



08.12.2021

NOTICE TO MEMBERS

Subject: Petition No 0865/2018 by Kapka Panayotova (Bulgarian) on behalf of the Centre for Independent Living on the use of the European Structural and Investment Funds in Bulgaria

1. Summary of petition

The petition concerns the planned use of the European Structural and Investment Funds (ESIF's) for building group homes for people with disabilities and for elderly people. Such group homes are a part of the Bulgarian Government's efforts to deinstitutionalise the long-term care system, thus fostering the independent living of people with disabilities and the elderly, and their genuine inclusion and participation in society. The petitioner, however, is concerned that even though such group homes may gradually lead to the closure of traditional institutions, they are unlikely to end the segregation and exclusion of people with disabilities and elderly people in the society. In that regard, the petitioner suggests an alternative of using EU funds for purchasing flats in existing blocks of flats/houses and providing more individualised support. The petitioner requests the European Parliament to call upon the Commission to ensure that Bulgaria uses EU funds to support the social inclusion of disabled people in line with the country's EU and UNCRPD obligations. This requires the adoption of a strategy and a plan for long-term care (deinstitutionalisation), which prioritises the provision of accessible and affordable housing (not congregated) and non-residential support in community, including personal assistance. The petitioner also suggests the development of a methodology for evaluating Member States' deinstitutionalisation strategies that takes into account the CRPD and evaluates the Member States based on the outcomes for the individuals concerned, as regards their social inclusion and community participation.

Information

– The petition was submitted by the Centre for Independent Living (CIL) - a Bulgarian non-profit organisation of disabled people and supported by the Bulgarian Helsinki Committee, the European Network on Independent Living (ENIL) and the Validity Foundation; concerns about the use of ESIFs have been expressed by the Council of Europe's HR Commissioner and the CRPD Committee.

2. Admissibility

Declared admissible on 17 December 2018. Information requested from Commission under Rule 216(6).

3. Commission reply, received on 29 March 2019

Both the European Union and Bulgaria ratified the United Nations Convention on the Rights of Persons with Disabilities (UN CRPD) and thus committed to implement the Convention including its Article 19, on the right to independent living and being included in the community. The shift from institutional to community-based care, often called 'deinstitutionalisation', is a complex process that needs to be accompanied and complemented by integrated interventions in social services, health, housing, employment and education.

Within this framework, the Commission supports Member States' efforts for ensuring the transition from an institutional setting towards community-based arrangements, individualised support and adequate housing. Nevertheless, in accordance with their competences, the Member States are responsible for the design and implementation of dedicated strategies pursuing the ultimate goal of independent living and inclusion in the community. Furthermore, the Commission does not hold responsibility for monitoring the implementation of the UN CRPD within the Member States. This is of the responsibility of the national mechanisms put in place for ensuring this monitoring.

The European Structural and Investment Funds (ESI Funds) Common Provisions Regulation (EU) 1303/2013¹ includes two ex-ante conditionalities relevant for the transition from institutional care to family and community-based care for the Member States:

- (i) General ex-ante conditionality 3 on disability requires Member States to have administrative capacity to implement and apply the UNCRPD in the field of ESI Funds in accordance with Council Decision 2010/48/EC². Member States must in this regard have arrangements for the consultation and involvement of organisations working on the protection of rights of persons with disabilities throughout the preparation and implementation of all ESI Funds programmes. There should also be arrangements for training of staff of the managing authorities in the fields of applicable Union and national disability law and policy, and to ensure monitoring of the implementation of Article 9 of the UN CRPD (on accessibility) in relation to ESI Funds.

¹ Regulation (EU) No 1303/2013 of the European Parliament and of the Council of 17 December 2013 laying down common provisions on the European Regional Development Fund, the European Social Fund, the Cohesion Fund, the European Agricultural Fund for Rural Development and the European Maritime and Fisheries Fund and laying down general provisions on the European Regional Development Fund, the European Social Fund, the Cohesion Fund and the European Maritime and Fisheries Fund and repealing Council Regulation (EC) No 1083/2006, *OJ L 347*, 20.12.2013, p. 320–469.

² Council Decision of 26 November 2009 concerning the conclusion, by the European Community, of the United Nations Convention on the Rights of Persons with Disabilities, *OJ L 23*, 27.1.2010, p. 35–36.

- (ii) Ex-ante conditionality 9.1 addresses activities that support the transition from institutional care to family and community-based living. According to this conditionality, Member States must have in place and implement a national strategic policy framework for poverty reduction, aiming at active inclusion of people excluded from the labour market. In this context, Member States need to have a policy in place that: provides a sufficient evidence base to develop policies for poverty reduction; contains measures supporting the achievement of the national poverty and social exclusion target; involves relevant stakeholders in combating poverty; and, for Member States with an 'identified need', it must include measures for the shift from institutional to community-based care.

The regulatory framework for ESI Funds, adopted by the co-legislators, requires that the ex-ante conditionalities are assessed at the moment of submission of the partnership agreement and operational programmes. Bulgaria fulfilled the criteria for the general ex-ante conditionality 3 on disability by adopting an Action Plan³ containing measures that ensure Bulgarian legislation and policies for people with disabilities are in accordance with the provisions of the UN CRPD. The authorities committed to take effective steps for its implementation and to increase the capacity of local, regional and central government. As regards ex-ante conditionality 9.1, Bulgaria fulfilled the criteria by implementing its strategy policy framework for poverty reduction and active inclusion⁴.

In this context, Bulgaria has developed and implements the deinstitutionalisation reform for children based on a comprehensive strategic framework⁵, as well as a National Strategy for long-term care covering deinstitutionalisation for people with disabilities and older people⁶ (Long Term Care Strategy) and the Action Plan for its implementation for the period 2018-2021 (Action Plan 2018-2021)⁷.

The European Social Fund (ESF) Regulation (EU) 1304/2013⁸ supports the transition from institutional to community-based care, in particular in two investment priorities, notably 9.i on active inclusion; and 9.iv on enhancing access to affordable, sustainable and high-quality

³ Bulgaria, Council of Ministers (2015), Action Plan of the Republic of Bulgaria on the Implementation of the UN Convention on the Rights of Persons with Disabilities (2015 – 2020) (План за действие на Република България за прилагане на Конвенцията за правата на хората с увреждания (2015–2020)), Council decision No. 467, 25 June 2015.

⁴ Bulgaria, Council of Ministers (2013), National strategy for reducing poverty and promoting social inclusion 2020 (Национална стратегия за намаляване на бедността и насърчаване на социалното включване 2020 г.), Council decision No. 5.1, 6 February 2013.

⁵ Bulgaria, Council of Ministers (2010), National strategy 'Vision for deinstitutionalisation of children in Bulgaria (Национална стратегия „Визия за деинституционализация на децата в Република България“), Council decision No. 8, 24 February 2010 and two action plans for its implementation, the current one covering the period 2016-2020.

⁶ Bulgaria, Council of Ministers (2014), National strategy for long-term care (Национална стратегия за дългосрочна грижа), Council decision No. 2, 7 January 2014.

⁷ Bulgaria, Council of Ministers (2018), Action plan for the period of 2018-2021 for implementation of the National strategy for long-term care (План за действие за периода 2018-2021 г. за изпълнение на Национална стратегия за дългосрочна грижа), Council decision No. 28, 19 January 2018.

⁸ Regulation (EU) No 1304/2013 of the European Parliament and of the Council of 17 December 2013 on the European Social Fund and repealing Council Regulation (EC) No 1081/2006, *OJ L 347*, 20.12.2013, p. 470–486.

services. According to Article 5 of the European Regional Development Fund (ERDF) Regulation (EU) 1301/2013⁹, this Fund could also support investments in health and social infrastructure and promoting social inclusion through the transition from institutional to community-based services.

Each Member State could propose different types of services, based on impact assessment and analysis of the situation and the assessment of the needs of the population at risk of institutionalisation, the availability of services in the community (e.g. the number and range of services provided in the community (including preventive services); the financial, material and human resources needed, etc. A general requirement for the proposed measures is that they are part of a strategic vision on how the transition from institutional to community-based care will be implemented. The size of the institution cannot be used in isolation as a criterion to judge whether the supported infrastructure can be considered as community-based service or simply a scaled-down institution. The starting point should be whether it provides a setting allowing for the possibility for independent living, inclusion in the community (including physical proximity of the location) and high-quality care.

The Long Term Care Strategy and the Action Plan 2018-2021 are the strategic framework which envisage a gradual transition of elderly and people with disabilities from specialised institutions and delivery of quality and accessible services in line with the individual needs. A relevant number of organisations took part in the public consultation and were involved in the working groups drafting the Action Plan 2018-2021. The support by ESI Funds complements national funding to address the challenges identified in these documents. This strategic framework presents in a coherent way the relationship between the new small settings and the complementary individual social services' support for the users.

In the assessment of the partnership agreements and operational programmes of the Member States, the Commission ensured that the type of actions to be supported (including the support of the transition from institutional care to independent living community-based services) is compliant with the relevant provisions of the international conventions. Special attention was paid to the evidence that the underlining national strategies were consulted with all relevant stakeholders including the equal treatment bodies.

Furthermore, for the implementation of the operational programmes themselves, in line with the partnership principle for all ESI Funds (Article 5 of the CPR), the Commission requested that a representation of the relevant stakeholders is included as partners in the programming and monitoring of the operational programmes. Those stakeholders are allowed to take part in the decision-making and monitoring processes through their participation in the monitoring committees of the respective operational programmes and could take part in the definition of the selection criteria of the operations to be supported. In the specific case of Bulgaria, non-governmental organisations representing people with disabilities are part of the monitoring committee of the operational programmes and in this capacity could participate in the exercise of the functions defined by the Article 110 of the CPR. The relevant stakeholders can, during

⁹ Regulation (EU) No 1301/2013 of the European Parliament and of the Council of 17 December 2013 on the European Regional Development Fund and on specific provisions concerning the Investment for growth and jobs goal and repealing Regulation (EC) No 1080/2006, *OJ L 347*, 20.12.2013, p. 289–302.

the implementation of the operations, monitor the quality and effectiveness of provided services in the new settings via the procedures in place and in the framework of foreseen evaluations to be carried in the future.

The ERDF Operational Programme “Regions in Growth” has earmarked more than EUR 43 million directly for deinstitutionalisation. The call for proposals published in 2018 included family size homes for disabled children as well as for elderly people who need special care, as well as day care centres for people living with their families but in need of a caring environment during the daytime. The Programme also provides for other investments that are conducive to deinstitutionalisation in various ways such as social housing, which amongst others could be used for initiatives towards independent living; and social infrastructure, which is not specifically directed at independent living, but supports such initiatives.

At the same time, the ESF Operational Programme “Human Resources Development” invests approximately EUR 142 million in development and delivery of various new social services. Among them the most relevant services are delivered at day-care centres for people with severe disabilities; day-care centres for people with dementia; centres for social rehabilitation and integration of people with mental disorders; centres for care of people with psychic disorders; in centres for care of mentally retarded people; and in centres for the elderly.

All these services aim to promote social integration and independent living according to the specific needs. As evidenced from the Map of Services under the Action Plan 2018-2021, funding of infrastructure will be complemented by service delivery and the coherence is also supposed to be ensured at territorial level.

In the Commission’s proposal for a Common Provisions Regulation for the Cohesion Policy Funds for the period 2021–2027¹⁰, the process of the transition from institutional/residential to family and community-based care services will be further enhanced including through the implementation of a set of relevant enabling conditions. The draft proposal contains an enabling condition 4.3 that requires the creation of a national strategic framework for poverty reduction and social inclusion, including “measures for the shift from institutional to community-based care”. Furthermore, according to this legislative proposal, the enabling conditions will be subject to continuous monitoring by the Commission not only until they are fulfilled but throughout the programming period.

According to the proposed Regulation for the European Social Fund Plus (ESF+)¹¹, this fund will support “specific targeted actions (...), including the transition from residential/institutional care to family and community-based care” (Article 6.2).

The shift away from institutional care is a complex process, which has to be accompanied by the development of adequate alternative social and healthcare services and infrastructures. The Commission is committed to support progress towards deinstitutionalisation using

¹⁰ COM(2018) 375 final.

¹¹ COM(2018) 382 final.

different funds to provide a comprehensive approach, encompassing different aspects of the complex process of deinstitutionalisation.

Conclusion

This overview shows that from the Commission's point of view, the current ESI Funds investments in Bulgaria are contributing to the deinstitutionalisation, making independent living possible in Bulgaria, while also providing options for those persons for whom fully independent living is not a feasible option. The transition from institutional to community-based services needs to effectively combine new infrastructure projects with different types of social services, including personal assistance. The Commission is committed to continue supporting the Member States in their efforts to fully achieve the transition to community-based care for people with disabilities and elderly ensuring independent living in the framework of its competences also in the next programming period beyond 2021.

4. Commission reply (REV), received on 8 December 2021

Member States and the EU are committed to promoting the transition from institutional to community-based care, in line with the UN Convention on the Rights of Persons with Disabilities (UNCRPD) ratified by the EU and all its Member States, the [UN Convention on the Rights of the Child](#), the [European Convention on Human Rights](#) (ECHR) and the Charter of Fundamental Rights of the EU as interpreted in light of the ECHR case law. Member States are responsible for the design and implementation of national strategies to implement the UNCRPD, including its article 19 on independent living, and have also regular dialogues with the UN Committee on the Rights of Persons with Disabilities.

The EU supports Member States' efforts for deinstitutionalisation. It featured in the [European Disability Strategy 2010-2020](#)¹² and is a very important part of the Strategy for the Rights of Persons with Disabilities 2021–2030¹³. It is a tool to implement the UNCRPD at EU level and recognises that persons with disabilities, have an equal right to live independently and be included in the community, with choices equal to those of others about their place of residence and with whom and how they live. The Strategy announced two flagship initiatives.

The Commission will, by 2023, issue guidance recommending to Member States improvements on independent living and inclusion in the community, in order to enable persons with disabilities to live in accessible, supported housing in the community, or to continue living at home (including personal assistance schemes).

Building on the existing voluntary European Quality Framework for Social Services, the Commission will present, by 2024, a specific framework for Social Services of Excellence for

¹² Communication from the Commission: European Disability Strategy 2010-2020: A Renewed Commitment to a Barrier-Free Europe, [COM/2010/636 final](#), 15.11.2010.

¹³ Communication from the Commission on 'Union of Equality: Strategy for the Rights of Persons with Disabilities 2021-2030', COM/2021/101 final, 3.3.2021.

persons with disabilities, to improve service delivery for persons with disabilities and to enhance the attractiveness of jobs in this area including through upskilling and reskilling of service providers.

Moreover, the Commission calls on Member States to implement good practices of deinstitutionalisation in the area of mental health and in respect of all persons with disabilities, including children, to strengthen the transition from institutional care to services providing support in the community, to promote and secure financing for accessible and disability-inclusive social housing, including for older persons with disabilities, and address challenges of homeless persons with disabilities.

The Council recommendation establishing a European Child Guarantee specifies that “quality community-based or family-based care should be promoted. Placing children in institutional care should be done only and when it is in the best interests of the child, taking into account the child’s overall situation and considering the child’s individual needs. Providing support to children who leave institutional or foster care is crucial to support their independent living and social integration”¹⁴.

All this requires reinforced action and the Commission has supported and will continue to support national, regional and local authorities in their efforts for deinstitutionalisation, via the 2021-2027 shared management funds, the Renovation Wave, the Renovation Component of the Recovery and Resilience Plans, and the Technical Support Instrument.

In the programming period 2014-2020, the European Structural and Investment Funds (ESI Funds) Common Provisions Regulation (EU) 1303/2013¹⁵ (CPR) included two *ex-ante* conditionalities relevant for deinstitutionalisation for the Member States:

1. General *ex-ante* conditionality 3 on disability required Member States to have administrative capacity to implement and apply the UNCRPD in the field of ESI Funds.
2. According to thematic *ex-ante* conditionality 9.1, Member States had to have depending on identified needs in place and implement a national strategic policy framework for poverty reduction, including measures for the shift from institutional to community-based care.

The *ex-ante* conditionalities were assessed when the partnership agreement and operational programmes were submitted. Bulgaria fulfilled the criteria for the general one by adopting an Action Plan¹⁶ containing measures that ensured Bulgarian legislation and policies for people

¹⁴ Council Recommendation (EU) 2021/1004 of 14 June 2021 establishing a European Child Guarantee, OJ L 223, 22.6.2021, p. 14–23.

¹⁵ Regulation (EU) No 1303/2013 of the European Parliament and of the Council of 17 December 2013 laying down common provisions on the European Regional Development Fund, the European Social Fund, the Cohesion Fund, the European Agricultural Fund for Rural Development and the European Maritime and Fisheries Fund and laying down general provisions on the European Regional Development Fund, the European Social Fund, the Cohesion Fund and the European Maritime and Fisheries Fund and repealing Council Regulation (EC) No 1083/2006, OJ L 347, 20.12.2013, p. 320–469.

¹⁶ Bulgaria, Council of Ministers (2015), Action Plan of the Republic of Bulgaria on the Implementation of the

with disabilities were in accordance with the provisions of the UNCRPD. The authorities committed to take effective steps for its implementation and to increase the capacity of local, regional and central government. As regards the thematic one, Bulgaria fulfilled the criteria by implementing its strategy policy framework for poverty reduction and active inclusion¹⁷.

Bulgaria developed and implemented the deinstitutionalisation reform for children based on a comprehensive strategic framework¹⁸, a National Strategy for long-term care covering deinstitutionalisation for people with disabilities and older people¹⁹ (Long Term Care Strategy) and the Action Plan for its implementation for 2018-2021 (Action Plan 2018-2021)²⁰.

The European Social Fund (ESF) Regulation (EU) 1304/2013²¹ supported the transition from institutional to community-based care, in particular in two investment priorities, 9.i on active inclusion; and 9.iv on enhancing access to affordable, sustainable and high-quality services. The European Regional Development Fund (ERDF) Regulation (EU) 1301/2013²² also provided for support of investments in health and social infrastructure and promoting social inclusion through the transition from institutional to community-based services (Article 5).

Member States could propose different types of services, based on impact assessment and analysis of the situation and the assessment of the needs of the population at risk of institutionalisation, the availability of services in the community; the financial, material and human resources needed, etc. The measures should be part of a strategic vision on the transition from institutional to community-based care. The size of the institution cannot be used in isolation as a criterion to judge whether the supported infrastructure can be considered as community-based service or simply a scaled-down institution. The starting point should be whether it provides a setting allowing for the possibility for independent living, inclusion in the community (including physical proximity of the location) and high-quality care.

The Long Term Care Strategy and the Action Plan 2018-2021 were the strategic framework

UN Convention on the Rights of Persons with Disabilities (2015 – 2020) (План за действие на Република България за прилагане на Конвенцията за правата на хората с увреждания (2015–2020)), Council decision No. 467, 25 June 2015.

¹⁷ Bulgaria, Council of Ministers (2013), National strategy for reducing poverty and promoting social inclusion 2020 (Национална стратегия за намаляване на бедността и насърчаване на социалното включване 2020 г.), Council decision No. 5.1, 6 February 2013.

¹⁸ Bulgaria, Council of Ministers (2010), National strategy ‘Vision for deinstitutionalisation of children in Bulgaria (Национална стратегия „Визия за деинституционализация на децата в Република България“), Council decision No. 8, 24 February 2010 and two action plans for its implementation, the current one covering the period 2016-2020.

¹⁹ Bulgaria, Council of Ministers (2014), National strategy for long-term care (Национална стратегия за дългосрочна грижа), Council decision No. 2, 7 January 2014.

²⁰ Bulgaria, Council of Ministers (2018), Action plan for the period of 2018-2021 for implementation of the National strategy for long-term care (План за действие за периода 2018-2021 г. за изпълнение на Национална стратегия за дългосрочна грижа), Council decision No. 28, 19 January 2018.

²¹ Regulation (EU) No 1304/2013 of the European Parliament and of the Council of 17 December 2013 on the European Social Fund and repealing Council Regulation (EC) No 1081/2006, *OJ L 347, 20.12.2013, p. 470–486*.

²² Regulation (EU) No 1301/2013 of the European Parliament and of the Council of 17 December 2013 on the European Regional Development Fund and on specific provisions concerning the Investment for growth and jobs goal and repealing Regulation (EC) No 1080/2006, *OJ L 347, 20.12.2013, p. 289–302*.

which envisaged a gradual transition of elderly and people with disabilities from specialised institutions and delivery of quality and accessible services in line with the individual needs. A relevant number of organisations took part in the public consultation and were involved in the working groups drafting the Action Plan 2018-2021. The support by ESI Funds complemented national funding. This strategic framework presented the relationship between the new small settings and the complementary individual social services' support.

In the assessment of the partnership agreements and operational programmes of the Member States, the Commission ensured that the type of actions to be supported was compliant with the relevant provisions of the international conventions. Special attention was paid to the evidence that the underlying national strategies were consulted with all relevant stakeholders including the equal treatment bodies. Furthermore, for the implementation of the operational programmes, in line with the partnership principle for all ESI Funds, the Commission requested that a representation of the relevant stakeholders was included as partners in the programming and monitoring of the operational programmes, via the monitoring committees. Thus, they could contribute to the definition of the selection criteria of the operations. In Bulgaria, non-governmental organisations of people with disabilities were part of monitoring committees and participated in the exercise of the functions defined by the Article 110 of the CPR. The stakeholders could monitor the quality and effectiveness of provided services in the new settings via the procedures in place and in the framework of foreseen evaluations.

The ERDF Operational Programme “Regions in Growth” had earmarked more than EUR 43 million directly for deinstitutionalisation. The call for proposals published in 2018 included family size homes for disabled children as well as for elderly people who need special care, as well as day care centres for people living with their families but in need of a caring environment during the daytime. The Programme also provided for other investments that were conducive to deinstitutionalisation, such as social housing and social infrastructure.

The ESF Operational Programme “Human Resources Development” invested approximately EUR 142 million in development and delivery of various new social services. The most relevant services were delivered at day-care centres for people with severe disabilities or for people with dementia, centres for social rehabilitation and integration of people with mental health problems, centres for care of people with psychic problems, in centres for care of people with an intellectual disability and in centres for the elderly.

According to the Map of Services under the Action Plan 2018-2021, funding of infrastructure should be complemented by service delivery and the coherence was supposed to be ensured at territorial level.

The Common Provisions Regulation for the Cohesion Policy Funds for the period 2021–2027²³ provides for further enhancement of the transition from institutional to family

²³ Regulation (EU) 2021/1060 of the European Parliament and of the Council of 24 June 2021 laying down common provisions on the European Regional Development Fund, the European Social Fund Plus, the Cohesion Fund, the Just Transition Fund and the European Maritime, Fisheries and Aquaculture Fund and financial rules for those and for the Asylum, Migration and Integration Fund, the Internal Security Fund and the Instrument for Financial Support for Border Management and Visa Policy, OJ L 231, 30.6.2021, p. 159–706.

and community-based care including through the implementation of enabling conditions (Article 15 and Annexes III and IV) that are horizontal and thematic²⁴.

1. Horizontal conditions are applicable to all EU funded operations in Cohesion Policy and include among others criteria to ensure their compliance with the Charter of Fundamental Rights of the EU, and implementation and application of the UNCRPD (a national framework to ensure implementation must be in place).
2. Thematic condition requires inclusion of the shift from institutional to family- and community-based care and promotion of related services in the national or regional strategic policy or legislative framework for social inclusion and poverty reduction as well as in the national or regional strategic policy framework for health and long-term care.

Member States shall ensure that the enabling conditions remain fulfilled and respected through the programming period. In case, an enabling condition is no longer fulfilled, the Commission will start a contradictory procedure, which may lead to financial consequences. In addition, the partnership with all relevant stakeholders, including those of fundamental rights and disability organisations, is a key principle to design and implement the EU Cohesion Policy.

Furthermore, the new ERDF and Cohesion Fund Regulation²⁵ includes provisions for the support and promotion of the transition from institutional to community- and family-based care through supporting facilities that would seek to prevent segregation from the community, and facilitate the integration of people to the society and ensure independent living conditions. According to the Regulation establishing the European Social Fund Plus (Article 6)²⁶, it will support “specific targeted actions (...) [that] may include action for promoting (...) the transition from residential or institutional care to family and community-based care”.

Conclusion

The Commission’s point of view is that the current ESI Funds investments in Bulgaria are contributing to deinstitutionalisation, making independent living possible, while also providing options for those persons for whom fully independent living is not a feasible option. The transition from institutional to community-based services needs to effectively combine new infrastructure projects with different types of social services, including personal assistance. The Commission is committed to continue supporting the Member States in their efforts to fully achieve the transition to community-based care for people with disabilities and elderly ensuring independent living in the framework of its competences also in the programming period 2021-2027. In addition, the Commission will support Member States

²⁴ Annex III to Regulation (EU) No 2021/1060.

²⁵ Regulation (EU) 2021/1058 of the European Parliament and of the Council of 24 June 2021 on the European Regional Development Fund and on the Cohesion Fund (OJ L 231, 30.6.2021, p. 60–93).

²⁶ Regulation (EU) 2021/1057 of the European Parliament and of the Council of 24 June 2021 establishing the European Social Fund Plus (ESF+) and repealing Regulation (EU) No 1296/2013, OJ L 231, 30.6.2021, p. 21–59.

through the actions proposed in the new Strategy for the Rights of Persons with Disabilities.