

Understanding EU policies for persons with disabilities

SUMMARY

Both the EU and its Member States have signed the UN Convention on the Rights of Persons with Disabilities, and use its definition of disability as a common reference at EU level. Bearing in mind that there is no other harmonised definition of disability in the EU, and that there is a wide variety of statistical surveys in terms of questions asked and population surveyed, a complete statistical assessment of disability in the EU does not yet exist. However, the annual Eurostat statistics on income and living conditions survey reveals that, in Europe, the prevalence of disability is higher among female, older and less educated respondents. Furthermore, studies show that the coronavirus pandemic has affected people with disabilities disproportionately more than others.

The EU combats all forms of discrimination alongside and in support of its Member States. To improve the situation of disabled people, it has introduced a series of initiatives, programmes and strategies over a number of decades. The European Parliament has been highly active in the bid to end all forms of discrimination against disabled people since the start of the 1980s.

In 1997, Article 13 of the European Community Treaty, introduced by the Treaty of Amsterdam, (now Article 19 of the Treaty on the Functioning of the EU) on the human right not to suffer from discrimination on the grounds, in particular, of disability, paved the way for a genuine disability policy. The first step in this regard was the adoption of a 2001-2006 action programme to combat discrimination. Later, the 2010-2020 European disability strategy sought to enable disabled people to exercise their rights and participate fully in society and the economy. A new 2021-2030 strategy, incorporating the lessons learned from its predecessor, seeks to ensure that all persons with disabilities in the EU, regardless of their sex, racial or ethnic origin, religion or belief, age or sexual orientation enjoy their human rights; have equal access to participation in society and the economy; are able to decide where, how and with whom they live; move freely in the EU regardless of their support needs and, no longer experience discrimination.



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- European policies
- European Parliament

Disability in the European Union

Definition

Traditionally, there have been two main models of disability – [a medical and a social one](#):

- The **medical model** focuses on the person's medical condition – illness or injury – which is the direct cause of their disability and may have an impact on their quality of life;
- The **social model** focuses on the barriers created by society. Those may be physical or social restrictions preventing the development or use of the abilities – physical, social or professional – that each individual needs to thrive.

The two models see differently the interaction between the person's health condition and the environment in which they live. The medical one focuses on the person; the social one on the barriers created by the environment. In 2001, the World Health Organization published a new model: the international classification of functioning, disability and health ([ICF](#)). Based on three basic dimensions – body, activity and participation – the **ICF model** integrates the medical dimension of the health condition while at the same time referring to the context in which the individual lives and the society to which they belong. In line with the ICF model, in 2006 the [United Nations](#) adopted a very broad definition of disability in its Convention for the Rights of People with Disabilities ([UN CRDP](#)): 'Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others' ([Article 1](#)).

The Member States' definitions of disability vary broadly

The definition of disability varies drastically among the EU Member States owing to their different historical, cultural, economic and social contexts. When it comes to defining [disability](#), some Member States adopt an entirely social approach, others a partly social one, and yet others a primarily or entirely medical one.

EU countries also differ in their codification of disability. Some have established a legal framework that serves as a reference for all disability policies. In [Germany](#), for example, the definition of disability appears in book 9 of the German Social Code ([Sozialgesetzbuch IX](#), SGB), which came into effect on 1 July 2001. A person is 'disabled' when their bodily functions, mental abilities or mental health deviate, for more than six months, from the condition typical for a given age, thereby hampering their participation in society (Article 2(1), SGB IX). In [Spain](#), disability is defined in Article 7 of Law 13/1982 on the Social Integration of Disabled Persons (LISMI) now called *Ley General de Discapacidad* (LGD).

Other Member States, such as Belgium, Czechia, Denmark, Greece, Poland and Slovakia have [no general legal framework](#) for the definition of disability. A number of Member States, in particular Nordic ones, do not define disability in order to avoid any [stigmatisation](#) that could be brought about by a definition.

Lastly, the definition of disability may also vary within a Member State according to the objective – social or professional inclusion, special education, compensatory aid, support for those in need – and the [administration involved](#) – employment, social affairs, health, education, etc.

A 2004 study on the [Definition of Disability in Europe: A Comparative Analysis](#), carried out by Brunel University at the request of the European Commission, draws attention to the complexity of finding one single definition of disability at EU level: 'Applying a common definition of disability to the many policies of the EU Member States would undermine them and cause them to be misdirected. The necessity of using a plurality of definitions to ensure relevance raises a problem of coherence in disability policy'. In the light of the difficulties encountered in adopting a common definition at EU level (see box above), when ratifying the UN CRDP, the EU recognised the UN's definition of disability provided in this convention.

Statistics: Data collection and data availability

As the concept of disability is so multidimensional, this leads to many difficulties when having to identify people with disabilities in surveys. At EU level, [Eurostat](#) is the main data provider through the European Statistical System ([ESS](#)) – the partnership between the Commission (here Eurostat), the national statistical institutes and other national authorities that are responsible in each Member State for the development, production and dissemination of European statistics. Currently, Eurostat carries out two broad population-based surveys, which include a limited number of questions relating to disability:

- the **European health interview survey** ([EHIS](#)), which provides data on the level of functioning and activity limitation among the population, and information on the population's health status, health determinants and healthcare use;
- the **EU statistics on income and living conditions** ([EU-SILC](#)), which collects, once a year, data on long-standing activity limitation due to health problems (the Global Activity Limitation Instrument, [GALI](#)¹).

Other specific survey modules collect data relating to disability, among them:

- the [ad hoc module of the 2011 labour force survey](#), which examined the labour-market situation of 15-64-year-old disabled people living in private homes compared with (same age range) people without disabilities also living in private homes. In the survey, disabled people are those who claim to have difficulties in performing some basic activities such as seeing, hearing, walking or remembering;
- The 2012-2013 European survey on health and social integration ([EHSIS](#)), which collected data on the barriers faced by people with a health problem or having difficulties in performing certain basic activities in their daily life. Considering the quality issues the survey faced, this dedicated module was discontinued.

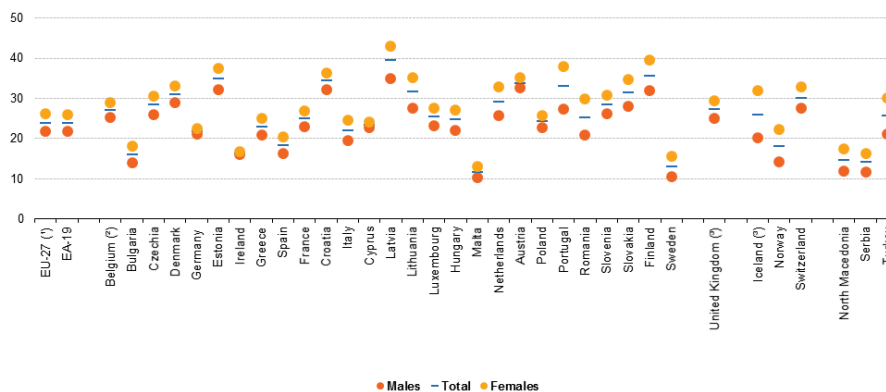
Although those surveys are a useful source of information, they do not cover the entire population with disabilities. Moreover, they do not gather information on people living in collective households or institutions (in particular elderly people and disabled children) and on children living in a private home (the EU-SILC survey starts from the age of 16). As announced in its strategy for the rights of persons with disabilities 2021-2030 (see below), the European Commission will introduce GALI to harmonise disability data collection. Currently, GALI is recognised as a good proxy measure for disability. It is also considered as being relatively easy to include in any EU social surveys in order to regularly monitor, with the help of statistical data, the situation of people with disabilities in different domains affecting their quality of life. In addition to EU-SILC and EHIS surveys, such social surveys include the [labour force survey](#), the [adult education survey](#), the [household budget survey](#), the [time use survey](#) and the [ICT survey](#).

Adding GALI to all those surveys will offer the possibility to collect information on the gap between persons with and without disabilities in key areas such as employment, education, poverty and social exclusion, living conditions, health, and use of new communication technologies. This disability variable will be accompanied with detailed information on the type of disability, with the inclusion of a short set of questions² proposed by the [UN Washington Group on Disability Statistics](#) in a three-year EU-SILC module on health from 2022 on. As regards the collection of data about children with disabilities, an adapted GALI variable in the EU-SILC module on children should be created in 2021 with a three-year periodicity. On the basis of data extracted from the European quality of life survey ([EQLS](#)) and the European working conditions survey ([EWCS](#)), [Eurofound](#) studies access to and quality of social services for people with disabilities and chronic diseases, specifically in relation to how this affects such people's employment and labour market integration.

Disability is not a marginal phenomenon in the EU. According to the [EU statistics on income and living conditions survey](#) (see Figure 1), in 2019 almost one quarter of the EU-27 population aged 16 and over (24 %) reported some or severe long-standing limitations in their usual activities due to

health: 17.2 % reported some long-standing limitations and 6.9 % reported severe long-standing limitations. [Women](#) were more likely than men to report long-standing limitations – either some or severe – in all EU Member States.

Figure 1 – Women/men with self-reported long-standing limitations in usual activities due to health problems, 2019 (% share of the population aged 16 and over)



(*) Estimates.
 (*) Break in time series.
 (*) 2018 data.
 Source: Eurostat (online data code: h1th_silc_12)

eurostat

Source: [Eurostat](#), 2020.

People in [higher age groups](#) tend to report some or severe long-standing limitations more than those in lower age groups, and the gender health gap increases with age. The prevalence of self-reported long-standing limitations is highest amongst people with a low [income](#), and decreases progressively as income increases. In the EU-27, 32.2 % of the population in the first income quintile group (the 20 % of the population with the lowest income) reported long-standing limitations in 2019 compared with 16.5 % of the population in the fifth income quintile group (the 20 % of the population with the highest income). In the same way, the prevalence of self-reported long-standing limitations is lowest amongst people having completed tertiary education (15 %) compared with people having completed, at most, lower secondary education (34.9 %). The health gap between [educational attainment levels](#) is also visible in all Member States.

Remaining barriers

Persons with disabilities still face significant barriers to accessing education, employment, healthcare, sport, culture and to participating in the EU's political life. In 2018, 19.9 % of 18-24-year-olds with [activity limitation](#) within the EU were early leavers from education and training compared to 9.9 % of their peers without activity limitation ([Eurostat](#)). At EU level, only 50.8 % of persons with disabilities were employed, compared to 75.0 % of persons without disabilities, in 2019. The unemployment rate of persons with disabilities in the EU, aged 20-64, was 18.6 % compared to 8.8 % of their peers without disabilities, and the EU activity rate of persons with disabilities (percentage of [active persons](#) in relation to the comparable [total population](#)) was only 62.4 % compared to 82.2 % of persons without disabilities. Moreover, [women](#) with disabilities, [young](#) persons with disabilities and persons with high support needs are more likely to be discriminated against and excluded from the labour market ([ANED](#), 2017).

According to a 2018 Eurobarometer survey on [Sport and physical activity](#), having a disability or illness is the third most frequently reason mentioned for not practising sport more regularly (14 % of respondents). Those who left education by the age of 15 (27 %), older people (26 % of those aged 55 or over) and women (16 %) are more likely to say that they have an illness or disability. In the 2015 public consultation on the [European Accessibility Act](#), when asked which goods and services should be given priority in relation to accessibility for persons with disabilities and the elderly, respondents

(organisations and citizens) ranked [culture and/or leisure](#) as key (respectively 8 % and 6 %). EU citizens with disabilities face similar difficulties when participating in elections. They also face additional barriers to exercising their voting rights, for example, in terms of insufficient accessibility. According to a 2019 [European Economic and Social Committee opinion](#), an estimated 800 000 EU citizens from 16 Member States could have been deprived of the right to participate in the elections because their national rules and organisational arrangements do not take their specific needs sufficiently into account.³ As a result, compared with persons who do not have activity limitation (aged 16 and over), those who do face a higher [risk of poverty or social exclusion](#) (28.4 % versus 18.4 % in 2019, see Figure 2 below). Finally yet importantly, according to a 2019 Eurobarometer survey on [Discrimination in the EU](#), over half of the respondents with disabilities (52 %) said that they had felt discriminated against or harassed in the past 12 months.

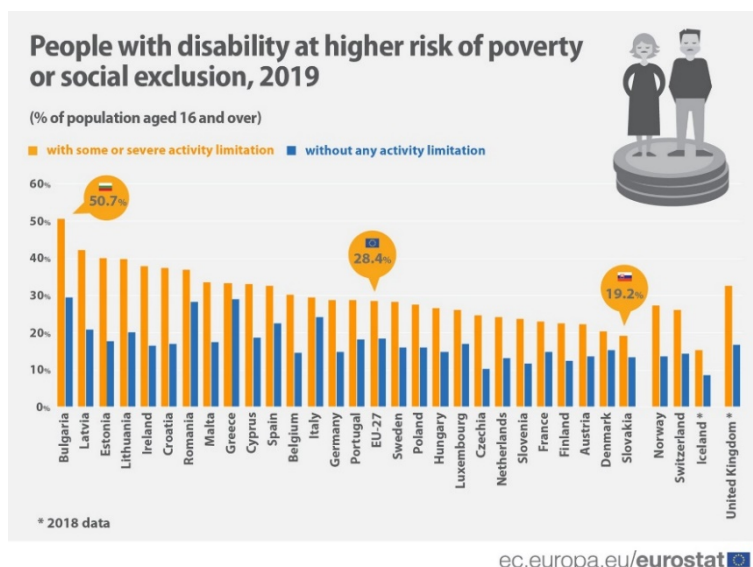
The coronavirus pandemic and people with disabilities

The strict confinement measures imposed to contain the coronavirus pandemic have had a particularly negative impact on people with disabilities. The pandemic has affected them disproportionately, because:

- they have faced unique challenges since its outbreak;
- their access to general and specific health services has been reduced;
- their exposure to the risk of revenue loss has increased dramatically;
- governments' efforts to contain the pandemic have had a strongly negative impact on their already limited social life.

During the pandemic, people with disabilities have faced [greater difficulties](#), such as barriers to accessing public health information, barriers to implementing basic hygiene measures such as handwashing, inability to wear masks due to health risks, inaccessibility of telehealth tools, difficulty in enacting social distancing, difficulty in touching things for the purpose of obtaining information or getting physical support, etc. In addition to these difficulties related to their disability, people with disabilities are more likely to be older, poorer, to suffer from comorbidities and to be female, compared with the rest of the population (see above). Unfortunately, older age, poverty and comorbidities are associated with a higher risk of severe outcomes from Covid-19. For example, according to the UK [Office for National Statistics](#), the risk of death from Covid-19 in England between 24 January and 30 November 2020 was 3.1 times higher for men with disabilities and 3.5 times higher for women with disabilities than for men and women without disabilities.

Figure 2 – People with disability at higher risk of poverty or social exclusion, 2019 (% of population aged 16 and over)



Source: [Eurostat](#), 2021.

[People with intellectual disabilities](#) living in residential, medical or care facilities or even in their own homes have been at higher risk of death from Covid-19 than people without such disabilities. Isolation, uncertainty and fear of the pandemic have generally affected the [mental health](#) of many people, but more notably so of those with mental impairments. People with physical impairments have also been disproportionately at risk of mental health disorders.

The pandemic has disproportionately affected people with disabilities also in economic terms, compounding the economic hardships many of them were already experiencing prior to its outbreak. Traditionally, people with disabilities face persistently [lower rates of employment](#) and earn significantly [lower wages](#) compared to their peers without disabilities. In addition to the increased health risk associated with the pandemic and increased risk of exposure in many in-person workplaces, people with disabilities have been confronted with wage loss, [job loss](#) and long-term unemployment. [School closures](#) have also led to the exclusion of many young people with disabilities, since educational materials are not in accessible formats and access to assistive technology, including the internet, is a challenge.

According to a UN report on the [impact of Covid-19 on women and girls with disabilities](#), women and girls with disabilities have had greater difficulty in accessing sexual and reproductive health information, goods and services. Moreover, they have faced increased risk of gender-based violence and encountered numerous obstacles in accessing support services and police or justice mechanisms. They have, more often than others, been cut off from health services and lost access to the labour market or education, among others. Last but not least, the pandemic has increased the barriers for people with disabilities in terms of social [inclusion](#) (equal access to goods, services, health, labour market and political, social and physical spaces, etc.).

EU legal framework

Over time, the EU has paid increasingly closer attention to the situation of disabled people. The question of what would be the right legal basis for introducing a genuine EU disability policy has also become increasingly important.

The rights of persons with disabilities have been enshrined in the EU Treaties since 1997. [Article 19](#) of the Treaty on the Functioning of the European Union (ex-Article 13 TEC) stipulates that 'in defining and implementing its policies and activities, the Union shall aim to combat discrimination based on sex, racial or ethnic origin, religion or belief, disability, age or sexual orientation'. The [Charter of Fundamental Rights of the European Union](#), adopted in 2000, prohibits discrimination on the basis of disability ([Article 21](#)) and recognises the right of persons with disabilities to independence, social and occupational integration and participation in the life of the community ([Article 26](#)). The Treaty of Lisbon, which came into effect in 2009, attributes to the Charter the same legal value as the Treaties.

Adopted in 2006, the UN Convention on the Rights of Persons with Disabilities (CRPD) was the first international legally binding instrument to set minimum standards for the rights of persons with disabilities, and the first human rights convention to which the EU became a party. By ratifying the UN CRPD in December 2010, the EU associated itself with the efforts agreed at international level to guarantee the fundamental rights of people with disabilities. By 2018, all EU Member States had also [ratified](#) the convention, committing, alongside the EU, to complying with the obligations under the convention and to setting up the mechanisms for its implementation and coordination.

European policies

The Commission has supported the [development of a European disability policy](#) through a succession of action programmes since 1974.⁴ As an additional step, in May 2001 the European Commissioner for Employment and Social Affairs called on the European Council to dedicate the year 2003⁵ to disabled people. Accordingly, in 2003, the Commission launched a [European action plan](#) on equal opportunities for people with disabilities for the 2003-2010 period. While significant

steps were taken to improve the lives of persons with disabilities in the EU during that period, some stakeholders questioned the adequacy of the existing EU-level policy and regulatory frameworks to properly address the needs of people with disabilities.

Building on the results of the action plan, a [European disability strategy 2010-2020](#) was adopted in November 2010, at a time when the process for the ratification by the EU of the UN CRPD was already under way (see above). The strategy was conceived as a policy framework through which the EU would deliver its commitments under the UN CRPD, in line with the respective competences provided for in the Treaties. It also complemented the [EU 2020 strategy](#) and the Charter of Fundamental Rights of the EU. It aimed to make it possible for disabled people to enjoy their rights in full and to participate in society and the economy on an equal level with others. To achieve these objectives, the strategy identified eight key areas of action: accessibility; participation; equality; employment; education and training; social protection; health; and external action. The strategy also included four instruments to implement the above objectives: awareness raising; financial support; statistics; and data collection and monitoring mechanisms as required by the UN CRPD. From 2010 to 2020, several initiatives were launched to implement the strategy:

- the **European Day of Persons with Disabilities**. On 3 December each year, the Commission, together with the [European Disability Forum](#), organises a conference to mark the European Day of Persons with Disabilities. The conference brings together decision-makers, people with and without disabilities, academic experts, the media and other stakeholders. They take part in the EU's efforts to highlight the issue of disability in accordance with the strategy;
- the **European disability card**. In February 2016, a [European disability card scheme](#) was launched as a pilot project in eight Member States, to address the issue of lack of mutual recognition in disability status among Member States and to ensure equal access to benefits across borders for people with disabilities mainly in the areas of culture, leisure, sport and transport. According to the 2021 [study assessing the implementation of the pilot action on the EU disability card and associated benefits](#), the initiative proved to be effective;
- **Disabled students' mobility**. The [Erasmus+](#) programme promotes the mobility of disabled students through [youth mobility projects](#);
- **Accessibility**. After four years of discussions, the [European Accessibility Act](#) was finally adopted in 2019. It should ensure that goods and services, including public services and assistive devices, are accessible to people with disabilities. Even if the provisions on the built environment are not binding, the Member States are encouraged to [align](#) their diverging requirements as much as possible. Persons with disabilities should encounter fewer obstacles when accessing transport, education or the labour market. The [Web Accessibility Directive](#) complements the European Accessibility Act by including provisions to ensure that people with disabilities have better access to websites and mobile apps of public services. The inclusion of accessibility provisions in the [Audiovisual Media Services Directive](#), the new [European Electronic Communications Code](#), the ['Marrakesh' Directive](#),⁶ and the reaffirmation of mandatory accessibility [requirements](#) for projects financed through EU funds are also fostering accessibility in the EU;
- **Access City Awards**. To encourage cities to improve accessibility, the Commission grants an [annual award](#) to cities that invest in guaranteeing that their citizens have equal access to fundamental rights and, regardless of their age, mobility or ability, equal access to the resources these cities offer. The winners of the 12th edition of the Access City Award are due to be announced on 3 December 2021;
- **Access to transport** for disabled persons. The legislation on the [rights of passengers with reduced mobility](#) has made significant progress with the revision of the Commission Regulation on the technical specifications for interoperability relating to accessibility of the [Union's rail system](#) (2014), the adoption in 2010 of the [Waterborne](#)

Passenger Rights Regulation, and in 2011 the [Bus and Coach](#) Passenger Rights Regulation, and the re-cast of the [Rail Passengers' Rights Regulation](#) (2021).

In 2019, the European Commission launched the [evaluation](#) of the European disability strategy 2010-2020 to assess its implementation. The report mentions the inclusion of disability issues in European legislation and policy, notably in the areas of accessibility and passengers' rights, as some of the strategy's main achievements. The strategy also helped mainstream disability issues at EU institutional level through the [European Pillar of Social Rights](#) (Article 17 of the strategy) and the [European Semester](#). Nevertheless, the evaluation underlines many shortcomings, such as the lack of a comprehensive set of indicators, the absence of a framework to monitor the implementation of the strategy or the non-existence of binding links between the strategy and EU funding. On 20 October 2020, the European Commission announced in its [2021 work programme](#) that it would publish a new EU disability strategy, which should address the shortcomings of its predecessor. Accordingly, on 3 March 2021 the Commission adopted its [strategy for the rights of persons with disabilities 2021-2030](#), which seeks to achieve progress in ensuring that all persons with disabilities in the EU, regardless of their sex, racial or ethnic origin, religion or belief, age or sexual orientation:

- enjoy their human rights;
- have equal opportunities, equal access to participate in society and economy;
- are able to decide where, how and with whom they live;
- move freely in the EU regardless of their support needs;
- no longer experience discrimination.

Based on the lessons drawn from the previous strategy, the new one takes account of the diversity of disability comprising long-term physical, mental, intellectual or sensory impairments (in line with Article 1 of the UN CRPD), which are often invisible. Addressing the risks of multiple disadvantages faced by women, children, older persons, refugees with disabilities and those with socioeconomic difficulties, the strategy promotes an [intersectional](#) perspective in line with the UN 2030 Agenda for Sustainable Development and sustainable development goals ([SDGs](#)). The strategy announces several concrete initiatives:

- a [disability platform](#), to be established by the end of the year;
- a package of measures on the integration of people with disabilities into the **labour market**, to be launched in 2022;
- a European resource centre – **AccessibleEU** – to be created in 2022. It will provide a framework for cooperation between national authorities responsible for implementing accessibility rules and experts, with the aim of sharing good practices for policy development;
- the creation of a **European disability card**. A Commission proposal to this effect should be presented by the end of 2023;
- with a view to ensuring that people with disabilities fully enjoy their rights as European citizens, the Commission will publish guidelines in 2023 on their **participation in the electoral process** – as candidates and voters;
- recommendations, to be submitted by 2023, with the aim to ensure that people with disabilities are no longer excluded and can '**live independently** and choose where and with whom they want to live';
- a framework for the provision of **social services** to people with disabilities will be presented by 2024;
- a **monitoring framework** is to be published in 2021, and **disability indicators** are to be developed by 2023.

Finally, at the institutional level, the Commission promises to renew its human resources strategy to promote diversity and the integration of people with disabilities.

European Parliament

Since the start of the 1980s, Parliament has given priority to combating all forms of discrimination against disabled people. On the strength of the work by the **Disability Intergroup**,⁷ Members of the European Parliament have adopted a number of decisions on the integration of disabled people and the acknowledgement and protection of their rights, calling on the Member States and the Commission to develop norms and regulations in the interest of disabled people (see paragraphs below). The establishment of rights to a decent income, social protection and social security are high on the Intergroup's agenda.

Resolutions and reports

In its 1996 resolution on the [rights of disabled people](#), Parliament called on the Member States to include a clause on **non-discrimination on grounds of disability** when revising the Treaty on European Union, to enact a new legal basis for social programmes, to introduce non-discrimination measures and to treat disability rights as a civil rights issue. It also called on the Commission to present a new action programme on equalisation of opportunities for disabled people, and to carry out censuses in all Member States to improve statistics on the causes or extent of disabilities. Moreover, it called on the EU institutions and Member States to review their access and employment policies.

In March 1998, Parliament advocated the introduction of a [European parking card](#) for disabled people, which would be valid throughout the EU. Parliament repeatedly called for the introduction of strategies, legislative initiatives and policies to guarantee **non-discrimination and equal opportunities for disabled women**. In its 2011 resolution on the [European disability strategy](#), Parliament pleaded, among other things, for people with disabilities to be involved in all measures and decisions that affect them, and regretted the absence of an integrated gender perspective in the strategy.

In December 2013, Parliament adopted a resolution on [disabled women](#), in which it recalled that they were disadvantaged in a number of ways. They had trouble in gaining access to adequate housing, healthcare, public transport, education, vocational training and employment, were victims of inequality in access to credit and rarely participated in decision-making processes.

In 2016, Parliament adopted a resolution on the [implementation of the UN CRPD](#), with special regard to the UN's concluding observations on the state of implementation of obligations under the UN CRPD. The resolution prompted EU institutions to ensure that all existing and future legislation fully adheres to the CRPD's recommendations.

In 2017, Parliament adopted an own-initiative [resolution](#) on the implementation of the European disability strategy. The underlying report stresses, in particular, the need to mainstream equality, gender and non-discrimination, as well as the rights of children with disabilities, into all areas of a future strategy; it furthermore urges the Commission and the Member States to reach out to the most vulnerable, such as the homeless.

On 2 March 2020, following the statement in plenary on 17 December 2019 by Commissioner for Equality, Helena Dalli, on the follow-up to the European disability strategy 2010-2020, the Committee on Employment and Social Affairs (EMPL) tabled a [motion for a resolution](#) urging the Commission to deepen its commitment to the rights of persons with disabilities through a comprehensive, long-term, **post-2020 EU disability strategy**, so that all persons with disabilities and their families could fully enjoy their human rights. According to Members, the new disability strategy should include ambitious, clear targets and implementation periods. It should reflect the diversity of persons with disabilities and mainstream the rights of children with disabilities. An adequate budget for the strategy's implementation and a well-resourced monitoring mechanism are key. Persons with disabilities and their representative organisations should also be involved in the strategy's preparation, implementation, monitoring and evaluation. Disaggregated, comparable data collection should facilitate proper monitoring.

In an 18 June 2020 resolution, Parliament asked once again for a more ambitious [post-2020 European disability strategy](#). It called on the Commission to include a review of the strategy every three years with a clearly defined role for the EU CRPD Framework and to systematically and actively involve persons with disabilities and their representative organisations (at EU and national levels) in the reviews. Furthermore, it asked the Commission to ensure that the post-2020 strategy promotes guaranteed access to: employment, vocational and professional training, inclusive education, affordable quality healthcare services, digital services, and fair pay. Parliament also recommended that the EU structurally integrate the new European disability strategy within the European Semester process.

In the context of the **coronavirus pandemic**, Parliament adopted a [resolution on the rights of persons with intellectual disabilities and their families in the Covid-19 crisis](#) on 8 July 2020. In it, Parliament voices its deep concern about the disproportionate impact of the Covid-19 crisis on persons with intellectual disabilities and persons with other mental health problems and their families, which creates an additional burden for family members caring for them, many of whom are [women](#). The resolution underlines that investing in the gradual transition from institutional care to community-based services for persons with intellectual disabilities should be a priority. Lockdown has been a serious problem, not only for persons with intellectual disabilities, but also for every person with a mental illness, as isolation may aggravate the problems.

In token of its concern about **inequalities on the labour market** for persons with disabilities, Parliament adopted a resolution on the implementation of Council Directive 2000/78/EC establishing a general framework for [equal treatment in employment and occupation in the light of the United Nations Convention on the Rights of Persons with Disabilities](#) on 11 March 2021. The resolution called on the EU institutions and Member States to reaffirm their commitment to achieving inclusive equality for people with disabilities and to step up their efforts to create an accessible and non-discriminatory labour market for them. They called for a rapid revision of the Employment Equality Directive to bring it into line with the provisions of the UNCRPD.

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- Pasikowska-Schnass M.; [Access to cultural life for people with disabilities](#), EPRS, European Parliament, December 2019
- Van Lierop C., [Cohesion policy and disability](#), EPRS, European Parliament, March 2017

ENDNOTES

- ¹ The 'GALI' question measures the proportion of people who claim to have been, 'for at least the past six months,... limited because of a health problem in activities people usually do'.
- ² This [set](#) comprises questions on six core functional domains: seeing, hearing, walking, cognition, self-care, and communication.
- ³ People with disabilities may also be easily disenfranchised. The European Court of Human Rights has recently issued several judgments on the electoral rights of disabled persons (e.g. Toplak and Mrak v. Slovenia; Strøbye v. Denmark, Caamaño Valle v. Spain).
- ⁴ The [social action programme](#) (1974); the [Community Social Action Programme on the Social Integration of Handicapped People](#), 1983-88, (1981); [HELIOS I](#) (Second) Community Social Action Programme for Disabled People (1988); [HELIOS II](#) (Third) Community Action Programme to Assist Disabled People (1993).
- ⁵ The year 2003 was named 'European Year of People with Disabilities' (EYPD) to highlight and raise public awareness of the situation faced by disabled people. To this end, the EU set aside a budget of €12 million to stimulate initiatives and launched an action plan on Equal opportunities for people with disabilities: a European Action Plan (2004-2010). It sought to ensure that disability issues were incorporated into all EU policies that may affect the lives of disabled people. The EYPD sought, in particular, to raise awareness of the rights of people with disabilities to protection against discrimination; to foster reflection on and discussion of the measures needed to promote equal opportunities for disabled people in Europe; to develop experience exchanges on good practices and effective strategies devised at local, national and European level; to improve communication on disability; to increase the attention paid to the rights of disabled children and young people to equality in education, etc. Among the main actions taken that year, of particular importance are the i) introduction of the 'Get on Board' specific information and promotion campaign, for which a campaign bus travelled throughout the EU providing disabled people and disability organisations with a means of promoting their activities; ii) highly visible media; and iii) the creation of a company participation programme to ensure that businesses promote employment and training opportunities for disabled people.
- ⁶ This directive implements the Marrakesh Treaty to Facilitate Access to Published Works for Persons Who are Blind, Visually Impaired, or Otherwise Print-Disabled, which aims to facilitate access to print works in formats adapted for persons who are blind, visually impaired or otherwise print-disabled. The [Marrakesh Treaty](#), to which the EU is party, is an international copyright treaty administered by the World Intellectual Property Organization (WIPO).
- ⁷ The [Disability Intergroup of the European Parliament](#) (with the European Disability Forum acting as its secretariat) is an informal grouping of Members of the European Parliament who are interested in promoting disability-related policy. Established in 1980, it is one of the oldest and largest intergroups in the Parliament. The Disability Intergroup has been a key player in advocating and advancing the rights of persons with disabilities in the EU. The 2019-2024 term provides the opportunity for the Disability Intergroup to maintain its instrumental position in the adoption of legislation favourable to persons with disabilities.

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