

FIRST REACTIONS TO THE PROPOSED REGULATIONS FOR THE EUROPEAN SOCIAL FUND +, THE EUROPEAN REGIONAL DEVELOPMENT FUND AND THE COMMON PROVISIONS REGULATION FOR THE NEXT EUROPEAN UNION (EU) MULTI-ANNUAL FINANCIAL FRAMEWORK.

THE EUROPEAN EXPERT GROUP ON THE TRANSITION FROM INSTITUTIONAL TO COMMUNITY BASED-CARE

On 29 and 30 May 2018, the European Commission (EC) released its proposed financial regulations for the European Parliament and the Council of the European Union (EU) on Regional Development and Cohesion Policy and the European Social Fund+ (ESF+) for the 2021-2027 Multi-annual Financial Framework (MFF).

The proposed regulations provide a path for the promotion of equal opportunities for all, non-discrimination and social inclusion, by committing to leave no one behind. The proposed regulations prioritise the implementation of the European Pillar of Social Rights through targeted actions and a strengthened link with the European Semester process. In the EC proposal, ESF+ investments should be closely aligned with Country Specific Recommendations and country analysis provided under the Semester. In addition, the ESF+ will contribute to the overall objective of smart, inclusive and sustainable growth beyond 2020, a clear reference to the United Nations Sustainable Development Goals.

The proposed regulations reflect the EC's commitment to foster the transition from institutional to community-based care through targeted investments in the period 2021-2027. The ESF+ and the European Regional Development Fund (ERDF) regulations foresee that thousands of children, persons with disabilities, persons with mental health problems, homeless people and their families will have access to community-based social services and thus will be included in the community.

In particular, the EEG acknowledges the importance of the following:

- The ESF+ shall support specific targeted actions to promote the transition from residential/institutional care to family and community-based care, in particular for those who face multiple discrimination (ESF+ article 6 and recital 28);
- The ESF+ and the ERDF should be used to promote equal access for all to quality, non-segregated and inclusive education and training, in particular for disadvantaged groups (ERDF article 2.1(d)(ii); ESF+ article 4.1(v) and recital 15);
- ESF+ should support the implementation of policies targeting the most disadvantaged people and should be also used to enhance timely and equal access to affordable, sustainable and high-quality family and community-based care services (ESF+ recital 18);

- ESF+ must be used to promote the inclusion of persons with disabilities on an equal basis with others and contribute to the implementation of the United Nations Convention on the Rights of Persons with Disabilities (CRPD).¹ In the implementation of the funds, Member States should respect the obligations under the CRPD (recital 5 proposed Common Provision Regulations (CPR); ESF+ recital 28; ERDF recital 5);
- The funds should not support any action that contributes to segregation or to social exclusion (CPR recital 5; ESF+ recital 28; ERDF recital 5);
- The EC proposes to strengthen the principle of conditioning funding upon compliance with the Charter of Fundamental Rights, the CRPD and the inclusion of measures for a shift from institutional to community-based care (horizontal enabling conditions and enabling condition 4.3);
- Each member of the Monitoring Committees shall have voting rights, signifying a strengthened role for partners (CPR article 34).

Acknowledging the crucial role that the EU has already played in championing the issue of deinstitutionalisation, we are looking forward to working with the European Parliament and the Council of the EU to ensure that the EC's commitment of leaving no one behind is realized.

For this, the EEG has four main demands:

1. Increase to 30% of ESF+ earmarked for social inclusion

The EEG acknowledges the proposed increase from 20% to at least 25% of the ESF+ allocation to advance social inclusion and poverty reduction. Disadvantaged groups, including the inactive and long-term unemployed, children, marginalised communities such as the Roma, homeless people, older persons, the most deprived and third country nationals are specifically identified under the inclusion policy strand of ESF+. However, the scope of the ESF+ will be broadened to include, for example, the socio-economic integration of third country nationals in the next programming period. The EEG considers it crucial that the earmarked 25% is increased to 30% to ensure that ESF+ will be allocated to foster the social inclusion of all disadvantaged groups.

2. Ensure that investments support deinstitutionalization reforms

Continuing the work started with the 2014-2020 ESF regulation, the EEG welcomes the important steps that the EC has taken in the proposed ESF+ regulation to strengthen its commitment in promoting the transition from institutional to community-based care.

In particular, we are pleased to see that in the proposed ESF+ regulation the transition from institutional to community-based care has been included in Article 6.2 on 'equality between men and women and equal opportunities and non-discrimination'. This is an important addition, which clearly reflects the commitment of the EC to prioritize deinstitutionalization reforms in all programmes implemented under the shared management under the ESF+ strand.

In addition, we welcome that Recital 28 of proposed ESF+ makes a clear reference to the promotion of the transition from institutional to community-based care, especially for those who face multiple discrimination, and underscores that ESF+ investments shall not support actions that lead to social exclusion or segregation of people.

The EEG calls on the European Parliament and the Council to ensure that the abovementioned elements are maintained and adopted in the regulations.

¹ The United Nations Convention on the Rights of Persons with Disabilities has been ratified by the EU and all Member States and thus is placed between EU primary and secondary law.

We regret, however, that the transition from institutional to community-based care is no longer included as an investment priority under the proposed ERDF regulation.

Article 2(d) of the proposed ERDF regulation prioritises the implementation of the European Pillar of Social Rights through “increasing the socioeconomic integration of marginalised communities, migrants and disadvantaged groups, through integrated measures including housing and social services”. We propose that the wording of this provision is strengthened by including the transition from institutional to community-based care as a measure.

ERDF investments also have a crucial impact on the social inclusion of people, especially of groups in vulnerable situations. ***For the 2012-2027 funding period, we must ensure that the ERDF is invested in services and infrastructures that support social inclusion of people and that the use of funds for building or renovating segregating institutional care facilities is explicitly prohibited***, including under Article 6 of the proposed ERDF regulation.

In addition, ***we urge the European Parliament and Council to ensure that actions supported by the funds aim to improve the social inclusion of persons with disabilities by supporting the implementation of accessible infrastructures and services. To that end, specific accessibility requirements must be introduced in article 67 of the CPR, article 2 of the proposed ERDF regulation and article 6 of the proposed ESF+ regulation.***

3. Ensure access to funding is made conditional to promote the shift from institutional to community-based care

The introduction of ex-ante conditionality 9.1 in the current CPR supported the development of deinstitutionalization reforms in Central and Eastern European countries.

We welcome that in the 2021-2027 period, the EC proposes to strengthen the principle of conditioning funding by introducing enabling conditions that will need to be applied and monitored throughout the period.

This includes conditionalities in the area of public procurement, state aid and in relation to the application of the [European Charter of Fundamental Rights](#) and the [CRPD](#). The EU must live up to its human rights obligations when adopting the regulations for the next funding period and enforce the respect of those rights across all EU-financed projects.

Furthermore, the EEG welcomes that the fund specific [enabling condition 4.3](#) proposes a national strategic framework for poverty reduction and social inclusion which would enable all EU Member States to use ESF+ and ERDF for the transition from institutional to community-based care. It would also ensure that civil society and social partners can closely participate in the design, implementation, monitoring and review of the development of national strategic frameworks.

In order to ensure coherence among the different enabling conditions, the EEG believes that it is important that investments in health care infrastructure and services also take into account the shift from institutional to community-based care (proposed enabling condition 4.4 of the ERDF and 4.3.4 of the ESF+).

4. Strengthen the Partnership Principle and the European Code of Conduct on Partnership

We call on the European Parliament and the Council to introduce a revised European Code of Conduct on Partnership (ECCP) focusing “on doing more with better partnerships” in the regulations of the 2021-2027, by including specific provisions in the proposed CPR. The [Review of the ECCP](#), developed by the Thematic Network on Partnership, should be used as a reference document for the development of the revised ECCP.

The Partnership Principle is key to ensure that EU funds are being allocated and used in the best interest of people. It has the potential to guarantee that investments are made in a collaborative way and that different stakeholders participate in the design, implementation, monitoring and evaluation of programmes. The recognition of the importance of the Partnership Principle had also been manifested in the 2014-2020 funding period through the CPR and the ECCP. The ECCP has been a breakthrough regulation in the current funding period and, despite challenges in the implementation, its ambition has been welcomed by Member States. There are many positive examples on partnership that can be demonstrated from the current funding period.

We would like to see a further strengthened Partnership Principle to ensure the **meaningful** and not only adequate participation of social partners, human rights bodies and civil society organisations, as well as children, young people and other involved parties, in the delivery of employment, education and social inclusion policies supported by the ESF+ strand under shared management (Article 8.1).

In addition, we want to propose that in the ESF+ regulations **at least 2% of the ESF+ is earmarked** under each programme for the capacity building of social partners and civil society organisations (Article 8.2).



EUROPEAN EXPERT GROUP ON TRANSITION FROM INSTITUTIONAL TO COMMUNITY-BASED CARE

The European Expert Group on the Transition from Institutional to Community-based Care (EEG) is a broad coalition gathering stakeholders representing people with care or support needs and their families, including children, people with disabilities, homeless people, people experiencing mental health problems; as well as service providers, public authorities and intergovernmental organisations. The Group has as its mission the promotion of person-centred, quality and empowering models of services and formal and informal care that fully respect the human rights of all people with care or support needs. The Group supports national efforts to implement the necessary reforms, in compliance with the United Nations Convention on the Rights of Persons with Disabilities (in particular with Article 19), the United Nations Convention on the Rights of the Child and the European Charter of Fundamental Rights.

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