CATHERINE: Good morning, everybody

or good afternoon. Sorry.

Before the meeting is opened

by the presidents of the Intergroup,

I wanted to give

practical information to start.

My name is Catherine Naughton

and I work for the EDF.

EDF is the secretariat

for the Intergroup

so we helped to setup this meeting

we're having today.

You'll be able to find

captioning in the chat box.

So if you have a look at your panel,

for Gotowebinar,

you should be able to find

the captioning link.

If you have any trouble at all

with technical issues,

Please, contact Raquel via the chat box

and she'll help you.

You should be able to see

sign language interpretation.

We have two interpreters working

with us today, Gerdinand and Lissa.

Our captioning is provided by Wim.

As you know from the registration,

the meeting is recorded.

We'll make it available on the website

of the Disability Intergroup.

It may be that not all your questions

can be answered by the MEPs,

but all of the questions

you register in the question box,

we'll take note of

and in the final report of the meeting

which we'll publish, we'll include

your questions and answers.

This is just to tell you in case

we don't get everything completed.

On Twitter, you can talk

about this meeting using the hashtag

of the Disability Intergroup

which is: #epdisability

or #covid19disability which is used

by the global disability movement.

With those practical notes, I'm going

to pass the floor to MEP Adam Kosa

for the opening statement.

I give you the floor, Adam.

MEP Kosa: Alright. Hello everyone.

Dear members of the bureau,

dear colleagues.

First I'd like to thank you

for all colleagues in EDF involved

in organizing this first online meeting

of the Disability Intergroup.

Also Commissioner Dalli, welcome.

Special thanks for creating

an accessible meeting

with sign language interpretation

and live captioning.

Our aim is to improve the functioning

of the Intergroup

also in this unprecedented time.

And thank you for removing

some access barriers.

I have 5 points I would like

to share with you.

First of all, I'd like to call myself

a man of hope.

I believe every challenge

creates an opportunity.

It seems this coronavirus epidemic

creates a whole new situation for all.

A huge challenge.

But also an excellent opportunity

to make spectacular progress

in protecting the interest

of people with disabilities.

An excellent opportunity also

to make progress on certain issues.

I call you to identify

the problems together now

and to give our power and energy

and devote them to solutions.

Secondly, recently I've become aware

that society's sensibility increases

during time of restraint.

We're paying attention now

to each other during this period.

It's hard to grow in a society

in which

one's important problems

are treated as non-existent.

Therefore, we must take advantage

of the current opportunities,

going further together and not alone.

Thirdly, technological developments

are being more valued now.

Communication, work and other areas

of life have been shifted to the Internet.

Digital accessibility has become even

more important during this period

due to the growth of the information

and interactive services as well

which are provided on the internet

and through mobile devices.

Online banking, shopping,

using public services

those services should be accessible

for all people.

Making websites and apps

more accessible results in an overall

better user experience for everyone,

not only for users with disabilities.

Fourthly, it's our responsibility

as politicians

not to leave these issues unused

and to transpose them

into legislation in the future.

I strongly believe that we don't grow

when things are easy.

We grow when we're

facing challenges.

Fifthly, and finally, thinking now

of the deaf people,

let me give one concrete example:

sign language interpretation

in the media on measures related

to the coronavirus epidemic.

Now, it have become commonly used.

How other way could deaf people

understand the precaution measures

without sign language interpretation

or captioning?

Sign language interpretation

or captioning during media publications

it's now available

in every member state.

Moreover, the European Commission

is starting to use it.

In the long run this will increase

the acceptance of sign language.

Based on these facts,

we certainly agree

during this period, the responsibility

of this intergroup is enormous.

That's why this webinar

is very useful.

It's necessary to support the exchange

of ideas and each other's work.

As I already mentioned, give our power

and energy to solutions.

I wish all the best of luck to the EDF

and good work for everyone.

My colleagues in the Intergroup.

All the best to you all.

Thank you for watching.

CATHERINE: Thank you

for those opening remarks.

I'd like to give the floor

to Brando Benifei

another president

of the Disability Intergroup.

Brando, you have the floor.

MEP BENIFEI: Hi. I think now

you can hear me.

First, I want to thank all of you

for being here.

This is the first online meeting

ever, I think,

it's one of the first meetings

of the Disability Intergroup

for the new legislative term

of the European Parliament.

One of the first meetings in general

for this term.

I'm glad to find my friend

and colleague Adam Kosa

and some of you I've already seen them

well and ready to discuss today

and to the activities

in the discussion.

Obviously we'd have preferred

to start our work for this mandate

not in these conditions,

but obviously, I mean,

we're ready to work in this new world

that is being built, in fact,

by also what is happening

in terms of the virus.

Let me express the greatest solidarity

to relatives, friends and victims

that we all know unfortunately

of the pandemic across Europe.

As well as to those in loneliness

and in great difficulties.

I think I can speak in the name

of everyone here

that we're with you, from the deepest

of our hearts.

And these conditions also are related

to people with disabilities

to some extent, paradoxical,

that even today

when the mainstream of population

more than ever can understand

the challenges, the difficulties

that people with disabilities suffer

and it's experiencing some

of the daily fears and concerns

that they experience all the time,

we risk anyway in this context,

we have to be honest, again people

with disabilities are pushed back

of the spectrums of the most key topics

and questions to be dealt with.

The rights of people with disabilities

risk to be put at the end of priorities

But we cannot allow that.

The European Union needs to react

if it wants to continue to exist,

it needs to prove

it's able to really build

an inclusive society.

This is not only about Eurobonds,

recovery plans and economic decisions.

It's, first of all, a matter

of equal rights for everybody.

And I think that we really see now

the risk

and the attacks also to our democracy,

to our way of living,

by a situation where some people

could think

that authoritarian solutions,

one person deciding for everyone,

not a democracy like we experience

also as representatives,

like a member of the EP

I can obviously say,

to be a better solution to have one

deciding for all.

Some authoritarianism.

I don't think it is a good solution.

But to make a good argument

against this way of thinking,

that is entering into the discussion

today,

we need to be effective

in protecting human rights

and basic rights of everyone

and to bring equality for real

into the lives of those experiencing

this very peculiar moment for everyone

but even more for people

with disabilities.

This is the topic also

of the meeting today,

how to guarantee equal rights

for everybody in the current scenario.

We'll listen to EDF members

analysing the situation.

From the ethical considerations

in the process of evaluating

conditions of people sick with COVID

while accessing to healthcare,

to the multiple discriminations

of the most vulnerable people.

Also the suspension of vital services

on people segregated in institutions.

And we'll go on with these topics

that are all important.

We're honoured and glad to have

Commissioner Dalli who will speak

after this first part we also give

the Commission's response.

A speech arrived yesterday,

public commitment

of the high level representatives

of the Commission,

among which Commissioner Dalli,

to work in the issues of funding

and providing protective equipment

to social services.

We were very much welcomed

this support,

and therefore we'll be glad to listen

to more details from Dalli.

It'll be the turn to MEPs to discuss

in-depth more possible actions

from the side of the Parliament,

from the Disability Intergroup members.

We all look forward to start

the discussion

after this first round

of introductory points.

So I'll leave the floor immediately

to the president Vardakastanis

and I'd like to thank EDF

for the precious work for all of us.

It's amazing to see that we're

almost 300 people connected.

It gives a message

that we're ready to fight

for a more equal Europe for everyone.

Thank you very much.

CATHERINE: Thank you so much

to both for your opening words.

We'll hear from Yannis Vardakastanis

now, the EDF president,

for some opening words.

Are you going to put your camera on?

Perfect. Welcome.

YANNIS: Thank you Catherine.

Before I begin my presentation,

on behalf

of the European Disability Movement,

I'd like to express our sorrow

and condolences

to the victims with disabilities

of this COVID-19 pandemic.

But also, the victims of neglect.

And also I'd like to salute

all the colleagues, friends and allies

in the disability movement

and in society,

that have been working tirelessly

to support persons with disabilities.

In the situation we find ourselves in.

Dear members

of the Disability Intergroup.

Dear commissioner for equality,

dear colleagues, dear friends.

I'd like to thank you for participating

in today's online meeting,

and of course I'd like to thank

the Disability Intergroup bureau

for holding this meeting today.

It's absolutely imperative

that we have this discussion.

which is happening during the crisis,

during the sufferings

that our people are experiencing.

The current COVID-19 crisis

has dramatically impacted

on persons with disabilities.

Neglect and exclusion are putting

persons with disabilities

in a great danger, to say the least.

This neglect and exclusion

are recurrent.

Many governments and authorities,

including the EU institutions,

they've forgotten persons

with disabilities

when deciding on emergency measures

and recovery plans.

Very few remembered the 15%

of the population,

those with disabilities and even fewer

they remembered the obligations

their countries are bound to

by the UN convention on the rights

of persons with disabilities.

Article 5 on equality

and non-discrimination.

Article 9 on accessibility.

Article 10 on the right to life.

Article 11 on situations of risks

and humanitarian emergencies.

Article 25 on health.

In all these areas the motto

guiding the UNCRPD

and the European disability movement,

Nothing about us without us,

this motto was neglected.

This has caused deaths, many deaths.

This has caused despair.

This has caused pain

for millions of people.

The overwhelming majority

of adjustments

to respect those commitments came

only

after very strong advocacy work

from the organisations

of persons with disabilities

to their governments, to the media

and to the international organisations.

We witness horrific situations

that make us feel

like second class citizens.

Medical guidelines deprioritising

persons with disabilities.

Denial of medical healthcare

on the grounds of disability.

Institutions that became

hotbeds of infection

and they have been left just alone.

Emergency messages from governments

and authorities

that are completely inaccessible

for persons with disabilities.

And confinement measures

with no flexibility

for those who struggle

most to bear them.

Domestic violence increasing,

especially for women and girls

with disabilities,

more at risk of suffering.

Support services with no protection,

no staff and no funding to carry on.

From the beginning, EDF

and our members have been mobilised

they have been outspoken

to raise all these issues

to the EU institutions,

to the heads of states,

to authorities, to all those

who take decisions

and forget their commitment

and ignore their commitments.

We need the EU to take a strong stand

in protecting persons

with disabilities,

our organisations, services, etc.

We cannot stand anymore

endless political discussions

among countries

within the EU institutions.

We need to understand that the lives

of European citizens are at stake.

The European project itself

is at stake.

That's why today's discussion is

of paramount importance.

We need to arrive, we need to agree

on clear actions, on a clear approach.

The European Commission needs to take

actions and undertake initiatives

towards the other institutions

and of course the governments.

And to use the necessary mechanisms

they have,

the Semester and other mechanisms.

But they need to be fast.

The protection of lives of people

needs fast action.

The Parliament also.

The Council.

We need to work, the Europeans need

the European Union more than ever.

What we knew before the crisis

is over.

What is coming is unknown.

We need to be at the forefront

to protect the rights

of persons with disabilities first

and foremost the right life.

Thank you very much.

CATHERINE: Yannis, thank you

very much.

At this point, we have

a session of inputs

from a number of speakers

coming from across Europe.

Many of them from countries

deeply affected by COVID-19.

They'll speak briefly about

some issues of the disability movement

that we'd like the members

of the EP and the other partners

and the European Commission

to hear about.

The first person is vice-president

of the EDF, Ana Pelaez.

She's coming from Spain.

Would you like to put on your mic?

Or just your camera?

ANA: Hello. Is it okay?

CATHERINE: Yes, we can hear you.

ANA: Thank you very much.

ANA: Distinguished members

of the Disability Intergroup.

Distinguished Commissioner

of Equality.

Dear friends. Dear colleagues

of the disability movement.

It's an honour to be here,

to be part of this important meeting

to talk about the situation of people

with disabilities during the pandemic.

I'd like to talk in this occasion

about the vulnerability,

the violation of human rights

for people with disabilities.

And also especially taking

into consideration

the situation of women

and girls with disabilities.

Violation of human rights which happen

because the governments forgot about us.

About people with disabilities.

We're not part of the answer

that we expect from the government.

That's why we're really

in this situation,

in a situation of risk

for discrimination.

About the treatment, about the access

to the right to health

that was mentioned by our president.

In the first moment, we must say

that the answer

about the accessibility of information

wasn't considered

for many people with disabilities

in the whole Europe.

In the EU, all the countries.

The answer...

The information about the pandemic

wasn't accessible and not inclusive.

And also the people with disabilities

weren't mentioned in this key moment.

We hear every day, a virus

is affecting equally everyone.

But it isn't true.

The answers from the government

aren't equal for everyone.

We're forgotten and we're more at risk

to suffer from the virus and to die.

I'd like to give you some examples.

Information that came to us

just this week.

For example the situation

in Romania.

For people in institutions.

People with disabilities.

I'm talking about an institution

in Saskamika,

where 242 people with disabilities,

living in this institution,

they were infected by the virus.

But the only answer wasn't to take

these people to go to the hospital.

The answer to the situation was

to take the staff to go to hospitals

and to leave the people

with disabilities in the institutions.

Something similar also happened

in another institutions in Romania.

In Kostanam in this occasion,

in this institution infected by COVID.

But the answer was the same.

Take the staff from the institution

to go to the hospital and protect them.

Nothing about the people

in the institution.

But it doesn't just happen

in Romania.

Unfortunately, it happens every day,

in every country in the EU.

I'm going to give you an example.

By the end of March in Italy,

in an institution for people

with intellectual disabilities,

just because they didn't have any PPE

to protect them from the infection.

When we're talking about Spain

in an institution for older people

and without any answers.

We have also some data in relation

with other institutions in Spain,

for example in Granada.

When we're talking about France,

for example,

last Monday, in an article published

by Le Monde,

we can read clearly the answer

about the situation

for example for people

with disabilities in institutions.

Doctors decided not to go

in the institutions.

Because they were afraid

to be infected also by the virus.

And so, even the national services

for emergency in France,

when they receive different calls

from this institution asking

please send to us some ambulance

to go to the hospitals.

Finally the answer was: we cannot

take into consideration this case.

We can offer to you

psychiatric service for the staff

and a unit for a better death

for people.

That was the answer.

For example, when we look

at the legislation,

we can discover also

that there are big mistakes

in relation with article 25.

For example, when we're talking

about the triage.

To give another example

from another country, Germany.

Germany denies to change

their own legislation in triage

because they say that the decision

for triage is just for the doctors.

But the doctor has a stereotype

about the people with disabilities,

or about age and this is why

these people, older people,

people with disabilities,

are really denied

to go to this treatment for emergency.

When we're talking about Belgium,

for example.

We can say that the Equality body

has already recorded the situation,

for many people with disabilities

who are denied medical attention

as well as older people

in this situation.

When we're talking for example,

also about the people

who need high support, the situation

is very limited during the pandemic.

For example, in many countries,

the centers to look after the people

during the day has already closed.

And the people who need

high support for living every day,

they have to go to home

without any support for their families.

CATHERINE: Ana, given that we have

some others short interventions

if you could start to wrap up,

if that would be possible?

ANA: Yes, thank you. Sorry about that.

Finally, I'd like to talk about

women and girls with disabilities.

It was mentioned by the president.

The risk of violation and risk

of discriminations is very high.

We don't have any kind of answer

in relation to be protected.

For example, domestic violence

or sexual violence on these days.

Also, women with disabilities have

very often to look after

children without any support

living alone with them.

This is why we wonder

how we believe on the CRPD.

Next Monday we're going to celebrate

the entering into force of the CRPD.

But we see very clearly

that nobody believes in the CRPD.

Thank you very much.

CATHERINE: Thank you so much, Ana

for the details on rights violations

and the case of women

with disabilities.

Ana, you can switch off your mic.

And now we'll hear from Luisa Bosiso,

our board member from Italy.

She is of course in Italy,

just like Spain

being one of the first countries to be

dramatically affected by COVID-19.

Luisa will tell us about the effects

on services for people with disabilities.

You are welcome, Luisa.

Can I hear your voice?

LUISA: Yes, thank you, Catherine.

Can you hear me?

CATHERINE: Yes, very well.

LUISA: Okay.

I go straight to the point

because I have a lot of things to say.

First of all, good afternoon

to everyone.

I'll briefly outline the effect

that the pandemic had

on support services of persons

with disabilities,

on residential institutions

and other disability related services.

Persons with disabilities lost

fundamental support almost overnight

with catastrophic repercussions.

The most obvious and downright

horrible effects have been seen

in residential institutions

as my colleague Ana said.

Very high rates of infection

and death.

It needs remembering what she said

about the several cases in Romania.

Terrible cases. I'd have more

from my country.

In Sicily, as just said...

CATHERINE: Luisa?

LUISA: Yes?

CATHERINE: We have a background noise

while you're speaking.

LUISA: I have no other devices open.

CATHERINE: Okay. I hear a lot

of noise. Maybe it's just for me.

I wonder how it is for the captioner

and the interpreters.

Anyway...I'll let you go ahead.

I'll turn off my mic.

LUISA: Can I go ahead?

CATHERINE: Yes, please so.

Sorry to interrupt you.

LUISA: No, no. Don't worry.

A psychiatric health care residence

in Lombardy, with 320 women,

at the end of March, 22 women died.

In a residence of a central region

for persons with disabilities,

now has 11 deaths out of 61 guests

with intellectual disabilities.

Many of whom died in the hospital.

Those hospitalized who survived

didn't feel much better.

In the COVID world there is no time

to the response of non-collaborating.

They were tied to their beds

during the whole hospitalisation.

Those who survived the infection left

the hospital in dramatic conditions.

With ten kilos less

and scary psychic regressions.

These examples show

how it is the reality.

It shows how authorities prioritise

the heads of those institutions.

A research shows that half of the deaths

for COVID-19 happened in care homes.

Let me say a word on this.

The high number of these deaths means

that first the citizens were judged

expandable.

We need emergency plans

and pandemic emergency plans

including persons with disabilities.

Today it isn't.

Second, these systems weren't

designed to be inclusive.

We need alternative measures

to the institutionalisation.

Such institutions were created

to provide protection,

but by now evidence has shown

they didn't protect anyone.

We must think differently

and be the innovation,

and this pandemic will give us

an opportunity.

Reinforce, rethink the aid plan

of the institutionalisation.

The pandemic may open up opportunities

for change or we'll live like before.

Absenteeism and lack of protection means

that not only infection rates are high.

Abuse and neglect too.

This is a situation that we observe

across Europe and it's complicated

because residential institutions have

stricter lockdown conditions

where patients cannot have visitors,

often cannot even leave their room

and are frequently denied

even the means to contact

loved ones by phone or video.

This is more difficult for residents

to report cases of abuse and neglect.

And to seek help.

Community-based services

are not very much better.

Support workers are not prioritized

to receive protective equipment

and as you can guess social distancing

is not a possibility.

It becomes very likely for them

to get sick and infect others.

Many authorities cannot provide

solutions or alternatives

if support workers get sick

or need to quarantine.

Even worse, in some cases the solution

was to go to an institution.

Many people had to choose

between receiving support

or getting infected, because they had

no other choices.

We learned about a person in Belgium

that had to make this decision.

I want to stress how dreadful the lack

of protective equipment has been.

Myself had to spend days

in the car travelling to pick up

personal protective equipment

because there was nothing available.

Due to requisition by the authorities.

They were all intended for hospitals.

and sometimes avoiding scams.

It's not only

these residential institutions

and community-based support

that are suffering though.

All disability related services

were already underfunded

and many had to adapt and find

creative solutions

to keep supporting people often

at our expenses.

We know of education services

providing a phone line open 24/7,

teachers calling twice a day.

This is being done at the great expense

of the services and the staff.

While we commend these activities,

we're displeased

with the lack of support and funding

from the authorities.

In Italy, the suspension of lessons

don't guarantee didactic continuity.

Especially for those

with intellectual disability.

But not only, that are de facto

excluded from this mode of learning

relegating them to the end

of the list.

This means the student with disability

will get a wider educational gap.

Many may not be able to resume

the educational path.

At this point let me add

a huge problem for blind persons.

CATHERINE: Luisa?

LUISA: Yes?

CATHERINE: Sorry to interrupt.

If you could start to summarize

or bring the main points to the end

that would be great.

The sound quality was our problem.

It has been sorted out.

We hear you perfectly now.

LUISA: Okay. No accessibility

for blind persons, no accessible format,

no sign language for deaf people

and no subtitles,

and no digital accessibility.

Another problem is

the deployment services.

We need to protect the work places

of workers with disabilities.

We must secure the job

in the form that is now possible.

And we must take into account

the answer to the need of workers

that have in charge of family members

with disabilities.

We're worried

about the post COVID period.

Disability services will need

a lot of funding

and support to even survive.

I'm not even talking about it.

We're worried the national authorities

will cut more funding

and the EU funding will be diverted

away from services

and disability organisations.

We cannot allow this to happen.

Thank you for your attention.

CATHERINE: Thank you Luisa.

I'd like to give the floor

to our board member from Denmark

Thorkild Olesen. He'll speak

about the role of DPOs.

Can we hear your voice?

THORKILD: I guess you can,

I hope you can.

CATHERINE: Perfect, I give you

the floor.

THORKILD: I'll avoid using the camera

to concentrate more on the words

when there is no picture.

First of all, thank you

for this opportunity

to speak about the role

of DPOs in this pandemic.

I'll start by saying that I'm proud

to be a member of an organisation,

of a movement across Europe

which has been an important tool...

(no sound)

CATHERINE: We lost you.

We heard you perfectly

But then we lost you.

There is a bit of a disconnection.

We were hearing you perfectly.

Raquel, do you have suggestions?

THORKILD: Sorry?

CATHERINE: We hear you again. Great.

First of all, the advocacy work

we've been doing.

This pandemic was not foreseen

by anyone.

The problem we have, as mentioned,

we've been very much advocating

around Europe for measures

in accessibility,

for persons who are deaf, it has been

important to have sign language

But no countries were ready.

The sign language

around meetings, press release, etc.

In the start of this pandemic

there has been quite a lot of problems

with the information.

For example in Portugal just

has been solved last week.

Deaf persons can use

the information phones about COVID-19.

We also had quite a lot

to do in trying to help

with the consequences

of the fast shutdown of the societies.

We had had problems with institutions

that were shutdown

and it has been problematic

and a help matter for our members

that they are mentally

and physically in some ways

they have felt hard of the issue

of the shutdown.

So, this is also something

we have dealt with very much.

On the other side, we've had

a lot of work in service providing.

Our member organisations

have been working in trying to help

with food, medicine

and all other sorts of help,

basic help to members

of the organisation.

Help that we haven't been used to.

And that have been strained

to the organisations.

I think it's important at this moment

to say and agree with our president,

it has been strained for organisations

in logistics and economic situation.

Only this week we have heard

from our Latvian member organisation.

The council of persons

with disabilities in Latvia.

They had to fire some of the staff

because funding had been held back.

Therefore they are now

laying off persons.

In other countries it's the same.

The strain is high

on the funding of organisations.

The involvement provided

in the CRPD has been very poor.

So now when we hopefully,

we hope in Denmark at least,

we hope all over Europe,

we're on the downhill from this,

from the highpoint of this.

We very much urge, that firstly

organisations of persons with disabilities

they are in the work from the start,

in the reopening of the society.

We have a good example from Italy,

Giampiero Griffo is in the task force.

In Denmark my organisation

has received around 3 million euro's

from our government to try to help

reopening the system.

We're part of the partnership.

We have to say that.

That's the push story. We need to have

stories on inclusion and involvement.

And the second, the funding.

We have to use the funds.

So politicians, go to your countries

and say we need the money.

Go home to your friends

of the background of your countries

and urge them to support organisations

of persons with disabilities.

And to the Commissioner,

we also need to see the funding

of the organisations of person

with disabilities in Europe.

This is extreme and we're extremely

hard pressured on this.

So please, I urge you,

do something about it.

Thank you very much.

CATHERINE: Thank you, Thorkild.

I give the floor now to Albert Prévos

who is an Executive Committee member

and calling into us from France.

Albert, you have the floor.

ALBERT: Thank you Catherine.

Do you hear me?

CATHERINE: Perfectly.

ALBERT: Good afternoon to everyone.

<i>Bonjour à toutes et à tous.</i>

I'm honoured to participate

in this meeting.

And I thank you for inviting me.

I'll briefly give some examples

how lockdowns measures in Europe

impacted persons with disabilities.

First point is continuity of care.

My colleague Luisa already

explained the conditions

that are imposed to persons

in residential institutions

in some countries.

Not all the countries.

I just want to put a stress

on people with disabilities,

when they live in their own house.

Alone or with their families.

They can't benefit from home help,

not continuity of essential care.

Lockdowns has resulted in depriving

people with disabilities

of the recurrent care they need

and which remains necessary

for their health

and that of their families.

Several DPO's, in my country,

but in many other countries

they had to organise home visits

to avoid the exhaustion of families

and to break isolation

of people with disabilities.

My second point is about access

to goods and services.

Lockdowns in many countries

are exacerbating problems

in accessing goods and services.

Of course, persons with disabilities

had already, before the pandemics

more difficulty to access them

due to accessibility barriers.

However, that problem exacerbated it.

It's not only because they cannot go

outside in order to protect themselves

given the lack of protective equipment,

particularly for them,

it's because delivery services

are overwhelmed and stop delivering.

Persons in their support network,

who could bring them goods

and services cannot come anymore.

We do increase solidarity

by countless people all over the EU.

But we need more sustainable solutions

such as priority delivery,

food and support from authorities

and accessible points to request help.

My third point is about some cases

of harassment.

In some countries, it took time

for authorities to recognise

that persons with a certain type

of disabilities,

such as persons

with intellectual disabilities,

psychosocial disabilities,

autistic people,

persons with mental health issues

were not able to withstand

the very harsh confinement measures

that were imposed.

In Italy, Spain, France,

governments relaxed the measures,

but only after outcry from DPO's

and media pressure.

I must add with a little shame

that this however created

a problem of harassment

of persons with disabilities.

Because some people thought

they were breaking the rules.

The problem was and is widespread.

As we must know that.

The next point is about information.

We're able to answer the continuity

and the effective of people's rights.

It has been said, an important issue

about information,

about providing information accessible

to all people with disabilities.

I mean, information

for people with disabilities.

And we had to develop

adapted communication tools quickly.

But also about people

with disabilities.

For instance, we heard of workers

being stopped by police.

Because the police didn't understand

a client's home is a place of work

in some countries where you need

administrative forms to go out,

like in my own country.

And I think in Romania,

organisations of persons

with disabilities had to create

accessible versions of the forms.

So blind and partially sighted persons

could fill in.

My next point is I'll be very short

because time is short.

And also because it has been mentioned

I mean, about education.

But we have a special concern

about education.

There is uncertainty

about the conditions of schooling

for children with disabilities

at home.

Lockdown keeps them away

from personal assistance

and sometimes away

from a safe environment.

Also it increases the digital gap

for those

who have social vulnerability

to their disability.

The last point is about the conditions

of hospitalisation.

Disability must not be

a criterion for refusing care,

whether for simple hospitalisation

or for resuscitation.

That is very important on the arrival

at the emergency rooms in hospitals.

Finally, we can say

the only involvement

of DPOs could have avoided

most of this difficulties.

It's important, it'll be my conclusion

that the DPO's be clearly involved

in the gradual phase out of people

with disabilities from lockdown.

Thank you.

CATHERINE: Thank you, Albert.

Our final speaker

from the disability movement

before we give the floor

to Commissioner Dalli,

she'll be Dovile Juodkaite,

our board member from Lithuania.

Dovile, you can turn on your video

or use the microphone.

Actually, our sound problem

is resolved. Nice to see you.

DOVILE: Thank you. Greetings

to everyone. Do you hear me?

CATHERINE: Perfectly.

DOVILE: Okay. I'd like to thank you

for inviting me

and making the contribution on behalf

of the European Disability Forum

in this very important meeting.

The European Disability Forum

and DPOs Europe wide

they are generally worried

about the post COVID period.

One of the main concerns is

related to funding.

Funding for social protection,

for support services in the community

and funding for the organisations

of persons with disabilities.

The toll that the last economic crisis

took is not only fresh in our memory,

but also something that many persons

with disabilities still live with.

We worried that funds will be cut,

we're worried that they'll be diverted

and we're worried that EU funding

that would have been used

to support social inclusion

and actually social justice

of persons with disabilities will be

now allocated to other actions.

New flexibility in the rules

governing the use of structural funds

and state aid shouldn't mean less money

for persons with disabilities.

We're also worried that measures

governments are taking to ensure

liquidity for businesses

don't extend to disability services.

So many could close, even if funding

is available for them at later stage.

Also, cutting off costs could affect

the deinstitutionalisation.

It's necessary to guarantee

funding for the transition

from institutional

to community-based services.

Since we've seen the harm

of institutionalising people,

it's perfectly displayed

in this COVID crisis.

It's unacceptable that institutions

are created or given resources

to continue after this crisis.

We need strong financial measures,

which directly support

persons with disabilities

in the community.

We need to avoid a repetition

of the previous crisis

where persons with disabilities

were excluded and unsupported.

They are still suffering

because of the last crisis.

According to our recently launched

human rights report

on poverty and social exclusion,

in the EU were at risk of poverty

before this crisis,

The situation was worsening since 2010

in 11 EU countries: Estonia,

Luxembourg, Germany, Sweden,

Ireland, Czech Republic, Italy, Malta,

Lithuania, Netherlands and Spain.

And in the countries were conditions

improved, it took far longer

to improve conditions

for persons with disabilities.

If the situation was already serious

a few months ago,

imagine how it is now

and how it'll be after this crisis

if governments don't act.

We need measures with direct support

such as lump-sum payments,

tax relief measures, subsidisation

of goods and expenses,

cash transfers and automatic extension

of disability related entitlements.

We need to ensure this support

reaches all persons with disabilities.

We need to know the impact of this crisis

on persons with disabilities.

Too many had to suffer alone

ignored, isolated.

Too many were discriminated against.

Too many died and are still dying.

We need data, concrete

and systematic information

on how COVID-19 impacted

persons with disabilities.

And as many of my colleagues

said already, we need to be involved

and to have resources to be

sustainably and effectively involved.

We need to be in the task forces,

in the expert committees,

the virtual meetings that will decide

on the measures taken.

We need funding to do so.

The next few months will be crucial

for all those matters.

So we cannot be left behind.

We need to participate

because nothing about us,

without us.

Thank you for listening.

CATHERINE: Thank you so much, Dovile.

Now we're going to hear

from Commissioner Dalli,

the first European commissioner

for Equality.

We're honoured to have her

with us today.

We didn't expect the first participation

in the Intergroup would be online

but we really appreciate her time

and accepting the invitation to speak.

Commissioner Dalli, you are welcome,

if you want to put on your camera.

I want to mention some questions

which came in the chat box,

which haven't been mentioned now

such as the situation

of people with disabilities

on COVID-19 outside Europe.

Commissioner Dalli, are you ready

to address us?

COM. DALLI: Can you hear me?

CATHERINE: Yes, perfectly.

CATHERINE: Would you like

to put your video on?

COM. DALLI: I have it.

CATHERINE: We don't see you.

COM. DALLI: I'm seeing myself now.

We'll wait for a moment

if we can see you.

It' d be good if we could see you.

COM. DALLI: Yes.

CATHERINE: I'll see if we can do

something.

COM. DALLI: I think now?

CATHERINE: Yes, we can see you.

CATHERINE: I'll turn off my mic.

Thank you so much.

COM. DALLI: Dear friends

and honourable members of Parliament.

I really wish to thank you

for organising this exercise,

this enriching exercise,

I must say.

Whereby we can all listen

to one another and come closer

to the various different realities

of people with disabilities,

and older people during this pandemic.

And whereby we can discuss

and propose more solutions.

So, thank you very much

for organising this.

Persons with disabilities as well

as older persons are experiencing

extremely difficult situations

in residential care.

Many others have lost their lives

due to this devastating pandemic,

as we have been hearing.

So, health and social workers

keep on working with full dedication

and their extremely

demanding circumstances.

The EU's implementation on

of the UN CRPD has been put to test

and becomes even more relevant

in this crisis situation.

It's essential that the EU

and its Member States continue

to respect the commitments undertaken

when ratifying the UN convention,

notably the right to the accessibility

of the highest containable standard,

of health without discrimination

on the basis of disability or age.

At the top of the agenda

of the Commission is safeguarding

the health and well-being of citizens.

So we've reacted quickly

and put in place several measures

in the area of health policy

to tackle the crisis.

These include ensuring medical supplies

and protective equipment.

Thus the Commission launched

four calls for tenders

to ensure the equipment

for Member States.

It published guidance

on how to use the flexibility

under the EU public

procurement framework.

Furthermore, the harmonised standards

are freely available to companies

with the aim to manufacture

personal protective equipment

of required high quality.

To facilitate the identification

of available supplies,

and merge them

with Member States demands,

the Commission has also put in place

a clearinghouse for medical equipment.

Moreover, the Commission approved

temporarily waving custom duties and VAT

of protective equipment

and medical devices from third countries.

All of these supplies and equipment

are commodities like any other

and they obviously need

to be paid for.

So the European Commission

has come forward to help

ease the financial burden

this crisis is causing.

In April the Commission launched

the EU Solidarity for Health initiative

to support the healthcare systems

of Member States.

It provides 6 billion euro's

for purchasing emergency support.

The Commission carried out

an in-depth analysis of the EU funds,

including remaining European structural

and investment funds.

The COVID-19 investment initiative

packages of measures provides

the Member States with more flexibility

to use EU funds,

to counter the effects of this crisis.

But these available resources won't help

if they aren't properly targeted.

This can only be achieved

with effective

and inclusive

social protection systems.

These are essential for guaranteeing

an adequate standard of living

for persons with disabilities.

Indeed, in spite of the heavy impact

on those systems by the COVID crisis,

we cannot lower our standards

in Europe.

Social protection and inclusion

are at the core

of the European pillar

of social rights.

We must ensure

that unprecedented challenges

caused by the COVID crisis

are considered in order to make

our social protection systems

fit for the future.

The European pillar of social rights

will remain the compass

for upward convergence,

even more so in times of crisis.

Its principles and in particular

those of its third chapter,

social protection and social inclusion

should be at the heart of our response

to social challenges in the EU.

The European semester continues

to be the main vehicle for monitoring

the implementation

of the European pillar agenda.

We're making sure that Member States

take into account

that persons with disabilities

are among the groups

particularly affected by COVID-19,

and access medical and social care

on equal basis with others.

Confinement measures have put

enormous pressure

on school communities across the EU.

As the learning process is

primarily taking place virtually,

learners with disabilities encounter

barriers which can negatively affect

the learning development and results.

Lack of accessibility rises the exclusion

of students with disabilities.

Parents of children with disabilities

in the absence of support

they're experiencing

additional difficulties

in finding the balance

between their working commitments

while supporting

their children's learning process.

I therefore urge you to continue

conveying the message

to governments to consider

the additional burdening challenges

posed on learners with disabilities

and on their families.

I invite the national authorities

and the relevant stakeholders

to adopt measures to prevent

learners with disabilities

and their families, having

to face additional discrimination

resulting from the current crisis.

Remote education must also be accessible

to all learners with disabilities.

Sign interpretation, live captioning,

adapted learning processes

or any other measures

should become available

in close consultation with learners

with disabilities and their families.

Persons with disabilities

in residential settings

they are, of course,

of very big concern to us.

COVID-19 is hitting them

more than any other group.

Social isolation measures,

the risk of infection

for both professionals and persons

with disabilities,

together with the limited availability

of protective material

all that creates

additional challenges.

Those challenges can even lead

to institutionalisation

of persons with disabilities who were

until now living in their communities.

I stress that persons with disabilities

shouldn't be institutionalized

because of quarantining procedures,

beyond the minimum necessity

to overcome the stage

of their illness.

Those who were in institutional care

before COVID are fully entitled

to receive the care which they need.

The current situation puts challenges

on the provision of services

to persons with disabilities

in institutional care.

Yesterday, together

with vice-president Svitcha

and the commissioners Kyriakides

and Schmit we discussed

with support care service providers

and organisations,

including the European Disability Forum,

some of those challenges.

Member States must make funding

and practical solutions available

to ensure persons with disabilities

are not negatively affected

by the temporarily lost

of support networks,

due to illness or indirect impact

of COVID-19.

This includes personal assistance,

family and specific services.

With the ban of visits to care centres

and social distancing,

persons who are already isolated are

among those who are the most impacted.

Nobody should be left without support

and essential services,

including access to emergency

and intensive care.

So we must ensure that no one,

no one is left behind.

We should keep in mind that crisis

and confinement measures

That can deteriorate mental health

and generate fear and anxiety.

Therefore, we should invest

more in reaching out.

We shouldn't forget that solidarity

and community support are important

for all but in particular

for the most vulnerable amongst us.

For our part in the European Commission

we're making efforts to communicate

all these aspects and measures

to the public in Europe.

We need to make sure that our messages

reach persons with disabilities.

Our website is accessible, as are

the documents and the messages.

Furthermore we've increased

the number of video messages

with subtitles

and sign language interpretation.

My aim is to have

our communications accessible

from the start and thus avoid making

them accessible at a later stage.

This is an obligation

for all EU institutions.

We're also passing the message

to the Member States.

In our recommendation

on mobile applications,

accessibility for persons

with disabilities is clearly included.

I've written to all Equality ministers

in Member States highlighting issues

concerning people with disabilities

and old people.

And we're now following up

with every Member State.

We have to learn from the experience

that this crisis has brought to the EU

and we have to apply

what we've learned.

The new European strategy

that underpins our implementation

of the UN convention is currently

under preparation as you all know.

It'll take into account the challenges

arising from the COVID crisis

and its devastating economic

and social consequences.

So, we must avoid a deterioration

of social networks and prevent

further inequalities for persons

with disabilities.

To this end, I'll keep my commitment

to continue

to be in contact with organisations

representing persons with disabilities

to identify complementary

concrete measures the EU can take

for a collective

and social response to COVID.

We'll continue to consult

all relevant stakeholders

in order to ensure comprehensive

and effective EU action

in the field of disability.

In the current circumstances

it is of the essence

that we put in place a solid framework

for the coming years

to ensure that no one is left behind.

I thank you.

CATHERINE: Thank you so much

for your participation

and for your speech, Commissioner.

I'd like to let everybody know that,

because we started late,

we have permission from our captioner

and the interpreters Gerdinand and Lissa

to go over time today

because we started late.

It'll be possible for you to hear

the inputs from members of Parliament

that are going to participate now.

And with that,

I hand the floor to MEP Dragos Pislaru

who will give an introduction

to the role Parliament before having

the interventions of some others MEP.

I give you the floor.

Thank you so much, Dragos.

MEP PISLARU: I'll start for what is

probably mostly heard in comms,

do you hear me?

CATHERINE: Perfectly.

And we see you as well.

MEP PISLARU: Thank you

for the invitation. It's an honour.

Dear colleagues, dear Commissioner

Helena Dalli, dear members of EDF.

I'm glad and honoured to be here

and have the chance to speak with you.

The COVID-19 outbreak has hit

the European society hard.

It has an impact not only

on the health of Europeans,

but also on their way of lives,

their personal income, savings, jobs.

But also concerns of the future

of each of us.

It's a period of concern, anguish,

having the life of people at stake.

As members of the Parliament

we do have the duty

to make the voices of citizens heard

including and probably prioritising

those who have been less heard:

persons with disabilities.

It's my honour and responsibility to be

a member of the Disability Intergroup.

And have the opportunity to listen

not only today

to your experiences,

your best practices and demands.

I'm actually learning from you

and I'm just a vessel channel

to make your voices be heard

wider in Europe.

This year, before the crisis, we had

a strong start in the Parliament

by adopting the resolution

on the European Disability Strategy.

There was a strong political consensus

for supporting that resolution

I was really glad,

it was a good feeling.

We were actually starting quite well

this particular mandate.

But, with no doubt, the pandemic

has made a reset of priorities.

And the committees are taking account

of the emergency of this crisis.

As co-legislators but also

as representatives of EU citizens

we aim at adopting the changes

that are generating the changes

needed in the instruments provided

by other institutions

such as the Council

and Commission.

On April 17 the plenary

of the Parliament has adopted

an resolution on a coordinated action

to combat COVID-19 and its consequences.

I need to say that I'm proud

of Renew Europe

as the group called

for that plenary session to happen

at the forefront of negotiation

and proposing this resolution.

It's important to show that even

during such times

we can serve together with the groups

the interest of European citizens.

We called in that resolution

for a massive recovery

and reconstruction package

including recovery bonds, guarantees,

employment reassurance schemes,

EU coronavirus solidarity fund

of at least 50 billion euro's,

and greater powers for the EU

to act in case of cross border

health threats like COVID-19.

We did raise strongly the demands

of the disability movement.

We made a call to prioritise persons

with disabilities.

We also reminded them

of their obligation of involving

persons with disabilities

by their representative organisations

in all the measures affecting them,

living up to the UN CRPD

and their motto: Nothing about you,

without you.

Also, we insisted in paragraphs 13

and 36 of the resolution

that the EU and Member States

should give particular attention

to equal access to healthcare

to persons with disabilities.

and ensure community-based care services

needed by these persons each day

they are well funded and equipped

and staffed.

This is the response to concerns

that have been expressed here

and are still happening

in the Member States.

Besides this resolution, one

of the most important measures

the Parliament greed is funding

to tackle the crisis.

Commissioner Dalli mentioned the moves

and steps of the Commission.

The Parliament has approved

this initiative of investment.

This brings more flexibility

to the cohesion funds, EU social funds,

this is allowing EU funds

to be used of 100%

in programmes that tackle COVID-19.

Organisations working with persons

with disabilities applying to EU funds

they could access these funds easily

and with lighter auditory requirements.

I've heard before the speakers

mentioning the fact

that flexibility can be seen as having

both a good part and bad part.

The bad part would be money

can be taken out from the spectrum

of helping organisations,

for the people of disabilities.

But the good part is we have flexibility

to bring more resources in this field

and taking care

of the most vulnerable.

It's up to the governments

of the Member States at the EU level

what we can do is monitor

and highlight

if this isn't going

towards the persons with disabilities

when it comes to the Fund

for European Aid for the Most Deprived

for example, we adopted measures

including the possibility

to finance this provision

of protected equipment

for workers and volunteers,

to purchase vouchers and cards

that can be used to buy basic items

like food without risk of infection.

All things related to support services

for persons with disabilities

that can be used and benefit

from these measures.

I think that, to add

to the general hope,

this extra funding we have provided

will ensure

that healthcare coverage reaches

everyone without any discrimination

against persons with disabilities

so they'll receive the care they need.

I'm glad to follow Commissioner Dalli

I hope she'll actually answer

the invite of EMPL as committee

to participate in a public hearing later.

about how equality will be presented

in the recovery plans

put forward by the Commission

that we're all waiting to see

how they'll be developed

and implemented.

In this crisis we need to hear

not only the Commission and Council,

but organisations like the EDF

and its members to ensure

that all the voices concerns and ideas

are heard.

From this crisis we can only leave it

behind if we do it together.

Unfortunately the pandemic has shown

that people in vulnerable groups

they're exposed to social economic effect

and discrimination accessing healthcare

rather than the rest

of the population.

Residential and care centres

for people with disabilities,

becoming outbreaks of infection

and depending on care services

that have been deprived of them

and the isolation has made difficult

the access to treatments

or basic services.

I've seen figures from centres

from my home country,

it was mentioned today, in examples

it was given information

about caregivers or staff

that got infected.

...We're fighting to raise

the awareness...

(INAUDIBLE)

Also it's important to think

about the future.

About the lessons we've learned

from the crisis and the opportunity...

CATHERINE: Sorry, we have little issue

with your sound.

CATHERINE: It was perfect for a while.

MEP PISLARU: (INAUDIBLE)

There is some kind of interference.

It's not just me.

Gerdinand has a problem with it.

It was perfect for a while.

MEP PISLARU: Okay...

(INAUDIBLE)

MEP PISLARU: Can you hear me now?

CATHERINE: Perfect.

MEP PISLARU: Okay. So, to be able

to conclude actually.

I was saying that all these problems

that were mentioned,

real problems that we need

to find the levers to combat them.

It' important to think

about the future,

and the lessons we've learned

to be stronger and more determined

in terms of access for people

with disabilities.

From the Intergroup we'll remain

vigilant active and ensuring

no decision forgets people

with disabilities and their families,

and support and care services

and to do so,

we remain at your disposal and demands

whenever needed in the Parliament

with the colleagues we have together.

Thank you for your attention

and many thanks to the EDF

and the colleagues for organising

this meeting and activities these days.

I hope we'll have the opportunity

to see each other soon in good health.

Thank you and I wish you all luck

in all the efforts

we're doing together

for the persons with disabilities.

CATHERINE: Thank you so much.

Now we have a number

of short interventions from MEP's.

We have collected questions

in the question box.

There will be a chance

for you all to hear responses

from the Commissioner from Equality

or other MEPs

if you target

specific questions to them.

I wanted you to be aware of that

I'll give the floor now

to MEP Anne Sophie Pelletier.

If you'd like to turn on your mic...

...so we can hear you.

MEP PELLETIER: Is it okay for you?

CATHERINE: Perfect.

MEP PELLETIER: Thank you so much

for this good initiative.

I just want to make a short point.

Because you know, in France,

we have had 234 tests

of people with disabilities.

And so many professionals who have

the suspicion to be infected by COVID.

There were so many problems,

the first one the protection of staff.

it was a problem of protection

of personal.

In France, the protection provided

by the regional health agency

it took too long to arrive

and to take care

of people with disabilities

and to protect themselves.

And, the protection, more specially

lack of masks was very important.

Lack of sanitizing gel,

protective glasses, nothing.

So it was a disaster, you know,

if you don't have the protection

to take care of people, we see that

in France,

we have had 6588 people

who can be suspected.

I want to say the confinement had

an impact on people with disabilities.

Because the confinement and the absent

of the protection needed

it takes a suspension

of many number of treatments.

I think about physiotherapists,

psychologist, speech therapists.

I don't know what will happen

afterwards.

I think we'll have too much to do.

We can speak about disability.

But I think about the family,

because the family was alone

so it was difficult for parents

to take care of them by themselves.

I just want to end in a positive note.

What I'm going to say isn't very well.

I think people with disabilities

have so many resources.

In a especial establishment for people

with disabilities,

they continue to work and they continue

when they do some masks.

I think about this establishment.

In result, they do 10.000 masks

per day.

We can do so many initiatives

where people with disabilities

They were very solidary.

With solidarity.

I think that this initiative

was so positive.

One more time, they have

many resources. In the solidarity.

Thank you very much.

Sorry for my English.

CATHERINE: Your English is beautiful.

Thank you.

MEP PELLETIER: Thank you.

CATHERINE: I'd like to give the floor

to one of the chairs of the Intergroup

Ms Radka Maxova.

We're waiting to see or hear you.

MEP MAXOVA: Can you see and hear me?

CATHERINE: Yes, perfectly. Thank you.

MEP MAXOVA: Thank you for organising

this webinar.

It's helpful because we can share

our experience with COVID

and we can help with plans

for future measures.

Distinguished ladies, gentlemen

and colleagues.

Naturally, the focus of the management

is on healthcare.

However, informal care has been

again outside the centre of attention.

I'd like to stress it's essential

to adapt measures for informal carers,

who take responsibility for the needs

for the relatives with disabilities.

Failing to do so could lead

to losses of life.

In the Czech Republic 250.000 people

are in home care

and for a third of them

COVID-19 would be fatal.

The people in home care aren't included

in any system of protective equipment.

Nor they are accounted

for the crisis planning.

This is simply not acceptable.

It's true that the situation differs

from one member state to another.

Yet, generally speaking

the support provided

to carers remains largely insufficient

and fragmented.

We need to push for the support

for informal carers

to be mainstreamed in all relevant

and anti-crisis measures.

And therefore the use

of all EU funding instruments.

like ESF, ERDF, ECIF. At national level

should be aligned with this.

Furthermore, as the majority

of informal carers are women,

support and recognition

of informal carers would contribute

to mitigate to negative impact

on this crisis on gender equality.

I'm pleased there is the text

call Renew Europe's 11 commitments

for the persons with disabilities,

that is an initiative

that pay attention

to the informal carers.

Also, there are in the long-term

and that it commits to ensuring

swift transposition and implementation

of the directive on work life balance

for parents and carers

in all the Member States.

On a different note, I'll also mention

that I intended to send a question

to the Commission and the Council

concerning the establishment

of disability focal points.

You may receive an email

for potential consignation

in the beginning of the next week.

Thank you very much again

for this discussion.

And take care and be healthy.

Thank you. Goodbye.

CATHERINE: Thank you so much.

And now I'd like to give the floor

to our next member

from the Disability Intergroup.

Coming to us from Spain

Ms. Monica González.

I'll wait to see you put

your mic on or camera

so we can see you if you are there.

(...)

MEP SILVANA: Can you hear me?

CATHERINE: Now I can hear you. Yes.

CATHERINE: Can you speak again?

Can you just take the mic again?

There is a little...

I think there is an issue.

Perhaps you might be logged in twice.

Perhaps there if is interference.

Raquel, can you help with this?

RAQUEL: Sure but you need to give

the floor to Stelios.

And I'll solve this with Mónica

very quickly.

CATHERINE: Mónica, we'll come back

to you.

We need to check if you are in there

once and the sound will be good.

If you are ready, we'll give the floor

to MEP Stelios Kympouropoulos

from Greece. I'm not sure

if you are in Brussels?

CATHERINE: Wonderful. Thank you.

MEP KYMPOROPOULOS: Thank you.

MEP KYMPOROPOULOS: Hello everybody.

Honourable Commissioner,

dear colleagues, dear guests,

dear organisers.

I'd like to thank you

for this beautiful webinar.

Which is accessible for everyone.

I think we've heard good presentations

from the speakers before.

But I want to make a point.

I feel somehow sad.

Some of us still believe

that the institutions are acceptable.

And I say that, because I need to say

something from my own perspective.

I've been trying to find the number

of European disabled citizens.

I asked, and I got an email back

informing me

that the data concerning

disabled people doesn't count

people in institutions

or collective households.

I cannot stress this enough.

Let's make the people count.

The deinstitutionalisation

must continue during the lockdown.

Commissioner, please keep

in your plans to inform us

about the Commission's strategy

on the deinstitutionalisation.

Many of us asked in a disabled level.

A second point is,

during the lockdown, I talked

with many of your colleagues

through written questions

related more or less to disabled

and COVID cases.

Some of us have some treatment.

Progressively, telemedicine

can be applied.

It's important to avoid

going to the hospital.

For some, lack of treatment

means steps back.

Some say years back.

I'd like your view, whether

you address this issue jointly.

A third and last point. An old-time

classic subject of disabled-ism

An advertisement in Greece appeared

with the following plot:

before I was happy. I had friends,

a girlfriend, a career.

Then, I had a car accident.

Now I'm disabled. Therefore, unhappy.

This doesn't help the social position

of the disabled persons.

I'd like your view on disability.

On how disability should be dealt with

in the media.

Thank you.

CATHERINE: Thank you very much

for your intervention.

I'll move on. It's wonderful to have

the MEPs giving their interventions.

I apologize if we have little delays

in between.

Could I come back to Mónica Gonzalez

to see if your sound is working okay?

Can you speak?

If you just put on your mic.

Click on the microphone.

MEP SILVANA: Can you hear me?

CATHERINE: Perfectly.

MEP SILVANA: Thank you. First I'd like

to thank the technical service

for making this meeting possible.

Thank you a lot to the EDF team

for pushing the meeting

with Ms Dalli.

For her attention and support

in today's session.

We understand the difficult position

she has raising awareness

of other commissioners who are

in charge of the disabilities issues.

In the resolution approved

last plenary session,

we're including people

with disabilities.

But we'd have liked to see

more concrete points about this field.

However, we should take

that resolution as a guide

for the construction we'll need

after the global pandemic COVID-19.

There is no doubt Europe is responding

to the whole crisis,

but more inclusive answer in terms

of disability is also needed.

Because of the great impact

that it is making in the collective.

That is why they should be included

in the plan that is being designed.

So, I suggest considering

the importance of the next point,

and bear them in mind to guarantee

the availability of information

in a simple language

and easy to understand,

as well as the simple access

to this information.

Automatic electronic service

without depending on technicalities.

It's compulsory the non-discrimination

on persons with disabilities

in medical services There is

a clear ethic guideline about this.

Moreover the authorities have

the duty of carry out the Convention

on the rights of Persons

with Disabilities of the UN.

Especially article 11, risk situations

and humanitarian emergencies.

In addition, they must follow

in the existing good practice.

First, the treatment priorities,

like the victims selection remembered

the Fundamental Ethics principles.

That obliges the medical staff

to ensure correct hierarchy

and the obligation using the resources

in the better way.

Any other selection criteria

would be inacceptable.

It could be considered

a Human Right violation.

The support programme for people

with disabilities shows

a necessary gender scope

due to the violence against women

and children

during the lockdown as mentioned.

More funds for the provision

of services and support.

The European solidarity is compulsory

to ensure essential service.

The implication of persons

with disabilities

via their representative organisations,

because they are the ones

who can provide better advice

about how they can proceed.

We should guarantee to the isolated

and the marginalised people

keep their supports, goods

and human essential contact.

Support network and assistance devices

in terms of economic health

to ensure the people with disabilities

still have the essential staff.

We should guarantee employment.

Protects minimum income

among other mentions.

such a fiscal benefit and flexibility

for payment and teleworking.

Otherwise we must ensure measures

to guarantee

the 100% of salaries for workers.

It must be underlined

in the EU Recovery Plan,

a special attention to the recovery

of the special jobs or adapted jobs.

To ensure the non-national protection

from the United Nations,

so the Member States should give

correct attention.

Without any discrimination

for nationality reasons.

Thank you very much.

Sorry, my English is very bad,

but I tried to speak in English

and I hope you understood.

Thank you very much. Especially,

for Commissioner Dalli.

CATHERINE: Thank you very much.

Yes. I just want to interrupt slightly

the inputs we have

from members

of the European Parliament

because I need to give the floor

because of the timing of the meeting.

I need to give the floor

to the Commissioner for Equality

Commissioner Dalli to respond

to some of the issues raised.

Because within 10 minutes

she'll need to leave.

I'm sorry I break the rhythm

of the inputs at the moment.

So...I'm...

COM. Dalli: Can you hear me?

CATHERINE Yes but I can't see you yet.

COM. DALLI: Okay. Let's try.

Can you see me now?

CATHERINE: Yes.

Just to let everybody know,

if more questions come in

addressed to the Commission

after the commissioner leaves,

she has colleagues who are attending.

We'll take note of the questions.

We can actually find responses later

in case there is an issue with timing.

I give you the floor, Commissioner.

COM. DALLI: Thank you. I scheduled

until 5.30.

At 5.35 I have to go

into another meeting.

I'm sorry that I had to disturb you

in this way.

So, thank you all

for your contributions.

We've listened carefully

and we've taken note of what was said

so we can work on it.

I reiterate my call

that my door is always open.

And this is an ongoing conversation.

Doesn't start or stop here.

I had said at the very beginning

that I want this to be ongoing.

Because reality changes,

situations change.

It's good we have this dialogue

between Parliament,

civil society, going on all the time.

Mr Dragos said that he is going

to invite me

for some event of theirs,

organised by EMPL,

Of course, provided that my day

isn't yet booked I'll gladly attend.

Ms Maxova spoke about the establishment

of disability focal point.

I'll wait for her letter to see

what she means by that

because I want to draw your attention.

I'm sure you all know

we've setup a task force

whereby a person,

an expert on Equality is working

in every DG.

The Equality perspective is taken

in on all policy and legislation

which is being formulated,

so at the very early stage.

So there is that perspective there

and this task force is working

and obviously the disability perspective

is introduced into whatever it is

that the Commission is doing.

So, I have to see with Ms Maxova

what she has in mind.

I don't think there were

other concrete questions

or maybe, sometimes the audio

wasn't very clear.

But as you said, Chair, I'd be

very happy to follow up

on whatever questions there might be

or questions I might have missed

while I was listening in.

as I said, because it wasn't

always very clear.

But, thank you for this.

And this will inform our work.

So, please, let's keep this dialogue

going

and keep giving us your critique.

Because that's how we grow together,

how we learn together,

and how we'll be affected

to the people we're working for.

To the people you're representing.

So, thank you very much for this.

Thank you so much.

Goodbye.

CATHERINE: Thank you so much

for joining us.

As I said before, we'll take note

of any other questions that come

and make sure they are communicated

to your team

to see what kind of questions

need to be followed and answered.

We appreciate your participation today.

Thank you.

So now I'd like to give the floor

to another chair of this Intergroup.

Ms. Katrin Langensiepen.

You're very welcome to put on

your microphone or camera.

The sound is working well enough

to handle the camera

and it'd be nice for people to see you

if that's okay for you.

Beautiful, we can see you.

KATRIN: Can you hear me?

CATHERINE: Very good as well.

KATRIN: Perfect. Thanks to Helena

for your report.

It was great to hear you

and all my colleagues.

Thanks to Dragos and all of the NGOs.

And people who are involved

in our issue, people with disabilities.

I'd like to express my gratitude

to all of the organisations,

and I know that the Commission did

an external evaluation

of the present EU disability strategy

in March this year

and they're preparing also

an internal evaluation

on the basis of which the new post 2020

EU Disability Strategy will be drafted.

I hope that the evaluation will cover

the experience of the pandemic

and pertinent measures will be proposed

in the post 2020 Disability Strategy,

which I hope will be prepared

on the basis of systemic consultations

with organisations, representing

persons with disabilities

as they are the ones who work

in the field and know the challenges.

I was looking for the post 2020

EU Disability Strategy.

and the leaked version of the Commission

revised work programme two weeks ago.

a programme for 2020

but couldn't find it.

So where is

the Disability Strategy post 2020?

Could you insure us, dear Helena Dalli

or people in charge,

that the Strategy will be

on the agenda for 2020?

I know many strategies are in

but from my perspective and my input,

that for the people with disabilities,

the strategy is not in.

What little time is enough to give

the values we have fought for

such as non-discrimination

and the right of triage,

which are violating our human rights.

People who are speaking

before me mentioned it already.

Thanks for that. I've organised

two webinars

to draw attention

to this topic in Germany.

It's a hot discussion, we can say.

We expressed our concern to be isolated

from people with disabilities.

Expressed their concern to be isolated

and stigmatized as risk groups.

In some institutions, as mentioned,

in Germany as well,

it's already prohibited to go outside.

This is clearly against the principle

of self-determination and the UNCRPD.

Together with German activists,

and politicians,

I started a petition against isolation

of risk groups.

I tried to bring it

to the German Bundestag.

I'm fighting at the level

of Member States.

Triage is what people

with disabilities are worried about.

In Germany, the situation in hospitals

is still good,

not comparable with the situation

in Italy or Spain.

However, the professional societies

for emergencies medicine

they already published

their triage recommendation.

Compared to Spain

and Italy of course...

...the situation it isn't

like in Germany.

Nevertheless factors

like priority count in assessments

which means indirect discrimination

of people with pre-existing conditions.

The German government doesn't want

to regulate,

that's what the minister

of Health Affairs said.

He doesn't want to regulate

any triage decisions.

So that, the white lies

on the illegal recommendations,

we organised a webinar

with the triage recommendations,

doctors, experts, professors, will try

to reassure the audience

that such decisions

will always be taken individually.

Nevertheless, the fear remains.

So, that's our fight here in Germany.

And we have to make it clear

on the European level

that triage or isolation

of people with disabilities

or diseases is against the UNCRPD.

Thank you.

CATHERINE: Thank so much you,

also for the detailed update

of what you're doing in Germany,

Katrin.

I'll give the floor if you are ready,

to another member of our intergroup,

Ms Rosa Estaras. Rosa, are you able

to put on your mic or camera?

MEP ESTARAS: Yes. Can you hear me?

CATHERINE: I can hear you

but you are a bit quiet.

MEP ESTARAS: Yes... Now?

Now is it good?

CATHERINE: I'm looking

at the sign language interpreter

to see if she can hear you enough.

MEP ESTARAS: Yes... I've put the sound

on maximum.

CATHERINE: I can hear you.

Is it okay for Lissa, the interpreter?

And for captioning?

MEP ESTARAS: I put the computer

Near me. Okay?

CATHERINE: I'll see if the captioning

and the sign language interpreter,

they are picking it up well.

Thank you so much.

MEP ESTARAS: Good afternoon.

I'd like to thank EDF,

especially Catherine for organising

this meeting.

And the main Spanish organisations,

CERMI and ONCE

with whom, I had various meetings

in the past weeks.

Despite the difficult situation

worrying from the homes

they're doing an great job attending

the rights for people with disabilities.

In this debate I'd like to highlight

four priority issues.

First of all, the corona virus crisis

has intensified discrimination

against people with disabilities

on equal access to healthcare.

In Belgium, people with disabilities

have been discriminated

in access to intensive care,

according to the guidelines adopted

for the selection of patients accepted

to intensive care.

These cases are a violation

of the principle of non-discrimination

set out in article 5 of the Convention

and it can't be repeated.

In fact, Ana Pelaez described

different cases in Europe.

As laid down in the joint resolution

adopted on Friday 17 April

we must ensure that all Member States,

without exception,

we guarantee access to healthcare.

Especially to non-discrimination

in access to intensive care.

Secondly, we must pay

particular attention

to the institutionalisation

of people with disabilities.

People living in institutions

or at higher risk of infection

and in many cases have not had

access to health services,

many facilities suffer

from a lack of staff

and find it necessary to meet

the protective measures for COVID-19.

Thirdly, I'd like to address the issue

of gender-based violence.

Ana has explained it as well.

In Spain we've suffered

an increase of cases

of gender-based violence,

which particularly affects girls

and women with disabilities.

During confinement it becomes

more difficult to file a complaint

or to ask for help, which is

why the situation has worsened.

That is why we must ensure

that the new forms adopted

for the reporting of gender violence:

direct chat, instant messaging,

new guidelines for action, etc.,

accessible to people with disabilities.

And finally, we should propose

a temporary increase

of the European Social Funds,

co-financing from 50 to 100

in the areas most affected

by the coronavirus.

These European Social Funds is

the key to guarantee

the employment of groups

which are at risk of exclusion

and to support the social entities

that care of them.

People with disabilities must be

a priority in this COVID-19 crisis.

now and in the recovery period,

where we'll have to face

terrible social

and economic consequences.

Now, more than ever we must fight

together to guarantee the rights

of people with disabilities

in the 27 Member States.

Thank you very much,

Catherine, again.

Thank you to all the members

of this seminar. Thank you.

CATHERINE: Thank you, Rosa,

for your intervention.

I'd like to give the floor now

to our next member of the Parliament

and also of our intergroup

Ms Chryssoula Zacharopoulou.

Perfect, I can see you.

I can't hear you.

Let's see.

Now I can see you.

but I don't have sound yet.

MEP ZACHAROPOULOU: Okay now?

CAHTERINE: Beautiful, perfect.

MEP ZACHAROPOULOU: Hello to everybody.

I'm very happy to see all of you.

All of you that organised

this beautiful meeting,

The Commissioner and all

my colleagues and friends.

Life is very strange.

Everything changed.

And who could believe we can speak

through the computer?

The importance is

that we have to continue

to be together and to respect

and serve democracy.

So, my, just a little bit.

I'll speak 1 minute,

just to say that I'd like to point out

an important point

that for me is the case

of women with disabilities.

Especially during this lockdown.

We currently see all

around the world,

in all the countries, an explosion

of domestic and sexual violence.

We know that the statistically,

disabled women are

already more exposed to violence.

So, all Member States,

my point of view is we need

to ensure assistance

that has to remain available to them

and to take additional strong measures

for their protection.

And of course more fund.

Some Member States have already taken

measures like France

but they need to include

a specific response about disability.

Just something else

regarding women with disabilities

and sexual and reproductive health

and rights.

We see now, that this period,

unfortunately,

women with disabilities lose

their autonomy

and they are unable to access

physical medical appointments

or to have access to tele appointments

with doctors or midwives.

We have an example:

the mental disabled women have

more difficulties to spot first signs

of unwanted pregnancy.

Disabled women are statistically

more often victim of rapes

and sometimes less educated

on contraception methods.

We have to take into account

specific assistance must be provided.

Of course we cannot wait

the period of the confinement.

And I think that we have to continue

to put

on the centre of attention

people with disabilities.

And I hope to all of you,

to be safe and healthy.

And I hope of course

to see you very soon in Brussels.

Bye from Paris.

CATHERINE: Thank you so much.

We all look forward to that moment

when we can see other again.

I'd like to give the floor

to MEP Marianne Vind.

Maybe coming to us

from Denmark?

MEP VIND: Yes I am.

CATHERINE: We hear you perfectly.

CATHERINE: I'll give you the floor.

MEP VIND: Thank you for your speeches

and all your great work.

My biggest concern right now

are the many people

who have lost their jobs

or are at risk of losing the jobs

during these difficult times.

We know people with disabilities

are vulnerable to lose their jobs.

Unemployment can trigger both

social exclusion and poverty.

This was already a big problem

before the corona crisis.

It does not however

take into account the needs

of people with disabilities to return,

to have access to the labour market.

I believe the Commission must propose

a new Disability Strategy post 2020.

And that it must include

the right to work

and to take active part

of the labour market.

We need the strategy

this year, not next year.

Our labour market needs to be adapted

to the needs of people with disabilities

and not the other way around.

I think in the Danish association

for physically disabled,

I'll try again, the Danish association

for physically disabled,

it sets a great example

with a new office space

and how to make work places inclusive

for everyone with disabilities

It's a wonderful building.

In the employment

and social affairs committee.

I hope that we'll succeed to put

pressure on the Commission

to push forward for a strategy

that also aims

for an inclusive labour market,

for financial recovery of Europe.

Thank you. I look forward to hopefully

see you again very soon.

CATHERINE: Thank you so much.

So, I think we have all warmed up

because all of the sound

has gone better as we went along.

We're over time but I wanted

to just mention

some of the questions and comments

that have come in from participants.

And give the opportunity

to for example members of parliament

to answer those before we'd go.

We have MEP Jose Gusmao

who will talk about follow up actions

from the Parliament

before closing remarks

from EDF president Yannis Vardakastanis

and MEP Tilly Metz.

This would only be a short period

of discussion, as I said,

we'll take note of the other questions

that have come in for...

...For the report on this meeting.

One thing I think to note

for the report on this meeting

is a comment from one of our colleague

from Finland Pirkko Mahlamaki

on how to count the number

of people with disabilities

who have died in institutions.

We had questions

about how people with disabilities

in sub-Saharan Africa will be supported

and what the Parliament can do on that.

So maybe on international cooperation,

one of the MEPs might make a comment.

There was the question

about statistics.

And how people with disabilities

are not counted.

A question for the commissioner

which we'll give to the services later

about how many staff with disabilities

in the European Commission.

We also have very specific question

about the situation

of people with assistance dogs

and how they are being treated

during the COVID-19 crisis.

We had questions

about the situation of carers.

Many MEPs have talked

about the commitment to ensuring

that within the work life

balance measures of the EU

there will be adequate support

to carers.

We had another comment which perhaps

MEPs won't be able to answer it.

It's worth mentioning

because it hasn't been mentioned yet.

There will be a delay

in the reporting to the CRPD Committee.

So, already the committee

was postponed

and it has been put in place

for August-September.

But as we see it may not be possible

for that committee to take place.

What will happen with the delay?

Could the EU provide facilities

for doing things online.

I think that maybe the MEPs

don't have an answer.

It's worth knowing that the monitoring

of human rights will be delayed

because of the committee

not being able to work.

We understand the committee is working

on individual complaints and comments

but not on country reviews.

We had the comment

from sight savers representatives

The World Health assembly's resolutions

on COVID-19 didn't mention

people with disabilities and this is

somewhere perhaps

members of parliament could lend

their support

to make sure the UN action,

the World Health Organisation

it would be inclusive of persons

with disabilities.

That I think was a lot of the content

of the questions which I saw.

I apologize if I missed something,

I promise when we're doing the report

we'll get to other things.

I just want to see

if anyone from the speakers

would like to respond on any of those?

I 'm looking in the chat box?

Or...

So, maybe, what I can do, if none

of the MEPs or speakers want to answer

It may be anyway better

for audience... I see a hand up.

It may be better for the audience

if we moved on

and replied in writing

to the different questions.

With that...

- Excuse me?

CATHERINE: Yes?

- I'm, Chrys.

CATHERINE: Wonderful, go ahead.

CHRYS: I wanted to speak about,

you spoke about Africa

and the people with disabilities.

CATHERINE: Yes.

CHRYS: I'm the rapporteur

for the new strategy

for the European Parliament,

Europe and Africa.

CATHERINE: Wonderful.

CHRYS: When I travel, I meet

people with disabilities.

And in the chapter for this

new strategy for the Parliament,

I think, no, I'm sure,

I'll write something

because there is, I met people

that of course they have difficult,

they live in difficult situations

but I met people with a lot of courage

so yes, it's part of the new strategy

that we have to underline

that people with disabilities

also in Africa, have the same rights.

CATHERINE: I'm delighted to hear

you are the rapporteur

from the Parliament

for that particular issue.

This is something the EDF

with the Africa Disability Forum

and DPO's in Africa will be happy

to give input on.

That's wonderful news. Thank you

for letting us know about that

and for responding on the question.

Is there anyone from the panellists

who would like to make a response?

Before I would... Give the floor to...

Jose Gusmao? I think with that,

I'll give you the floor Mr Gusmao.

Thank you so much for joining us

to talk

about the follow-up actions

from the Parliament.

I'll give you the floor.

Can you speak?

MEP GUSMAO: Hi, hope you can hear me.

Does it work?

CATHERINE: Yes.

MEP GUSMAO: Very quickly,

some action proposals.

Concerning the disability resolution

and the plenary session in May

the concerns about adding resolutions

to the session are related

to the fact that we have a bunch

of discharged files already being voted.

I think we should put pressure

around the Disability Strategy.

And we should point out

the COVID impact makes it

even more urgent to vote and approve

this resolution.

So that these citizens are not left

even more unprotected

as we have seen they are.

So, I think it'd be important

for the intergroup co-chairs,

the 5 co-chairs to send

a joint letter to the EP president

and the president of each group

calling for this file

to be included

in the plenary meeting.

Also because we have a strong consensus

in the committee about this file.

So we could have a quick vote

on it and it'd have a significant impact.

Also in the context of the strategy

because we do have to weigh in

all the effects of the COVID crisis.

I'd like to insist on the point

made by other MEPs,

that the necessary inclusion

of the COVID crisis

in this strategy has to be made

on the basis of systemic consultation

with organisations of people

with disabilities and to make sure

that this process starts

on the right foot.

On the Coronavirus response

investment initiative,

I think it'd be important to introduce

any remark for EU funding

from the investment initiative

specifically to support

community-based

disability support services.

This is sign language interpreters,

personal assistants and support people,

to support people with disabilities

in emergency and health settings.

It should be given a same health

and safety protection

as other healthcare workers

dealing with COVID-19.

I think it's important, taking

into account many of the reports

that activists and MEPs

have made here,

to have EU guidelines

for vulnerable groups.

In order, not for those groups

to be treated as groups,

but in order to be individually,

but correctly accompanied.

And I think, EU guidelines could,

the EU could create a set of experts

that could help Member States

to correctly address

the specific problems

of these communities.

Also, on income protection measures,

this is a very large topic

and linked to the economic response

to the COVID crisis.

In any case, whatever the responses

come to be,

it's important to address the issue

of income loss

for people with disabilities,

because they are affected

in a more serious way

by income loss due to unemployment,

layoff schemes

and we need to make sure

that these groups are protected

from those causes for income loss

as the economic crisis and....

(sound loss)

CATHERINE: We lost you there.

We had a perfect sound.

And then we lost you.

MEP GUSMAO: I received a call.

CATHERINE: Ok, you’re back.

It's very...I just rejected it.

It's important to get guidelines

also for medical assistance,

precisely to avoid what is going on

in some Member States

in access to healthcare

and also in protection measures

that are, well, that are objectionable

to people with disabilities rights.

Finally, I think on the negotiations

on the EU budget,

we know we're going to have

a brand new proposal for that.

I think it would be very important

for all the MEPs involved

in the debate in the Parliament

to strengthen

the support to deinstitutionalisation

and community-based services

on EU funds, increasing

EU budget provisions

and also to address accessibility

and non-discrimination

in all EU funding programmes.

On the equal treatment directive,

the COVID crisis poses a lot of issues

that would demand for the Council

and the Commission to break the blockade

that has been lasting

for 12 years on this issue.

And to begin applying it first

and foremost on healthcare services.

On accessibility, I'd like

to point out,

it was mentioned at least

by one person in this debate,

the importance of accessibility

on education,

also in remote education,

including tele learning.

Right now we have hundreds

of thousands of children

that are learning

through tele learning.

And it's important to ensure

that in all public programmes,

in all states that this is ensured.

On mobility, I think

this was also mentioned,

we must ensure that all decisions

taken on mobility,

do not treat persons with disabilities

as discriminated group

both by an uninformed perspective

on their being a risk group

but also not taking away

all the policies

related to... mobility barriers,

which are in many cases insufficient

but have to be accompanied.

Finally, which was also mentioned,

we should ensure

that all plans discussed for women

should consider women with disabilities

and programmes for people

with disabilities

should include a gender perspective.

I think I have just two final notes.

It's important

the disability intergroup has

so many MEP's from different groups

and committees.

It's crucial that all the files

that we're working on,

that can relate with the problems

of people with disabilities,

have specific provisions

for this community.

To give an example, I'm going to be

main rapporteur

in the employment guidelines report.

And it'll have a provision specific

to people with disabilities,

probably some files are being discussed

now to response to the COVID-19 crisis

that we have MEPs from this intergroup

working on.

It's important we can streamline

these problems in all of those files.

The second important point

that I'd like to make

it's for all MEP's to push

for a solidary response

to the economic crisis. We know

that all the good proposals

and good intentions

will amount to very little

if we don't have the financial means

to put them in practice.

and I know I can count on all MEPs

in this intergroup

to make the financial support happen

for all Member States.

Thank you.

CATHERINE: Thank you so much

for a summary for all the next steps

that can be taken

by the European Parliament

and give us also ideas where we need

to direct our cooperation

with the Parliament and the Intergroup

in the coming period.

So, I want to clarify one thing too

You mentioned all these activities

of course, many speakers have stressed

that the COVID-19 pandemic

which wasn't anticipated by any of us,

highlighted all of the areas

which are important for persons

with disabilities in Europe,

stigma, inaccessibility,

discrimination, poverty,

lack of access to services,

problems with inclusive education,

gaps in social protection...

All these things.

And as the Commissioner for Equality

mentioned, there is foreseen

the adoption of a strengthened

European Disability Strategy next year.

It was asked during this call why

it wasn't on the programme this year.

We know the Commission is working

on it actively this year

and it'll be included

in the work programme next year.

This will all give us more opportunity

to input with very important data

the situation of people

with disabilities in Europe to inform

the Commission's next strategy.

I just wanted then, give the floor

for closing remarks.

I promised we're nearly coming

to the end.

So I was first going to ask

Yannis Vardakastanis,

the president of EDF to retake

the floor for some closing remarks.

Nice to see you, Yannis.

YANNIS: Thank you Catherine.

CATHERINE: Perfect, we can hear you.

YANNIS: Thank you for organising

this very important debate today.

You and your colleagues.

And all the members

of the Disability Intergroup bureau.

There is no question that historically

this period draws a line

between, before the crisis

and after the crisis.

Socially, economically, financially,

politically, hygienically.

The aftermath will be

completely different.

Return to the realities

before the crisis

it will be difficult

if not impossible.

Therefore, whatever we do,

whatever we say,

from the institutions,

from the disability movement,

it should be aiming to be

useful and not pleasant.

And that means that we cannot address

the reconstruction

in my opinion,

not the recovery period.

The reconstruction of the EU,

of the societies and economies,

in a way that it is inclusive,

inclusive of all.

Otherwise the European project

will fail. It'll fail completely.

And all of you know

that I'm politically European.

And the disability movement is

a very pro-European movement.

We have fought for this

all Member States.

And from this important meeting today,

I'd like to send a strong message.

Throughout the Union,

to the leaders of the institutions,

to the heads of the Member States.

To all.

The disability movement

will be, is already,

on a continuous advocacy campaign.

Because now we're not dealing

with a financial crisis as before.

We're dealing with a crisis

that we lose people. People die.

And those that die need

to be justified in the future.

That they bring a real change,

even with their deaths,

to societies for persons

with disabilities.

We need a very robust approach.

From the institutions.

We need a European Disability Strategy

that will make the difference

in my opinion, there is

no justification

for not including

the European Disability Strategy

in the programme of the Commission

this year.

After all, COVID-19 has changed

the programme of the Commission.

Therefore, all the initiatives

that are taken

for the reconstruction period

should include

persons with disabilities

in the funding,

in the political,

in the social approach.

We need a very strong

disability rights guarantee.

We need a complete outlook

of funding institutionalisation

through the structural funds.

We need a strong disability strategy

with focal points.

As we have argued for so long

and now we see how we miss them.

In the Commission, in the Parliament,

in the Council,

in the other agencies of the Union.

And of course, we need a Union

that is mindful of all citizens.

That cares.

The Commission should include

immediately in the COVID-19 task force

Commissioner Dalli

and Commissioner Schmidt.

How come the Equality Commissioner

and the Social Affairs Commissioner

they are not members

of the task force?

The Commission should take initiative

towards the Member States.

Letters are good, but letters

don't guarantee rights.

They need to take

initiatives now.

The Parliament has to take

initiatives now.

The political groups in the Parliament

should ask their governments

in the Member States to be

very active in the Council,

supporting a new robust approach

to disability rights.

We have lost people.

We should never forget this.

This is situation hasn't happened

after the Second World War.

We have lost people.

We're losing people.

People are dying.

We should never forget this.

I guarantee as long as I am president

in the EDF

that this will never be forgotten.

Thank you.

CATHERINE: Thank you

for your closing remarks, Yannis.

I'd like to give the floor

to MEP Tilly Metz from Luxembourg

who will give closing remarks

on behalf of the Intergroup.

She is also a member of our bureau.

Just waiting, yes, I can see you,

perfectly.

MEP METZ: Can you hear also?

CATHERINE: I can hear you. Thanks.

I'm trying to be short because I know

we're over time. So, I'm going ahead.

Dear colleagues, dear friends

from the European Disability Forum.

On behalf

of the Disability Intergroup bureau,

thank you to all the participation

of today's meeting.

I'm sure all my colleagues MEPs

and the intergroup secretariat

they've taken a lot of notes.

I have taken four pages.

The president of EDF said it,

it's a historic moment.

It's now that we have to decide

the direction we're going to take

from now on the society that we want

afterwards.

We have heard about a lot

of dreadful situations

of large residential institutions

which became a hotspot of infection

and death with no resources

and no help from public authorities.

I remember one situation

of Romania which was told

where the staff was told to leave

the people alone.

And that they'd get tested,

but not the people with disabilities.

All the persons and also persons

with disabilities

in these institutions

were often forgotten,

we have heard it, and left

on their own.

We must no longer push

persons with disabilities

to live

in these large residential centres.

We must invest EU funds in supporting

independent living

and community-based services,

but even there

we've heard from our colleague

from France, Albert Prévos

who told us that even people who live

on their own at home

they didn't get the home help,

the recurrent help they need.

Also there were problems.

Recovery plans must also reflect

this paradigm shift

by supporting the services

and the living conditions

of persons with disabilities.

We've spoken a lot in the Parliament

about the Green deal

and Green deal that has to come

and the digitalisation challenges.

But we should never forget

that we also need,

this crisis showed it, a more accessible

and inclusive society.

We really have, I point out

a few points

that we have

for the next sanitary crisis.

Of course we have to try

to prevent another crisis.

Let's be realistic. I think we have

to have an action plan

especially for people

with disabilities.

So that we have

the more inclusive approach

that they have access

to treatment, to care.

But also we heard from the colleagues

they need to have access to goods.

They need to have access

to psychological support.

We have some of my colleagues,

they mentioned also the violence

and the harassment

against women with disabilities.

And women with disabilities

are also in socio economic problems.

Another problem is coming there.

We need also to have good access

and my colleagues were telling,

a good access to information,

but not only people with a disability

need good access to information.

Also the professionals. We heard

my colleague Jose Gusmao,

speaking of the EU guidelines

for the people.

And then, there was

another important topic,

children with disabilities

and it was mentioned several times

that they also need to have a right

to education online.

so the gap between the other children

doesn't get bigger.

So, we also have

in this terrible crisis,

one of the conclusions we can make

as well is the urgent need

for anti-discrimination legislation

in the EU.

Today we heard about cases of persons

with disability being deprioritized.

Directly denied the necessary health

because of their disability.

This is absolutely shameful

for the European Union.

And I hope events like this,

so important,

they can bring us all together

to make this unavoidable.

And also in the future.

I was happy about some events

also some future actions,

the Commissioner Dalli was taking.

She spoke about the Equality person

who is there in every DG.

She spoke about the importance

of the dialogue and her commitment

in order that things are changing.

A lot of the colleagues, Jose Gusmao

also said at the end,

the importance of a strong post 2020

Disability Strategy

and that we should vote

the resolution in May.

Another important issue.

I want to tell it again

because it's an important issue,

the funding.

A lot of my colleagues, also

from Lithuania said,

now that we're doing some efforts

into more inclusive society,

let's not cut off the funding

on services for people with disabilities.

Another colleague mentioned

also the risk of losing their jobs

and getting into more exclusion

and poverty.

And then this important idea

was mentioned by several people

also the task force now

for the post COVID period

that there has to be people

with disabilities

in the expert committees

and task force.

Let me remind you

a very important initiative

of my colleague Katrin

who was pointing out

the problem in the lockdown period

in the exit of the lockdown,

that we shouldn't categorize people

and pushing them

into even more isolation

of the risk groups.

We can't categorize people

and speak in general.

It's something we have

to speak with the people

and not over their heads

by generalising like that.

The Disability Intergroup will keep

on advocating,

but not only advocating, also fighting

for a change of direction

that brings persons with disabilities

on an equal basis with others.

And also that recognizes

the special needs.

We already appreciate very much

all of your help

by bringing to the EU debate

your experiences,

also interesting the information

we got from the different countries.

But we need more. We need to do

an evaluation, assessment,

and a debriefing what all

we have learned from this crisis,

concerning especially the situation

for persons with disabilities.

And we do as Intergroup

the commitment as an intergroup,

to keep involving you

in all the measures

and all the policies that affect also

people with disabilities.

Once again, I wanted to be sure,

thank you very much

for the participation

and all your work.

Before concluding, I'd like to thank

the sign language interpreters.

They did a great job and now

for a long time already,

to the live captioner and also

the secretariat of the Intergroup

and their very important support,

also for organising.

Thank you to all and stay safe.

Thank you very much.

CATHERINE: Thank you

for your closing words.

And, you have already given

thanks to everyone

who helped us organise

the meeting.

And I wish everyone a good evening.

As I said, we'll put a report

of the meeting

on the website

of the Disability Intergroup.

We'll look at the extra questions

to respond them.

We appreciate your participation,

your questions, and we look forward

to take the next steps together

with the Intergroup,

all of the members and partners.

We'll end there.

Thank you very much.