

## EAPN STATEMENT ON COVID-19

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17 March 2020

### **Urgent, coordinated action needed by EU and Member States to adequately protect and support the poor, the sick and highly vulnerable groups**

**EAPN and its members are concerned by the spreading of the Corona virus (COVID-19) across Europe and in particular about its social and economic consequences on people at risk of poverty and social exclusion and their families, but also highly vulnerable groups.** With this statement we call on all governments to coordinate their activities within their countries and across the EU to fight the further spreading of the virus in order to protect the health and life of our citizens. This should be done with **high attention for the situation and additional needs of poor(er) people and their families, but also for more vulnerable groups in view of their economic, social and health situations, in a spirit of solidarity and working towards the common good.**

The Corona virus, which was declared a pandemic on 11 March 2020 by the World Health Organisation (WHO), **proportionally hits the poorest and most vulnerable people and their families hardest**, across Europe and beyond. Compared to other groups in our societies and economies, the Corona virus (COVID-19) and the measures to mitigate it have more severe and damaging effects on workers with low wages and/or income and their families, those in atypical work and with precarious employment contract arrangements (ie zero-hour), low-quality jobs or those who are unemployed or reliant on income support.

Medically, it has higher fatality rates and creates higher needs for hospitalisation for those who are older, chronically sick or with a health condition. The mitigation measures risk hitting them harder through an increased risk of social isolation. There is a lot of evidence that patients suffering from health conditions such as respiratory diseases, hypertension or diabetes are particularly vulnerable to the outbreak of the COVID-19. These conditions are often associated with low-income or other dimensions of social exclusion due to malnutrition, important health hazards in low-income jobs or unhealthy living conditions. All these persons and groups need special protection, security and decisive measures to adequately and quickly address their precarious economic and/or social situation and to prevent and reduce all possible health risks.

**Households in poverty and social exclusion are most severely hit by COVID-19 as they have fewer resources and fewer options, in particular households with children, chronically ill and disabled persons.** Low-income households will have no capacity to manage extraordinary expenses, e.g. for care, household support or to compensate for school meals no longer being available. Also in these households an additional burden will be put on women, in particular mothers of younger children and/or single parents, as they have to manage the closure of schools and educational institutions, providing care during the day, heavily reduce their working time or even stop working. Families with older persons in need of long-term care and assistance, particularly women in these families, might have to take these persons in their family to avoid exposure to larger groups in residential care homes, creating a higher need for informal care. This takes place in a context where women across Europe are more likely than

men to work part time and/or in sectors such as education, service, hospitality, care and household services, with a high exposure to large numbers of people and/or a higher share of precarious, lower paid jobs, including zero hour contracts, on-call work with payment by the hour, etc. Workers in these sectors and or jobs very often cannot use teleworking. They will be obliged to use their vacations, risk being laid off, be confronted by a reduction of their working time and related pay. If not well buffered economically, already existing inequalities in relation to access to the health system risk deteriorating. People who are not working and on minimum income face increased expenses and pressures, with no extra resources or resources given under the threat of conditionality. Homeless people cannot self-isolate and are not being advised. Shelters (especially night shelters) are often crowded and therefore infection hazards. Some shelters have closed without alternatives for their residents, and day centres are closing because of lack of volunteers. In Spain e.g., the lack of access to medical, dental and mental health care as well as to prescribed drugs for economic reasons is three to five times higher amongst poor people. This adds to the already worse health status of poorer people, including homeless people, which implies a greater propensity for them to catch infectious diseases. Older persons and persons among the medically identified risk groups of the virus because of their health status, already often in a marginalised situation, can see their situation of social isolation reinforced by measures to protect them, in particular when contacts between families and older persons in care homes is restricted or reduced.

EAPN first presents proposals for urgent action to protect workers, income, families and children and to empower our health systems and then makes suggestions for more long-term structural policies and initiatives.

### ***Short and Medium-Term Action – Need to protect workers, income, families and children and to empower our health systems***

#### **1) Urgent and coordinated health action to save lives and minimise impact of the Corona virus**

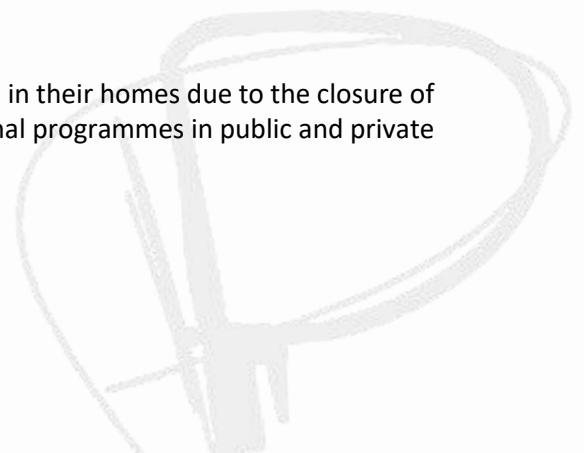
- **Provide life-saving support to patients based on medical need and no other consideration.**
- **Pursue containment measures that do not single out particular target groups**, such as specific age groups or ethnic minorities.
- **Provide support to ensure that the most vulnerable are protected**, including access to testing and health care
- **Provide free prevention and hygienic products**, such as masks, gloves, disinfectants, soap, to those persons in need before they are in health risk or risk being infected and ensure they, but also everybody else, have access to clean water as precondition for washing hands and for being able to follow advise as to preventive and protective action

#### **2) Urgent action to protect workers and ensure adequate income**

- **Ensure access to sick pay to all workers** regardless of employment status who have to carry out social distancing or isolation.
- **Work with trade unions and employers** to safeguard jobs, avoiding lay-offs and guaranteeing adequate social protection and wage subsidies.
- **Guarantee and increase minimum income support**, to cope with additional costs, stopping conditionality measures.
- **Provide income support** to workers in atypical work and/or precarious employment and to those self-employed who are losing their jobs or income due to the lockdown.

#### **3) Urgent action to protect children and families**

- **Provision of free care hours for children** who must remain in their homes due to the closure of schools and institutes. Also increase provision of educational programmes in public and private media in areas where schools are closed.



- **Continued free provision of meals for children** who would normally get it at their school or child-care facility, and for adults who have their main meals at public facilities, as elderly or disabled persons.
- **Suspension of evictions due to non-payment of mortgages and of rents**, if the cause of such non-payment can be attributed to the economic and employment effect of this crisis, as also suggested by EAPN Spain (see below for more details).
- **Monitor and combat gender-based violence** which may increase due to the confinement and closure of victim's protection facilities or services.

**4) Encourage actions to mitigate the social impact of containment measures** on social isolation and loneliness, which in themselves constitute a threat to mental and physical health.

- **Encourage public and private services, as well as volunteering, to provide essential services and goods**, such as grocery shopping, to groups that are especially confined, such as older persons.
- Introduce nationwide helplines for social and psychological support.

EAPN also calls on the European institutions and national governments to continue to work together, building on earlier [announcements](#), by making full use of the existing instruments of policy coordination in the field of public health and disease prevention in order to build “a comprehensive strategy to prevent infections, save lives and minimise impact” as stated by the General Director of WHO, Tedros Adhanom Ghebreyesus, and to ensure that the most vulnerable are prioritised, supported and protected, including homeless, undocumented migrants etc. This is the only way to address serious cross-border threats to public health stemming from infectious diseases such as the COVID-19 for which the EU is mandated by Article 168 TFEU. EU action directed towards improving public health shall complement national policies and comprises the “fight against the major health scourges, by promoting research into their causes, their transmission and their prevention, as well as health information and education, and monitoring, early warning of and combating serious cross-border threats to health”. EAPN calls on all EU MS to **show practical solidarity** with each other in the next weeks and months to **ensure that medicines, medical infrastructure, test kits, personal protective equipment for the health professionals and all workers in health and social care, laboratory capacities and the technical expertise is available in the countries and regions where they are most needed**. There should also be full cooperation for the development of the vaccines and medical treatments.

### **Long-term Action – Call for priority investment in universal public health services**

The outbreak of the COVID-19 has once again only made obvious that, in a mid- and long-term perspective, efforts need to be intensified by all national governments to **ensure that all Europeans are able to access quality, affordable or free healthcare**:

- **Public policy on health systems do not only need to take into account the social determinants of health, well-being and health inequalities, they also need to be designed in a way to effectively reduce them.**
- The objective of ensuring access to quality healthcare will need **investments in universal public health care systems** which are well equipped and have adequate numbers of well qualified staff. Short-term contracts and precarious jobs in the health sector are not only generally counter productive, but also endanger the capacity of our health systems to tackle emergencies such as the outbreak and spread of COVID-19..
- There is vast evidence from the last two decades showing that **only health care services operating in the general interest, i.e. providing accessible, affordable and enabling services and actively pursuing public health objectives, will effectively protect, treat and care for also poorer people and their families** and also for those with more complex health and social care needs.
- The European Commission has indicated that one-off spending on emergency action related to COVID-19 will be excluded from public spending and debt rules. **EU MS should have the**

**possibility to adjust their spending in the medium term to support for well-functioning public health systems** which implies a relaxation of the Stability and Growth Pact. This flexibility should also be applied to spending to provide sick pay coverage, for payments to prevent from and/or counter lay-offs as well as additional financial support to families.

This is the biggest crisis that Europe, and the world, has faced since the 2008 financial crash. Europe's response to the last crisis led to a decade of austerity and over 120 million people in Europe living at risk of poverty. Governments and Institutions have an opportunity to take another course now – they must take a human rights-based response to this pandemic, prioritising people over profit and specifically focusing on the needs of disadvantaged groups. Europe can and must come out of this crisis stronger. Decisions taken in the next weeks will be crucial in shaping the Future of Europe.

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