the other parts of the system.

The innovations made to adapt to the new normal related to the wearing of protective equipment and other health protocols were infested by contradictory statements making it difficult for the citizens to form new habits that enhance one's capacity to survive the pandemic. As such, the orientation of the enforcers should lean more towards corrective measures rather than punitive since it is evident that everybody was shocked by the sudden disruptions in the normal order of the cosmos.

Finally, the absence of any legislative action related to human rights in both cities, reveal the nagging gap between legislation and human rights protection. This research concludes that maintenance of an effective human rights framework can be more strategic if there is a stronger bond between the Commission of Human Rights and the Local Government Units.

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