

Letter to the EU Foreign Affairs Council

For a disability-inclusive EU development cooperation response to the COVID-19 pandemic

We are writing to you on behalf of the International Disability and Development Consortium concerning the upcoming video conference of the Foreign Affairs Council (Development) on 8 April, to highlight the importance of a disability-inclusive EU development cooperation response to the COVID-19 pandemic.

We fully support the broader statements of the International Disability Alliance and their member the European Disability Forum with regards to the inclusion of persons with disabilities within COVID-19 messaging and non-discrimination in treatment protocols¹, in line with the Convention on the Rights of Persons with Disabilities (CRPD).

Persons with disabilities in middle-income and least developed countries will likely be disproportionately affected not only by the pandemic but also by the immediate implications and the longer-term consequences of the social and economic measures implemented to contain the pandemic. It is vital to stay in solidarity and to not lose sight of the ambition of Agenda2030, with its core principle to Leave No One Behind.

We are calling on the European Union to:

- 1. Ensure that the EU global response plan to the COVID-19 pandemic and subsequent programmes are firmly grounded in the rights frameworks, including the Rights of Persons with Disabilities.** The EU must prevent discrimination, in any forms, made on the ground of disability, health conditions,

¹ <http://www.internationaldisabilityalliance.org/content/covid-19-and-disability-movement>

gender or age; and denounce situations firmly when discrimination would happen.

2. Ensure that the EU global response plan is **comprehensive and creates synergies and collaborations** across health, social protection, WASH, education, livelihoods and other sectors, with the consistent goal to reach out to the most marginalised and deprived groups, including persons with disabilities.
3. **Allocate adequate and additional funding** to the EU global response plan, as redirecting current funding only would be insufficient and detrimental. Within this, earmarking of funds to support the inclusion of people with disabilities and other marginalised groups.
4. **Ensure and support the meaningful participation of Organisations of Persons with Disabilities (OPDs) and partner NGOs**, in the design, implementation, monitoring and evaluation of local COVID-19 response programmes. This will help guarantee that persons with disabilities are included in all measures taken to prevent the virus spread and the subsequent consequences of the pandemic. OPDs play an essential role in advocacy at all levels and are conduits for sharing awareness messages to their constituencies.
5. Commit that **the rights-based approach will be maintained in any interim/revised proposal relating to the MFF** in general, and external funding instruments in particular. Such an approach requires us to look at discrimination and marginalisation (including intersectional discrimination) to ensure no one is left behind and that we can achieve inclusive development.
6. **Look beyond the immediate** and link responses that progressively move from short-term emergency response to systemic, sustainable changes and build community resilience.

Development Cooperation

7. To make full use of a twin-track approach to both ensure that disability inclusion is mainstreamed throughout all COVID-19 response efforts as well as targeted actions and programmes to **support their livelihoods and access to essential services** in these difficult times.
8. **Enhance inclusive health response and social protection programmes at national and community levels**, to protect persons with disabilities from health risks related to COVID-19 and further socio-economic marginalisation.
9. Support partner countries to **strengthen their health systems, to provide universal access to health services** without discrimination and social protection or other cash transfers that reach those most in need/vulnerable.

10. Support partner countries to ensure **services that are essential to the health, wellbeing and livelihood of persons with disabilities are in place and meeting their needs.**
11. In case of interruption of social support services due to social isolation, support partner countries in putting in place safe and quality **alternative services** (e.g. volunteers, social network, humanitarian actors) **and use of technology** to ensure the basic needs and rights of persons with disabilities are met.
12. Support **production and dissemination of accessible information on COVID-19.**
13. Ensure the **provision of protective materials (e.g. masks) to all service providers supporting persons with disabilities**, such as personal assistants, social workers, interpreters, volunteers or family members.
14. Support partner countries to **expand their social protection services to respond to the effects of COVID-19** on the global, local and national economy. Specific protective measures and support services should be put in place or reinforced to ensure that the most vulnerable groups can meet their needs.
15. Ensure the **continuum of quality and inclusive education during and beyond this crisis**, allocating adequate resources for this, notably for the **provision of alternative, accessible education during school closures** that provides reasonable accommodations based on individual needs. Specific measures should also be put in place to encourage children with disabilities to go back to school and prevent permanent dropouts after the crisis ends.
16. Prepare **targeted economic empowerment strategies, and cash transfer** programming for the most vulnerable groups, to mitigate the socio-economic impact of the pandemic, towards recovering and building resilience for future shocks.

Humanitarian

17. **Refer to the IASC Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action**, as well **WHO considerations on disability during the COVID-19 outbreak**, to ensure the rights and needs of persons with disabilities are met in the UN Global humanitarian response plan COVID-19² and other operational plans.
18. Support studies on gender, disability and COVID-19 to ensure service providers and other relevant stakeholders have a deep understanding of COVID-19 gender

² <https://reliefweb.int/sites/reliefweb.int/files/resources/Global%20Humanitarian%20Response%20Plan%20COVID-19.pdf>

and disability-related impact. They can design and implement evidence-based policies and programs tailored to address the needs of women and girls with disabilities and the direct and indirect consequences of COVID-19 on their health and wellbeing, education, and livelihood.

19. **Facilitate timely and safe access to humanitarian assistance** and protection to support populations in need and to mitigate the spread of the virus, including by **facilitating the movement of goods and humanitarian personnel staff**; humanitarian workers should be considered as essential personnel to respond to the crisis.
20. **Take all measures to protect humanitarian aid workers** to allow operational reactivity.
21. Provide **immediate flexibility on funds already available and additional funding** to humanitarian organisations to ensure that existing humanitarian operations can rapidly scale up and adapt their operations to the risks posed by COVID-19.