

Mandates of the Special Rapporteur on freedom of religion or belief; the Special Rapporteur on the rights to freedom of peaceful assembly and of association; the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health; and the Special Rapporteur on minority issues

REFERENCE:
AL LKA 8/2020

21 January 2021

Excellency,

We have the honour to address you in our capacities as Special Rapporteur on freedom of religion or belief; Special Rapporteur on the rights to freedom of peaceful assembly and of association; Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health; and Special Rapporteur on minority issues, pursuant to Human Rights Council resolutions 40/10, 41/12, 42/16 and 43/8.

In this connection, we would like to bring to the attention of your Excellency's Government information we have received concerning **the cremation of dead bodies belonging to Muslim and other religious minorities during the COVID-19 pandemic**.

We wish to recall that the standard guidance on the autopsy practice and the disposal of COVID-19 related dead bodies provided in a circular by the Ministry of Health was a subject of a previous communication (AL LKA 2/2020) sent on 8 April 2020 to your Excellency's Government. We regret that we have not received a response to the communication to date.

According to the information received:

As of 29 December 2020, 195 COVID-19 related deaths have been reported in Sri Lanka with about half of the reported deaths belonging to Muslim minorities. All the dead bodies of confirmed or suspected of COVID-19 were cremated. These cremations have been carried out according to the fourth amendment of the Provisional Clinical Practice Guidelines on COVID-19 suspected and confirmed patients that provides "*a body related to death either confirmed or suspected of COVID-19 should be cremated within 24 hours (preferably within 12 hours)*". The decision of mandating cremation for confirmed or suspected COVID-19 victims came following alleged expert medical advice. Chief Epidemiologist also claimed that burials could contaminate ground drinking water.

Since the spread of the pandemic, Muslim minorities in Sri Lanka have reportedly been stigmatized for spreading COVID-19 to the extent that in April 2020, a consultant forensic pathologist attached to the Ministry of Health who was dealing with the management of dead bodies openly said that the Government "has nothing against Muslims but they have a small fear about whether the virus can be used for unauthorised activities. Maybe an unwanted person could get access to a body and it could be used as a biological weapon".

Fathima Rinoza, a 44-year-old woman, was admitted to the Colombo National Hospital on 2 May 2020 to receive treatment for pneumonia and was placed in an Intensive Care Unit after she was affected by breathing difficulty. On 5 May 2020, she was allegedly transferred to the Infectious Diseases Hospital (I.D.H) without the knowledge of her family because the medical staff suspected that she had contracted COVID-19. Ms. Rinoza passed away that day and her body was cremated immediately. When her family was informed of her decease by a phone call, the doctor in-charge could not specify the precise cause of the death and indicated that it was suspected to be COVID-19 related and that as a result her death certificate recorded the cause of death as “Covid-19 pneumonia”. In addition, her husband and family members were transported to a quarantine centre in Batticaloa after a squad of military and police personnel cordoned off their place, took medical samples from the entire family and sterilized the residence. Ms. Rinoza’s husband could not see her body before she was cremated.

On 6 May 2020, Ms. Rinoza’s adult son was informed by phone by the I.D.H. Hospital that the deceased was not infected with COVID-19. Thereafter, her husband and family were brought back from Batticaloa quarantine centre. Ms. Rinoza’s family learnt that such misdiagnosis was quite probably as a result of erroneous reports and such errors had been reported in a few other cases as well. Her death was taken off the COVID-19 casualty list.

On 6 May 2020, **Mohamed Rafayideen**, a 64-year-old man, who was affected by some drug-dependence related illness and breathing difficulties passed away. His family was preparing to bury his body when the police allegedly ordered that the body be transferred to Colombo National Hospital. There it was cremated after a Polymerase Chain Reaction (PCR) in spite of the fact that a test was inconclusive and the exact cause of death could not be confirmed. His name was removed from the COVID-19 casualty list without explanation. The family filed a fundamental rights petition (SCFR 151/20) in relation to the cremation of his body on 2 June 2020.

On 23 October 2020, **Muhammed Rafeek**, a 70-year-old man, was admitted to the Colombo National Hospital for blood infection treatment that he had regularly received in the past. As his health condition deteriorated, he was transferred to the Intensive Care Unit where he subsequently died. His body was allegedly kept in the morgue with other bodies without any special precaution. On 26 October 2020, the medical authorities asserted that his PCR test was positive and cremated his body. His death was registered as a “sudden COVID-19 death”.

A 19 year-old young man in Colombo, **Mohamed Minhaj**, who was bedridden from birth due to a mental condition and had been under constant care by his family, died at home on 27 October 2020. His regular doctor examined his body and cleared all documents that morning for burial but when the deceased’s brother went to the police to get a clearance to take his body to the burial ground, the police went to their house and insisted that the body be taken to Colombo National Hospital for a PCR test. The result was allegedly positive, and his body was cremated. It was recorded as one of the

“sudden COVID-19 death” by local health authorities. As a consequence, his family members were also obliged to undergo a compulsory quarantine in a military-run facility.

On 28 October 2020, **Ummul Munazir**, a 54-year-old woman, was admitted to Colombo National Hospital due to low blood pressure. After spending two days in a regular care unit, she passed away. A PCR test was performed on her body and she was cremated since the hospital authorities asserted that the test result was positive of COVID-19.

On 2 November 2020, **Ahamed Jamaldeen Abdul Razeek**, a 78-year-old man, fell and severely injured his head. A nearby private hospital refused to admit him and he was taken to the Colombo National Hospital at the point when he was already vomiting blood. Since he came from an area which was under lockdown, the hospital authorities instructed that he be admitted to the isolation ward where he died the following day. A PCR test was ordered which was allegedly positive. The body was cremated, and added to the official list of deaths under COVID-19 casualties. However, a few hours after his cremation, his family learned that his death had been removed from the COVID-19 casualty list as the Director-General of Health Services announced that his cause of death was not related to COVID-19 infection.

On 4 November 2020, it was reported that an appointed Expert Committee was going to meet to review if a burial option could be permitted for Muslims. On 10 November 2020, it was further reported that the President of the Republic discussed the burial option with several Ministers and instructed health authorities to search for dry land to allow burial for Muslims. However, this was reportedly denied by the Health authorities. On 22 November 2020, without giving any reason, the Expert Committee reaffirmed the earlier decision that cremation is the only option permissible in Sri Lanka.

On 1 December 2020, the Supreme Court also dismissed all twelve Fundamental Rights petitions filed by persons belonging to the Muslim, Christian and Catholic religious minorities that challenged the Government’s policy of cremating the bodies of those who died or suspected to have died from COVID-19. The petitions invoked their right to freedom of religion or belief and the lack of scientific evidence that burial could lead to the spread of the virus.

Since the beginning of December 2020, it was reported that at least 19 bodies had been left unclaimed in the Colombo morgue as Muslim families refused to collect the bodies of their relatives who died of COVID-19 in protest against the enforced cremations and demanded the right to bury them as per Islamic rites. The Prime Minister on 8 December 2020 called upon the Expert Committee to expedite its investigations and hand over a report about burial options.

On 9 December 2020, the incineration of a 20-day-old Muslim baby without its parents’ consent sparked a nationwide protest. The baby and its parents were subjected to antigen test upon arrival at the hospital on 7 December, while the baby’s test result was positive, the test results of both parents were

negative. Both parents were rather puzzled by the test results and requested the doctor to run a PCR test on the baby to confirm the antigen test, which is known to often result in false positives. However, the doctor reportedly refused and told the baby's parents to do so privately even though they could not afford it. When the baby eventually passed away, the official at the hospital refused to release the baby's body for burial and demanded the grieving father to sign the documents for cremation. When the father refused to sign the paper, he had to leave the body of the baby at the hospital and then, he was informed that the cremation was going to take place at Borella Crematorium, and that he could attend.

On the following days, Muslims in Colombo protested and mourned for the baby by tying a piece of white cloth or white nappy at the crematorium premises. The protest was supported by large sections of the public, including Sinhala and Tamil activists and politicians. However, the police allegedly removed the white cloths or nappies from the gates and fence surrounding the Borella Crematorium. Furthermore, military, intelligence personnel and police allegedly questioned and took photographs of those who visited the site.

On 14 December 2020, it was reported that the President requested the Maldivian authorities to assist Sri Lanka in facilitating Islamic funeral rites in the Maldives. The Maldivian Government had allegedly offered to bury the dead bodies of Sri Lankan Muslim communities in one of their islands. The Sri Lankan Ministry of Health was exploring the feasibility and practicality of such an option.

Following this announcement, more demonstrations were organized by the Muslim minorities from Mannar to Mullaitivu in the North; and Batticaloa, Trincomalee and Amparai in the East with the support of people from all walks of life, including Hindu priests and Christian clergy – all demanding the respect of the right to freedom of religion or belief of the religious minorities on the island.

On 21 December 2020, as a temporary solution, the Health Services Director General suggested that the judicial medical divisions of Kandy, Colombo, Kalutara, Negombo and Kalmunai keep the remains of Muslim COVID-19 victims in freezer containers until a decision is made on the burial issue. The proposal came after the Public Health Inspectors announced on 14 December 2020 that the Colombo Municipal Council was instructed to temporarily suspend the cremation of unclaimed bodies of COVID-19 victims. Apparently, ashes of cremated Muslim COVID-19 victims and the remains have piled up in the mortuaries as family members of the deceased refused to accept enforced cremation or the urns that contained ashes of cremated bodies.

On 24 December 2020, the Health authorities cremated the dead body of an 84 year-old Muslim man despite an order by Galle Magistrate Court to keep the body until the Government decided on the compulsory cremation of all COVID-19 victims. This drove Muslim communities into deeper anxiety while stirring more fear, anger and distrust among them.

Since the imposition of compulsory cremation of COVID-19 bodies, Muslim minorities are distressed by having no other option but to cremate their loved ones, which is seen as a sinful act according to their religion. Consequently, many poor Muslims who are seriously ill have refrained from seeking medical treatment out of fear of being cremated after their death. Many family members of the deceased have been unwilling to sign the consent form for cremation. Those who did, only did so out of fear and pressure.

Moreover, the compulsory cremation is a huge financial burden for many of the poor Muslim families, in particular daily wagers, who cannot afford a coffin that costs from 10,000 to 30,000 Sri Lankan Rupees (about 54 to 161 USD), and the cremation fee that costs another 5,000 to 6,000 Sri Lankan Rupees (about 27 to 32 USD). In comparison to their usual funeral rites, Muslim minorities are used to conduct their funeral with minimal cost, without having to pay for a coffin or cremation fee; the mosques would also offer to perform free burial for the poor. Furthermore, under the conditions of pandemic lockdown, many of these families are unable to get their religious leaders or community members to help with the funeral rites such as prayers.

In addition, as illustrated in the cases described above, cremation usually takes place immediately upon the notification of the test results without providing family members reasonable time or the opportunity to cross check or get the final test results. In a few instances, the cremations had already taken place when family members were eventually informed of the negative test results. There has been no remedy or accountability for any cremation carried out based on an erroneous information about a test result. Furthermore, the test samples are allegedly not indexed by number, hence leaving the possibility for test results to be mishandled either by negligence or by discrimination based on ethnicity and religion.

It has also been reported that the authorities have discriminated against the Muslim minorities with regard to their access to the dead during cremation. In most cases, only one person is allowed to pray before the body is taken for cremation. Sometimes, no one is allowed to see the face of the deceased before cremation. Hence, many families allegedly cannot bid proper farewell to their loved ones or perform a minimal religious rite or prayer. However, others have witnessed that members of other religious communities have been allowed more than one person to see the body and conduct prayers.

On 28 December 2020, police in Ampara allegedly obtained a court order to stop a march led by a father and his son demanding for burial option. The police also removed all the posters of the protests in Ampara. On the same day, a group of monks in Colombo was permitted to march and protest against the “burial option”. They demanded a “cremation only” option and handed in their letter of appeal to the Ministry of Health.

On 31 December 2020, the College of Community Physicians of Sri Lanka (CCPSL) issued a statement explaining that out of the 85,000 published scientific papers on COVID-19, not a single case of the virus spreading through a dead body has been recorded. CCPSL also refuted the concerns of the spread of the virus through ground water. On 1 January 2021, the Sri Lanka Medical Association (SLMA) issued a similar statement asserting that

COVID-19 dead could be buried as “the virus is unlikely to remain infectious within a dead body” and adding that no scientific evidence exists from any part of the world that presented burial of COVID-19 dead as a public health hazard.

While cognizant of the serious public health challenges posed by the COVID-19 pandemic, and the necessity of implementing exceptional measures to contain the spread of the virus, we remain concerned about the mandatory cremation of bodies confirmed or suspected of COVID-19, without scientific justifications, against the expressed wishes of the next of kin, based on their religion or belief. We are concerned about the discriminatory policy of the Government and the lack of sensitivity towards the deep-rooted religious and cultural practices of Muslims and other religious minorities. Such lack of consideration for the dignity of the dead may provoke unnecessary tensions, at a time when Sri Lanka should double its peace and reconciliation efforts. Most importantly, there has been no established medical or scientific evidence in Sri Lanka or in other countries that burial of dead bodies could lead to increased risk of spreading COVID-19.

In fact, as new evidence becomes available, the World Health Organization (WHO) has updated its interim guidance for “Infection Prevention and Control for the safe management of a dead body in the context of COVID-19”¹ on 4 September 2020, where it includes additional advice for burial or cremation in the community. One of the key considerations is that **there is a lack of evidence to support the common assumption that people who died of a communicable disease should be cremated to prevent the spread of that disease.** It also stresses that **cremation is a matter of cultural choice and available resources and that the dignity of the dead, their cultural and religious traditions, and their families should be respected and protected throughout.** Furthermore, it emphasizes that all measures should respect the dignity of the dead including avoiding hasty disposal of the body of a person who has died of COVID-19. In addition, authorities should manage each dead body on a case by-case basis, balancing the rights of the family, the need to investigate the cause of death, and the risks of exposure to infection.

In this regard, several courts in other countries have referred to WHO interim guidance in deciding whether burial can be permitted in the case of COVID-19 death. These judicial rulings also affirm that there is no scientific proof to affirm that the COVID-19 spreads through cadavers and highlight the need to put human dignity for the deceased and the family members at the centre of body disposal decisions.

We again respectfully reiterate the importance, in the current context, to counter disinformation and public ignorance as well as to combat expressions of hate speech that tend to stigmatise specific religious or minority communities. Based on its domestic and international human rights commitments, the Government should promote the right of freedom of religion or belief and the right of the minorities especially during this challenging time in order to prevent religious intolerance; and intercommunal conflicts or tensions. We are concerned that the current measures taken by the authorities do not accommodate sufficiently specific religious, cultural or traditional rites of different communities in Sri Lanka. Moreover, any limitations to the right to freedom of religion or belief must be prescribed by law and be necessary to protect public safety, order, health, or morals or the fundamental rights and

¹ See <https://www.who.int/publications/i/item/infection-prevention-and-control-for-the-safe-management-of-a-dead-body-in-the-context-of-covid-19-interim-guidance>

freedoms of others. In addition, any policies and measures adopted by the authorities must not be discriminatory based on religion or ethnicity. We are concerned that the lack of a prompt and viable solution may lead to further religious intolerance and tension among different communities.

We are also particularly concerned that the privacy and identity of the patients or deceased are not sufficiently protected, hence leaving possibility for their ethnicity or religious background to be identified in laboratory tests and in public that could lead to some forms of discrimination or stigmatisation of a specific religious or minority community.

Furthermore, we are concerned about the costs incurred by cremation and the financial burden imposed on the poor families of the deceased, especially during the challenging time of the pandemic. We are moreover concerned at the chilling effect that mandatory cremation is having on the right to health of the concerned religious minorities or communities who are deterred from approaching health care services for fear of being judged, stigmatized and finally cremated, impacting on the public health strategy to contain the pandemic.

We welcome the initiative taken by your Excellency's Government concerning the appointment of an Expert Committee to review burial for COVID-19-related dead bodies from Muslim communities. We also welcome the President's and Prime Minister's instruction to the public health authorities and the Expert Committee to explore viable options for burials. We encourage your Excellency's Government to revise the current *Provisional Clinical Practice Guidelines on COVID-19 suspected and confirmed patients* and have a decision soon about the possibility of burial for communities who would like to respect their religious and traditional rites. We also encourage your Excellency's Government to strengthen holding dialogue with the different religious communities, and to pay particular attention to cultural and religious sensitivity as well as the principle of non-discrimination.

In connection with the above alleged facts and concerns, please refer to the **Annex on Reference to international human rights law** attached to this letter which cites international human rights instruments and standards relevant to these allegations.

As it is our responsibility, under the mandates provided to us by the Human Rights Council, to seek to clarify all cases brought to our attention, we would be grateful for your observations on the following matters:

1. Please provide any additional information and any comment you may have on the above-mentioned allegations and concerns.
2. Please provide information explaining the removal of Mr. **Mohamed Rafayideen** and Mr. **Ahamed Jamaldeen Abdul Razeek** from the COVID-19 casualty list.
3. Please provide the reasoning or the justifications of the Supreme Court to dismiss all the Fundamental Rights petitions.
4. Please provide the scientific medical evidence on which the Government is basing its policy to mandatorily cremate COVID-19

related bodies as a means to prevent the spread of virus and how this evidence is compatible with WHO updated relevant guidance and the statements by the College of Community Physicians of Sri Lanka and the Sri Lanka Medical Association. Has the Sri Lanka Medical Association Inter Collegiate Committee presented any scientific basis to insist on cremation of COVID-19 related death?

5. Is there any consideration by your Excellency's Government to provide financial support to the poor families who may not be able to afford to cost of cremation and the coffins?
6. Please provide information about the composition and the electing process of the Expert Committee created to review burial for COVID-19-related dead bodies. We would also appreciate receiving information about their attributions, legal status and responsibilities, their current work, the consultation or dialogues that they have had with concerned communities and the results they have attained so far.
7. Please provide information about actions taken following the President's instruction to search for dry land to allow for burial. Have the Health authorities managed to explore such option of making burial a viable option for religious communities who would like to organise funeral according to their religious rites and cultural practices.
8. Please explain the reason(s) to which the Government has sought for the assistance of the Maldivian authorities to facilitate the burial of the Sri Lankan Muslims in the Maldives. Has the feasibility and practicality study of such option been completed and what are the conclusions of this study? Was this option sought with the consent or in consultation with the Sri Lankan Muslim minorities?
9. Please explain the reason(s) for the Health authorities to reverse the temporary solution proposed by the Health Services Director General freezer containers until a decision is made on the burial issue. Why did the Health authorities find it necessary to go ahead with the cremation of a 84 year-old Muslim man and disregard the order by the Galle Magistrate Court to keep the body of the until the Government had a decision on the burial matter?
10. Please indicate the measures undertaken to ensure that ethnic and religious minorities are not discriminated against in the implementation of the ***Provisional Clinical Practice Guidelines on COVID-19 suspected and confirmed patients*** and that their right to freedom of religion or belief with regard to burial rites and practices is upheld and respected.
11. Please provide information on how your Government is combating hate speech and stigmatization of the minority communities, such as the Muslims, in Sri Lanka.
12. Please indicate the steps taken by the Government to reassure the right to health of every person in Sri Lanka, regardless of ethnicity and

religion, is protected and respected. What measures have you taken to remove the obstacles imposed by the fear of being judged, stigmatized and finally cremated in the access to public healthcare by the groups in most vulnerable situations?

13. Please indicate the timeframe for a decision to be taken by the Government on the burial option for the religious communities in Sri Lanka.

We would appreciate receiving a response within 60 days. Passed this delay, this communication and any response received from your Excellency's Government will be made public via the communications reporting [website](#). They will also subsequently be made available in the usual report to be presented to the Human Rights Council.

While awaiting a reply, we urge that all necessary interim measures be taken to halt the alleged violations and prevent their re-occurrence and in the event that the investigations support or suggest the allegations to be correct, to ensure the accountability of any person(s) responsible for the alleged violations.

We may publicly express our concerns in the near future in this regard as, in our view, this matter requires urgent attention, as it may lead to further conflict and violence. We also believe that this matter should be the subject of a public debate, under the auspices of the public health authorities, aiming to provide the public with reliable and accurate information while promoting respect for the religious and cultural diversity in Sri Lanka. Each community must be free to choose the best way to treat and honor its dead according to their religious and traditional rites. The respect due to the dead and the funeral ceremonies are among the oldest signs of civilization recorded in history. Any public expression of concern on our part will indicate that we have been in contact with your Excellency's Government's to clarify the issue/s in question.

Please accept, Excellency, the assurances of our highest consideration.

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Clement Nyaletsossi Voule
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Annex

Reference to international human rights law

In connection with the above alleged facts and concerns, we would like to draw the attention of your Excellency's Government to the relevant international norms and standards that are applicable to the issues brought forth by the situation described above. In particular we would like to refer to the international standards relating to the freedoms of thought, conscience and religion or belief, the rights of persons belonging to minorities and the principle to non-discrimination.

The International Covenant on Civil and Political Rights (ICCPR), ratified by Sri Lanka on 11 June 1980, protects everyone's right to freedom of thought, conscience and religion on its Article 18. The Human Rights Committee in its General Comment 22 paragraph 4 elaborates that the freedom to manifest religion or belief in worship, observance, practice and teaching encompasses a broad range of acts and the concept of worship extends to ritual and ceremonial acts giving direct expression to belief, as well as various practices integral to such acts, including ritual formulae or ceremonial acts.

While the manifestation of religion or belief may be restricted as per Article 18(3) of the ICCPR, to protect public safety, order, health, morals and the fundamental rights and freedoms of others any such limitation must fulfil a number of obligatory criteria including being non-discriminatory in intent or effect and constituting the least restrictive measure. Even in the face of overwhelming public necessity that falls on one or more of the five grounds for permissible limitations noted in Article 18(3), if there is a less restrictive measure, a greater interference with the right to manifest one's beliefs will not be permissible.

In the same line, Article 27 of ICCPR provides that "In those States in which ethnic, religious or linguistic minorities exist, persons belonging to such minorities shall not be denied the right, in community with the other members of their group, to enjoy their own culture, to profess and practise their own religion, or to use their own language." The 1992 Declaration on the Rights of Persons Belonging to National or Ethnic, Religious and Linguistic Minorities also emphasised that persons belonging to minorities have the right to enjoy their own culture, to profess and practice their own religion, and to use their own language, in private and in public, freely, without any interference or any form of discrimination (article 2.1), and persons belonging to minorities have the right to participate effectively in cultural, religious, social, economic and public life (article 2.2). Moreover, States are required to ensure that persons belonging to minorities may exercise their human rights without discrimination and in full equality before the law (article 4.1) and create favourable conditions to enable persons belonging to minorities to express their characteristics and to develop their culture, language, religion, traditions and customs (article 4.2).

We would like to respectfully remind your Government of the 1981 United Nations Declaration on the Elimination of All Forms of Intolerance and of Discrimination Based on Religion or Belief (A/RES/36/55), which in its Article 2 (1): "[n]o one shall be subject to discrimination by any State, institution, group of persons, or person on grounds of religion or other belief." In Article 4 (1), the General Assembly further states that: "All States shall take effective measures to prevent and eliminate discrimination on the grounds of religion or belief in the recognition, exercise and enjoyment of human rights and fundamental freedoms [...]" Furthermore,

we would like to refer your Government to Article 4(2) according to which: "All States shall make all efforts to enact or rescind legislation where necessary to prohibit any such discrimination, and to take all appropriate measures to combat intolerance on the grounds of religion or other beliefs in this matter. According articles 6 (d) and (e), the right to freedom of thought, conscience, religion or belief includes also the freedom "to write, issue and disseminate relevant publications in these areas", and the freedom "to teach a religion or belief in places suitable for these purposes".

We would also like to recall that the General Assembly, in its resolution 63/181 paragraph 9 (j) urges States "To ensure that all public officials and civil servants, including members of law enforcement bodies, the military and educators, in the course of fulfilling their official duties, respect all religions or beliefs and do not discriminate for reasons based on religion or belief, and that all necessary and appropriate education or training is provided."

Furthermore, we wish to refer to the 1992 United Nations Declaration on the Rights of Persons Belonging to National or Ethnic, Religious and Linguistic Minorities, adopted in General Assembly resolution 47/135, which refers to the obligation of States to protect the existence and the identity of minorities within their territories and to adopt measures to that end (article 1) as well as to adopt the required measures to ensure that persons belonging to minorities can exercise their human rights without discrimination (article 4). Article 2 further establishes that persons belonging to minorities have the right to enjoy their own culture, to profess and practice their own religion, and to use their own language, in private and in public, freely, without any interference or any form of discrimination and provides for the effective participation of minorities in cultural, religious, social, economic and public life, as well as in decision-making processes on matters affecting them.

We also would like to draw your Excellency's Government attention to the recommendations of the sixth session of the Forum on Minority Issues on "Guaranteeing the rights of religious minorities" (A/HRC/25/66) and in particular Recommendation 17, which calls on States to ensure that "there is no discriminatory treatment in regard to the legal and administrative recognition of all religious and belief groups. Any registration and administrative procedures, including those relating to the property and the functioning of places of worship and other religious-based institutions, should be conducted according to non-discrimination standards. International standards do not allow non-recognition of religious or belief groups to result in denial of their rights. Such standards require an inclusive approach to be taken".

We also recall that according to Article 21 of the ICCPR, "The right of peaceful assembly shall be recognized. No restrictions may be placed on the exercise of this right other than those imposed in conformity with the law and which are necessary in a democratic society in the interests of national security or public safety, public order (*ordre public*), the protection of public health or morals or the protection of the rights and freedoms of others." The 'provided by law' requirement means that any restriction 'must be made accessible to the public' and 'formulated with sufficient precision to enable an individual to regulate his or her conduct accordingly' (CCPR/C/GC/34). Moreover, it 'must not confer unfettered discretion for the restriction of freedom of expression on those charged with its execution'. The requirement of necessity implies an assessment of the proportionality of restrictions, with the aim of ensuring that restrictions 'target a specific objective and do not unduly

intrude upon the rights of targeted persons.

Finally, we would like to refer to article 12 of the International Covenant on Economic, Social and Cultural Rights, acceded to by Sri Lanka on 11 June 1980, which protects the right to health and establish States' obligations in this respect. The Committee on Economic, Social and Cultural Rights has established, in its General Comment 14, that States are required to ensure acceptability of health care, therefore, all health facilities, goods and services must be respectful of medical ethics and culturally appropriate, respectful of the culture of individuals, minorities, and be designed to respect confidentiality and improve the health status of those concerned (para. 12(c)). Under the right to health States further have the obligation to base their national public health actions on epidemiological evidence, to review them periodically on the basis of a participatory and transparent process, to include right to health indicators and benchmarks that can be closely monitored and to give particular attention to all groups in vulnerable or marginalized situations, including minorities (para. 43).