Dear Ministers,

The devastating consequences of the coronavirus pandemic confront us with an unprecedented challenge across the European Union and the world. It is disrupting our lives and way of living, our societies and has important consequences for the global economy.

The Commission’s priority is to protect the health and wellbeing of all EU citizens and to work on all fronts to stop the spread of the virus in the EU and globally. In these challenging times, more than ever, we need to be particularly attentive to the most vulnerable people of our societies, who are severely exposed to risks and need particular support. We must also ensure that the fundamental EU values of equality and non-discrimination are as strong as ever.

We offer our support in your efforts to ensure that the emergency response measures also take into account those vulnerable groups. Our services are ready to assist in exchanging good practices on how to address their specific situations. A number of innovative practices are currently being put in place in various Member States – these can also be applied elsewhere.

As for the most vulnerable groups, we would like to draw attention to older persons, persons with disabilities, persons in confinement with abusive partners, LGBTI persons, Roma communities and the homeless.

Older persons are one of the most vulnerable groups affected by COVID-19. Those in residential care facilities are particularly at risk of infection and those who live alone can be subject to isolation and lack of access to necessary services. Additionally, older persons, who rely on social services such as the delivery of meals or help with daily care, are at risk where services have shrunk, are not provided under the necessary sanitary conditions or are no longer provided at all.

We have seen an unprecedented wave of solidarity across Europe, a number of volunteers helping with delivering of health and other services to vulnerable persons, in particular to the elderly. Still, it is our task, as public authorities, to ensure the necessary services.

Particular attention is also needed in terms of ensuring that for persons with disabilities information about COVID-19 is accessible, both about the situation and about personal care and services available, including through accessible and easy-to-read format, sign language interpretation and on-screen captioning.

We encourage you to ensure that all public announcements on COVID-19 reach all members of society. I also urge you to ensure that emergency numbers related to COVID-19 are made accessible or that alternative solutions are available.

No one requiring healthcare attention due to COVID-19 should be deprioritised on the basis of their disability or age. Furthermore, some persons with disabilities depend on carers and personal assistants, some at home, some in residential settings. Ensuring continuity with an increased health protective approach of those services should be a priority.

Women, men and children who are isolated at home with abusive partners or family members are particularly at risk due to lockdown measures. The confinement can increase means of coercive control by abusers and incidents of physical, psychological, economic and sexual violence and neglect. Isolated victims have fewer possibilities of seeking help. It is therefore important to ensure effective access to on-line and off-line support services, including shelters and other social services, and that they are protected from further violence in case of need.

We encourage you to keep shelters and emergency housing available to all women and children who need to get out of their homes for protection, and to facilitate access to these services.

LGBTI persons may require protection against domestic violence and homo or transphobic abuse by their parents or housemates following the introduction of lockdowns and measures to stay at home. Homelessness, underemployment and a perceived need to hide are also more prevalent among members of the LGBTI community and they may incur risks for themselves and others.

Roma communities usually live in high population density environments. Several factors, such as untreated and chronic diseases, poor sanitary aid, lack of drinking water, limited access to health services, lower awareness of hygiene, underemployment and lack of social benefits, and frequent migration put these communities at a greater risk of exposure to the potential rapid spread of the virus.

I draw your attention to the importance of the availability of food and drinking water for all, as well as delivery of key sanitation products and medicines. This entails using field workers and medical mediators working in these communities to deliver safely the much-needed support.

The COVID-19 crisis is exacerbating pre-existing racial inequalities in our societies with far-reaching consequences. Due to stigma, stereotypes and racial discrimination, persons with a race minority background (particularly persons with African, Middle Eastern and Asian descent), asylum seekers and undocumented persons are encountering additional challenges during these trying times.

Extra effort should be invested in reaching out to minority individuals to ensure that they have access to the best information about COVID-19, and to society at large to ensure that hatred against racial minorities is not spread in the context of the crisis.

The different risks identified above are typically compounded when linked to economic hardship or homelessness. Therefore, last but not least, we would encourage you to draw particular attention to those who are homeless. It is indeed impossible to maintain home confinement when you do not have a home, and even the ability to take the necessary personal hygiene measures, such as hand washing, can be a challenge. Moreover, people living on the street often already have pathologies and experience mental health issues. We invite you to address the challenges the protection of mental and physical health of people experiencing homelessness.

The Commission is using all the tools at its disposal to coordinate the response to COVID-19, providing financial support and technical support to Member States. We adopted the first “Coronavirus Response Investment Initiative” (CRII) of €37 billion already on 13 March. This initiative will allow mobilising available cash reserves from the European Structural and Investment Funds to fight the crisis immediately. You have recently received our guidance1 on the Initiative.