



COVID-19 and people with disabilities

Assessing the impact of the crisis and informing disability-inclusive next steps

Austria

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1 Executive summary

Disability inclusivity of disaster and recovery planning

Neither legal acts nor action plans for disaster management and recovery include references to or specific measures for persons with disabilities.

Impact of the virus on mortality among people with disabilities

There are no data available for the impact of the virus on mortality among persons with disabilities. Data are available with regard to persons living in care homes (but with no explicit reference to old(er) age and/or disability): By December 2020 there have been 1 500 deaths in care homes (out of 4 260 deaths in total) in Austria.¹

Due to missing data, there is also no evidence of a disproportionate rate of mortality among persons with disabilities and no evidence of the living arrangements of those that have died.

Outline of key concerns about a disproportionately negative impact of the COVID-19 crisis on people with disabilities

1. See chapter 2, 4.6 and 4.3, 7, 9 and 12: Persons with disabilities were not considered in measures of the crisis management at all in the beginning of the COVID-19. Neither legal acts nor action plans for disaster management include disability related references. DPOs have needed to point out the specific situation of persons with disabilities and their particular needs because otherwise they would not be automatically included and specifically be considered according to their needs. As of February 2021, the criticism by DPOs has not yet resulted in changes in the way policies and measures regarding the overall crisis management situation are managed.

If persons with disabilities are considered, the government tends to refer to institutional settings like special schools or residential facilities but does not take inclusive settings into consideration like inclusive education in regular schools or living in a private household with personal assistance. This reflects a strongly reductive and old-fashioned perception about disability/persons with disabilities which is not in line with the UN CRPD. For example, when formulating the Austrian vaccination strategy, first, persons with disabilities living outside of institutions were 'forgotten' and not part of the vaccination strategy. Only after many weeks of 'lobbying' for their rights, DPOs (such as BIZEPS, the Viennese Centre for Independent Living) 'forced' an adaptation of the vaccination strategy. This is a telling example of the still negative and exclusionary societal perception about persons with disabilities which is still dominant in the politics of the Austrian government.

2. See chapter 13.2 - problems on the labour market: In times of the COVID-19 pandemic, persons with disabilities lose their jobs (instead of being on short-time work)

¹ Video and slides of 14 December LTC Covid webinar on International experiences: 2nd, 3rd COVID-19 waves, vaccines and beyond in the long-term care sector, <https://ltccovid.org/tag/webinar/>; the slide in this webinar also refers to older data, e.g. provided in German by Bundesministerium für Soziales, Gesundheit, Pflege und Konsumentenschutz (2020), COVID-19 in Alten- und Pflegeheimen, 2020 (Endbericht Stand: Juli 2020). Wien.

more often than persons without disabilities, and it is often not possible for persons with disabilities to get another/new job.

3. See chapter 7.2, 10.2, 12.2 - isolation and exclusion: Closures of e.g., day structures/vocational therapies lead to isolation, stress and to a severe reduction of physical social contacts (especially for persons with intellectual disabilities). In residential facilities persons with disabilities experienced and still experience much harder and longer lasting restrictions of personal mobility and freedom than persons in private households. In spring 2020, there was a plan to release all students with special educational needs from compulsory education for the rest of the school year 2019/20.

Examples of good practice

Independent Living Austria created a website which provides detailed information and advice for persons with high needs of support who organise their everyday life with personal assistance. The focus is on persons with disabilities and their assistants on how to reduce the risk of getting infected. Particular attention is paid to persons with permanently assisted ventilation are. Information on how to best organise a team of Personal Assistants in the situation of a pandemic, on personal health self-monitoring, as well as measures for hygiene and protection is included. The website also includes an analysis of the situation of persons with high support needs that explains why they constitute a high-risk group and why certain protective measures need to be taken, e.g., frequent screening of personal assistants (see chapter 9.2).

A so called COVID-19 crisis group disability-services was installed by the provincial government of Tyrol which includes representatives of service providers, users and relatives of persons with disabilities. This group holds meetings on a regular basis and focuses on the needs of persons with disabilities during the COVID-19 crisis (see chapter 14.1).

Recommendations and opportunities for change

1. Persons with disabilities and old(er) persons as well as their respective organisations should be actively included in crisis management, crisis units, and the development of COVID-19 measures. References to persons with disabilities and old people need to be included in legal acts for crisis and disaster management on Federal as well as on Provincial level. References on how to consider persons with disabilities in a situation of crisis and disaster need to be included in action plans for crisis and disaster on all measures.

2. Data with regard to persons with disabilities need to be collected. There is no evidence on the concrete impact of the COVID-19 pandemic on persons with disabilities which makes it nearly impossible to evaluate the situation. Anecdotal evidence exists but is, of course, not sufficient and cannot replace solid data. This data must include persons with disabilities living in private households as well as those living in any kind of institution.

3. Information as well as online tools for registration e.g., to screening or vaccination need to be fully accessible for all persons with disabilities.

2 Disability-inclusive disaster and recovery planning

[Article 11 – Situations of risk and humanitarian emergencies & Article 4\(3\) – involvement of persons with disabilities](#)

2.1 Commitments to disability in disaster management and recovery strategies

In Austria, the Federal Ministry of the Interior is responsible for the coordination of National Crisis Management and National Disaster Management, Crisis Response, International Disaster Relief and Civil Protection.² Preventive measures fall within the responsibility of the Federal government and the Provinces. Actions to combat, eliminate and mitigate the effects of disasters which have occurred or are imminent (i.e., disaster relief) fall primarily within the responsibility of the federal provinces. The provincial acts define the command-and-control structures at the level of the Municipalities, Districts, and Federal Provinces. The Federal authorities have complementary tasks.³

For the EDE report Tyrol and Vienna were chosen as examples for crisis and disaster management on the level of the provinces. Neither the provincial act for Tyrol (Tyrolean Act for the Management of Disaster)⁴ nor the provincial act for Vienna (Vienna Act for Management of Help during a Disaster or Crisis)⁵ includes any references to persons with disabilities, to accessibility or the need for reasonable accommodation.

In 2018, the Litigation Association of NGOs Against Discrimination published a statement regarding the draft amendment of the Vienna Act for Management of Help during a Disaster or Crisis. The Litigation Association demanded:

- it should be distinctly made sure that measures to cope with disasters consider persons with disabilities; it should be ensured that persons with disabilities receive the same standard of protection and support like all other persons;
- prevention measures like prevention plans and plans for actions in hospitals need to consider persons with disabilities; alarm plans need to consider that persons with sensory as well as psycho-social or intellectual disabilities are effectively informed;
- education for prevention for the self-protection of the population needs to be adapted to persons with disabilities, e.g. by providing information in plain language;
- emergency plans need to consider persons with disabilities;

² See Civil Protection, and Disaster Management in Austria (in English): https://www.bmi.gv.at/204_english/start.aspx.

³ See Disaster Relief of the Federal Provinces (in English) https://www.bmi.gv.at/204_english/skkm/relief.aspx.

⁴ See Tiroler Katastrophenmanagementgesetz <https://www.ris.bka.gv.at/GeltendeFassung.wxe?Abfrage=LrT&Gesetzesnummer=20000180&ShowPrintPreview=True>.

⁵ See Wiener Katastrophenhilfe- und Krisenmanagementgesetz <https://www.ris.bka.gv.at/GeltendeFassung/LrW/20000075/W-KKG%2c%20Fassung%20vom%2013.02.2021.pdf>.

- in-service training should include the issue of disability awareness and equality.⁶

Action-plans for crisis management are not published for the public and are only available to entitled persons.⁷ In a public meeting of the Tyrolean Monitoring Committee for the UN CRPD Elmar Rizzoli, Head of the COVID-19 crisis management group in Tyrol, argued that in the situation of a disaster many people are in need of help, with or without disabilities. Thus, in Rizzoli's opinion, there is no need to differentiate between persons with and without disabilities.⁸ This opinion has not been questioned publicly yet by DPOs or other organisations. With regard to crisis management, the written statement of the Tyrolean Monitoring Committee includes some general and the following particular issues: Persons with disabilities should be included in crisis management, and emergency plans should be elaborated for care and residential homes for old(er) persons.⁹

2.2 Involvement of people with disabilities in disaster management and recovery strategies

Generally, people with disabilities and their organisations are not included in disaster planning and in recovery planning. At the beginning of the COVID-19 pandemic people with disabilities and their organisation were not included in crisis management teams groups and this was heavily criticised, e.g., by the Austrian Disability Council and the Federal Monitoring Committee for the UN CRPD.¹⁰ As a consequence, one representative of the Austrian Disability Council is now participating in the Federal crisis management group.¹¹

In the first phase of COVID-19 persons with disabilities were generally defined as a group at (higher) risk which mainly resulted in more restrictions in personal freedom for this group compared to non-disabled persons. This was criticised and although persons with disabilities were defined as a group at risk their needs for support were neither considered by the crisis management nor was this an issue discussed or reported in public.¹² The main public and political focus was on persons in residential

⁶ See Stellungnahme zum Entwurf eines Gesetzes, mit dem das Wiener Katastrophenhilfe- und Krisenmanagementgesetz (W-KKG) geändert wird, <https://www.klagsverband.at/klav/wp-content/uploads/2018/03/Stel-WKKG.pdf>.

⁷ Personal communication with an employee of the provincial government of Tyrol on 11 Feb 2021.

⁸ Rizzoli, Elmar (2020) (Head of the COVID-19 crisis management group in Tyrol) Presentation at the Public Meeting of the Tyrolean Monitoring Committee for the UN CRPD on Persons with Disabilities and COVID-19 on 9 Dec 2020. Video: <https://www.youtube.com/watch?v=NWzh-cp-NK8>. Presentation Rizzoli from 01:36 until 01:51:10.

⁹ Tiroler Monitoringausschuss (2021), Menschen mit Behinderungen im Krisen- und Katastrophenfall. Stellungnahme. https://www.tirol.gv.at/fileadmin/themen/gesellschaft-soziales/UN-Konventionen/tiroler-monitoring-ausschuss/dokumente/stellungnahmen/Stellungnahme_Corona_2021.pdf, p. 47.

¹⁰ See press release of the Austria Disability Council in April 2020: <https://www.behindertenrat.at/2020/04/corona-krisenstaebe-schliessen-expertise-von-menschen-mit-behinderungen-aus/>.

¹¹ See FRA (2020), Coronavirus pandemic in the EU – Fundamental Rights Implications. Country report Austria, pp. 9-10, https://fra.europa.eu/sites/default/files/fra_uploads/at_report_on_coronavirus_pandemic_june_2020.pdf.

¹² See: Krisenmanagement im Kontext Behinderung am Beispiel der COVID-19-Pandemie. In: BSGPK (2020) Evaluierung des Nationalen Aktionsplans Behinderung 2012–2020, pp. https://www.sozialministerium.at/dam/jcr:ec106d2c-7346-4360-8756-975de92d9576/Evaluierung_des_NAP_2012_2020.pdf, pp. 659;

homes for old people and problems related to travel bans which affected the live-in migrant carers.¹³

2.3 Disability impact assessments and research to inform disaster management and recovery planning

No information is available on any kind of research to assess the situation of persons with disabilities with regard to disaster and recovery planning in Austria. In the framework of the evaluation of the National Action Plan Disability (NAP) a small qualitative ad hoc inquiry was carried out regarding the situation of persons with disabilities during the first phase of the COVID-19 pandemic.¹⁴ The lack of persons with disabilities in crisis management teams as well as their exclusion from decision making processes was criticised. It is assumed that there is a lack of awareness of the need to include persons with disabilities among decision makers and politicians. The general marginalisation of disability policy in Austria is mentioned as the main reason for this by several interviewees. During the COVID-19 crisis this became effective in a general lack of attention regarding the needs of persons with disabilities.¹⁵

2.4 Use of disaster management and recovery planning funds

A general disaster fund is regulated in the Act for Disaster Fund.¹⁶ It aims at the following main purposes: damage of private property, damage of property of regional authorities, acquisition of trucks and other technical equipment of fire brigades and preventive measures. No disability related references are included in this act.

Manifold measures are taken by the Austrian government to fight the repercussions of the COVID-19 crisis. These are, among others, Reduction of wage and income tax, increase of the social security refund for private persons¹⁷ and fixed-cost subsidies,

Tiroler Monitoringausschuss (2021). Menschen mit Behinderungen im Krisen- und Katastrophenfall. Stellungnahme. https://www.tirol.gv.at/fileadmin/themen/gesellschaft-soziales/UN-Konventionen/tiroler-monitoring-ausschuss/dokumente/stellungnahmen/Stellungnahme_Corona_2021.pdf, p. 20.

¹³ See e.g. <https://ltccovid.org/2020/03/26/report-planning-for-expected-shortages-in-migrant-and-family-care-in-austria/>.

¹⁴ See: Krisenmanagement im Kontext Behinderung am Beispiel der COVID-19-Pandemie. In: BSGPK (2020) Evaluierung des Nationalen Aktionsplans Behinderung 2012–2020, pp. 645–671. https://www.sozialministerium.at/dam/jcr:ec106d2c-7346-4360-8756-975de92d9576/Evaluierung_des_NAP_2012_2020.pdf.

¹⁵ See: Krisenmanagement im Kontext Behinderung am Beispiel der COVID-19-Pandemie. In: BSGPK (2020) Evaluierung des Nationalen Aktionsplans Behinderung 2012–2020, p. 657. https://www.sozialministerium.at/dam/jcr:ec106d2c-7346-4360-8756-975de92d9576/Evaluierung_des_NAP_2012_2020.pdf.

¹⁶ <https://www.ris.bka.gv.at/GeltendeFassung.wxe?Abfrage=Bundesnormen&Gesetzesnummer=10005030>.

¹⁷ See information in English: <https://www.bmf.gv.at/en/current-issues/Corona/information/information-coronavirus/Benefits-for-citizens.html>.

tax relief through loss distribution, reduced VAT rates,¹⁸ turnover-substitute for companies.¹⁹

An additional fund for hardship of families was installed which allows families in financial trouble through no fault of their own to apply for subsidies.²⁰ For the calculation of the granted amount all children, including those with disabilities, are considered, but there is no specific or additional financial support for children with disabilities. No information is available on any fund with a focus on or specific references to adults with disabilities.

For recipients of income support, two additional benefits can be applied for which are defined in the COVID-19 Act for Poverty:²¹ EUR 100.- per child living in a household where at least one person receives income support as well as EUR 100.- subsidy for energy costs for households where at least one person receives income support. Persons with disabilities are not mentioned, specifically in the Act.

Basically, all these measures can be used by persons with disabilities, too.

¹⁸ See information in English: <https://www.bmf.gv.at/en/current-issues/Corona/information/information-coronavirus/Together-Stronger-than-Before---Benefits-for-for-companies.html>.

¹⁹ See information in English: <https://www.bmf.gv.at/en/current-issues/Corona/information/information-coronavirus/NEW--Latest-information-on-turnover-substitute.html>.

²⁰ <https://www.bundeskanzleramt.gv.at/service/coronavirus/coronavirus-infos-familien-und-jugend/corona-familienhaerterausgleich.html>.

²¹ <https://www.ris.bka.gv.at/GeltendeFassung.wxe?Abfrage=Bundesnormen&Gesetzesnummer=20011401>.

3 Mortality connected to COVID-19 among people with disabilities

Article 10 – The right to life

3.1 Official statistics available concerning the overall mortality rate of people with disabilities

No. Data are available with regard to persons living in care homes (but with no explicit reference to old(er) age and/or disability). In a webinar,²² the International Long-Term Care Policy Network provided data on Austria (last update 9 Dec 2020): 1 550 deaths in care homes (out of 4 260 total deaths). In general, it²³ can be said that since the beginning of the pandemic, the mortality of persons aged 65+, especially those with pre-existing chronic conditions, is very high: The medical support/supply of this 'group' can be assessed as problematic and sub-optimal in Austria.

The AGES Dashboard COVID-19²⁴ (based upon the Epidemiologisches Meldesystem/Epidemiological Registration Service) states on 14 February 2021 the following percentages regarding the number of deaths per 100 infection cases related to age group and gender in Austria: 84+: 28.9 % male, 17.7 % female; 75-84: 14.4 % male, 7.7 % female.

No data is available on the mortality rate of people with disabilities during the period of the pandemic and for the same period in 2019 and 2020.

No data available concerning the mortality rate of people with disabilities during COVID-19 been proportionately higher, lower or the same as the mortality rate for the general population.

3.2 Official statistics available concerning the mortality rate of people with disabilities who have died from complications connected to COVID-19

No concrete information available concerning how many people with disabilities have died from complications connected to COVID-19 during the period of the pandemic.

In a newspaper article²⁵ from 11 February 2021, it is stated that so far, 50 persons have died in institutions for persons with disabilities, but it is unclear, whether this is the number of persons with disabilities alone or persons with disabilities and staff (both are mentioned in the same paragraph). No age-related information is provided either.

²² Video and slides of the 14 December LTC covid webinar on International experiences: 2nd, 3rd COVID-19 waves, vaccines and beyond in the long-term care sector, <https://ltccovid.org/tag/webinar/>; the slide in this webinar also refers to older data, e.g. provided in German by Bundesministerium für Soziales, Gesundheit, Pflege und Konsumentenschutz (2020), COVID-19 in Alten- und Pflegeheimen, 2020 (Endbericht Stand: Juli 2020). Wien.

²³ Following Hofmarcher and Singhuber (2020) in their argumentation; in German: Hofmarcher, Maria M. and Christopher Singhuber (2020), Fact Book Leistungskraft regionaler Gesundheitssysteme in Zeiten von COVID-19. Ambulante Versorgung im Bundesländervergleich. August 2020. Health Systems Intelligence Austrian Health Academy Research Report, p. 75.

²⁴ In German: https://covid19-dashboard.ages.at/dashboard_Tod.html.

²⁵ In German: Scherndl, Gabriele and Ruep, Stefanie (2021), Testpflicht für Mitarbeiter in Behindertenheimen. Der Standard 11. Februar 2021, 9:00, <https://www.derstandard.at/story/2000124035994/was-sich-nun-in-den-behindertenheimen-aendert>.

No information available of all people who died from complications connected to COVID-19 during the period of the pandemic, what proportion were people with disabilities.

No information available concerning the place of death of people with disabilities with a confirmed diagnosis of COVID-19 (hospital, care or nursing home, private home/community, other).

No information available concerning the place of residence of people with disabilities that have died with a confirmed diagnosis of COVID-19.

4 Access to health

[Article 25 – Health](#)

4.1 Emergency measures

Pre COVID-19 existing emergency rules or guidelines do not refer to disability and age status as a criteria to prioritise entitlement to healthcare. Emergency rules - such as the Austrian COVID-19 vaccination strategy - were only developed after the outbreak of the pandemic.

In this context, disability and age status as well as living arrangements make a difference when it comes to prioritising entitlement to healthcare (in this specific case with regard to the COVID-19 vaccination; see also chapter 4.3). Schmidt et al.²⁶ argue that with regard to long-term care settings, various "measures have been put in place to increase capacity in the long-term care sector since the onset of the COVID-19 crisis. This happened alongside an allocation of an additional 100 million euros to the sector. Some of the money has been specifically allocated to increase bed capacity for people with long-term care needs, e.g. via currently closed rehabilitation centres. "Also, Schmidt et al. argue that in "addition, The Federal Ministry of Social Affairs, Health, Care and Consumer Protection has published recommendations for preventive and protective measures for personal carers and staff working in semi-residential care and in home care."²⁷ During the outbreak, the Österreichische Palliativgesellschaft (Austrian Association for Palliative Care) published a position paper on palliative care.²⁸

Hence, in the context of the pandemic, age status and/or disability status was/is used as a criterion to prioritise entitlement to healthcare and access to health services - e.g. persons from a certain age onwards (80+), persons living in residential care homes, persons with 24-hour-care, and high risk patients will be vaccinated in phase 1.²⁹

Regarding the negative impact of disability and/or age status, the ÖGARI (Austrian Society for Anaesthesiology, Reanimation and Intensive Care) ICU - Triage checklist³⁰ in case of lack of resources provides a 'good' example: the ADL (activity of daily life) core and the FRAILITY score both negatively refer to disability and age(ing) as being not able to do something independently. This Triage checklist intentionally mixes the need for support with illness and hence, with not being given an ICU bed when it comes to bed shortages. In November 2020, the Österreichische Behindertenrat (Austrian

²⁶ Schmidt, Andrea E. et al. (2020), The impact of COVID-19 on users and providers of long-term care services in Austria (last updated 12 July 2020), p. 6.

²⁷ Schmidt, Andrea E. et al. (2020), The impact of COVID-19 on users and providers of long-term care services in Austria (last updated 12 July 2020), p. 7.

²⁸ Schmidt, Andrea E. et al. (2020), The impact of COVID-19 on users and providers of long-term care services in Austria (last updated 12 July 2020), p. 10. Position paper (in German): https://www.palliativ.at/index.php?eID=tx_securedownloads&p=17&u=0&q=0&t=1615805033&hash=0a060a637ed12d085dbfa03c12e6c24fcb7b7d94&file=/fileadmin/redakteur/images/news/OPG.DokumentCOVID19.final.2020.03.20.pdf.

²⁹ In German: Ladstätter, Martin (2021), Wiener Impfplan: Behinderte Menschen mit Persönlichen AssistentInnen ab 15. Februar 2021, <https://www.bizeps.or.at/wiener-impfplan-behinderte-menschen-mit-persoelichen-assistentinnen-ab-15-februar/>.

³⁰ Dated 26 March 2020, in German: https://www.oegari.at/web_files/cms_daten/gari_checkliste_triage_icu_final_26.3.2020.pdf.

Disability Council) referred³¹ to the multiple ways persons with disabilities might be exposed to Triage procedures and called for solidarity within the context of an increasingly overloaded health system.

So far, no legal cases (at least, no publicly known ones) have been brought to challenge the impact of any of these measures on persons with disabilities.

In § 10 (2) exceptions for the closure of care homes and institutions for old(er) persons and persons with disabilities is regulated.³² Personal assistants are not mentioned explicitly (as a term) but are meant by § 10 (5), referring to persons for support and care who do this on a regular basis. In § 10 (9) it is regulated that the measures for care homes and institutions for old(er) persons and persons with disabilities must not be disproportionate and must not lead to unreasonable hardship.³³ Personal assistants are mentioned in recommendations³⁴ by the Federal Ministry of Social Affairs, Health, Care and Consumer Protection published on 18 June 2020 for regional institutions and programmes for persons with disabilities, arguing that also with regard to personal assistants, the situation should gradually return to daily routine and measures should be relaxed.³⁵

4.2 Access to hospital treatment for COVID-19

No data available on the number of people with disabilities who, because of COVID-19 symptoms, have been hospitalised and admitted to intensive care units.

4.3 Treatment for COVID-19 in congregate settings

No data available on the number of people with disabilities who were treated for COVID-19 inside care/nursing homes and other congregate settings and not admitted to hospital.

In a press conference and press statement³⁶ by the Volksanwaltschaft (Austrian Ombudsman Board) on 1 July 2020, it is mentioned that single rooms are important for not further spreading COVID-19 infections in care homes for old(er) persons. At that time, the following percentage (referring to the whole number of inhabitants of care

³¹ In German: Österreichischer Behindertenrat (2020). Triage: Menschen mit Behinderungen mehrfach gefährdet <https://www.bizeps.or.at/triage-menschen-mit-behinderungen-mehrfach-gefaehrdet/>.

³² In German: 58. Verordnung des Bundesministers für Soziales, Gesundheit, Pflege und Konsumentenschutz, mit der besondere Schutzmaßnahmen gegen die Verbreitung von COVID-19 getroffen werden (4. COVID-19-SchuMaV), ausgegeben am 5. Februar 2021, https://www.ris.bka.gv.at/Dokumente/BgblAuth/BGBLA_2021_II_58/BGBLA_2021_II_58.html.

³³ In German: 58. Verordnung des Bundesministers für Soziales, Gesundheit, Pflege und Konsumentenschutz, mit der besondere Schutzmaßnahmen gegen die Verbreitung von COVID-19 getroffen werden (4. COVID-19-SchuMaV), ausgegeben am 5. Februar 2021, https://www.ris.bka.gv.at/Dokumente/BgblAuth/BGBLA_2021_II_58/BGBLA_2021_II_58.html.

³⁴ Bundesministerium für Soziales, Gesundheit, Pflege und Konsumentenschutz (2020), Empfehlungen zur schrittweisen Rückkehr zum Alltag in den Einrichtungen und Programmen der Behindertenhilfe der Länder, Stand: 18. Juni 2020, p. 2, p. 3 and p. 8.

³⁵ European Union Agency for Fundamental Rights (2020), Coronavirus pandemic in the EU - Fundamental Rights Implications. Austria, 3 June 2020, p. 9.

³⁶ In German: Volksanwaltschaft (2020), Pressekonferenz Pflegeeinrichtungen in Zeiten der Corona-Pandemie. 1. Juli 2020, 10 Uhr, p. 8.

homes in the Laender) of COVID-19 cases were known - ranging between 47 % in Tyrol, 42 % in Vienna, and 0 % e.g., in Burgenland.

4.4 Public health promotion and testing during the pandemic

See also chapter 4.6. Only after the lack of accessible information had been criticised by different DPOs or monitoring bodies, gradually more information is being provided in alternative formats. See chapter 14.3.

In the beginning, there was a lack of accessible information for persons with disabilities. Just gradually, press conferences were simultaneously translated into Austrian sign-language and information on COVID-19, prevention, protection and measures taken by the government were provided in plain language³⁷ as well as in sign language.³⁸

People with intellectual disabilities complained that it was not possible for them to use the Austrian wide COVID-19 phone helpline to receive information particularly for persons with intellectual disabilities and in plain language. The helpline is mostly for persons who need information on the virus but does not provide information for everyday issues like how to deal with fears. In a public statement of the Austrian network for Self-Advocacy persons with intellectual disabilities ask for a specific contact-point.³⁹ As a consequence, the Provincial Government of Tyrol established a consultation-hour twice a week which provides information and consultation in plain language.⁴⁰

In June 2020, the DPO Hilfsgemeinschaft der Blinden und Sehschwachen Österreichs pointed to the fact that the Austrian Red Cross' Stopp Corona app (for contact tracing) is not accessible for blind persons and visually impaired persons.⁴¹

4.5 Impact of the COVID-19 crisis on access to health services for general or pre-existing physical or mental health conditions

No data available concerning disability-related data about the impact of the COVID-19 crisis on access to health services related to pre-existing physical or mental health conditions or general health conditions, including access to treatments and medication.

See also chapter 4.1.

During the pandemic, a near collapse of the system of 24-hour-care to place and challenges for mobile healthcare services became obvious.⁴²

³⁷ See e.g. the 3rd COVID-19 ordinance in plain language provided by the Ministry for Social Affairs, Health and Consumer Protection https://www.sozialministerium.at/dam/jcr:f28193fe-3f31-42a3-a02c-fe40287812bc/Covid-Notma%C3%9Fnahmen-Veordnung_A2_kt_2021-01-25.pdf.

³⁸ See e.g. information on COVID-19 in Austrian sign-language provided by the Ministry for Social Affairs, Health and Consumer Protection <https://www.oegsbarrierefrei.at/bm-sozial/coronavirus/>.

³⁹ See: Wie ist es den Menschen mit Lern-Schwierigkeiten in der Corona-Krise gegangen? https://www.behindertearbeit.at/wp-content/uploads/Stellungnahme_Corona_NetzwerkSVOe_15-07-2020.pdf, p.4; personal communication with Monika Rauchberger on 15 Feb 2021.

⁴⁰ See press release of the Provincial Government of Tyrol in December 2020: <https://www.tirol.gv.at/meldungen/meldung/menschen-mit-behinderungen-im-krise-und-katastrophenfall/>.

⁴¹ European Union Agency for Fundamental Rights (2020), Coronavirus pandemic in the EU - Fundamental Rights Implications. Austria, 2 July 2020, p. 10.

⁴² European Union Agency for Fundamental Rights (2020), Coronavirus pandemic in the EU - Fundamental Rights Implications. Austria, 3 June 2020, p. 17.

4.6 Vaccination programmes

See also chapter 4.1 and 4.3.

Age status and/or disability status was/is used as a criterion to prioritise entitlement to healthcare and access to health services - e.g. persons from a certain age onwards (80+), persons living in residential care homes, persons with 24-hour-care, and high risk patients will be vaccinated in phase 1.⁴³

When formulating the Austrian vaccination strategy, first, persons with disabilities living outside of institutions were 'forgotten' and not part of the vaccination strategy. Only after many weeks of 'lobbying' for their rights, DPOs (such as BIZEPS, the Viennese Centre for Independent Living) 'forced' an adaptation of the vaccination strategy.⁴⁴ Now, persons with disabilities living outside of institutions with their personal assistants will also be vaccinated in phase 1.⁴⁵

Mid of February 2021 the Österreichische Gesellschaft für Psychiatrie, Psychotherapie und Psychosomatik (Austrian Society for Psychiatry, Psychotherapy and Psychosomatics) published a statement⁴⁶ on the prioritisation of certain 'groups' within society in the vaccination plan from the perspective of persons with mental health conditions (who should also be prioritised).

The online registration for the COVID-19 vaccination is not accessible for blind persons and visually impaired persons, as the Österreichische Behindertenrat (Austrian Disability Council) argued in a statement on 25 January 2021.⁴⁷

Already in July 2020, the Volksanwaltschaft (Austrian Ombudsman Board) argued in a press conference and press statement⁴⁸ that information for old(er) persons and persons with disabilities needs to be accessible.

In December (16 December) 2020, the Lebenshilfe Österreich (organisation for persons with intellectual disabilities) argued in a statement that information on the vaccination needs to be accessible for persons with intellectual disabilities for being able to decide independently.⁴⁹

⁴³ In German: Ladstätter, Martin (2021), Wiener Impfplan: Behinderte Menschen mit Persönlichen AssistentInnen ab 15. Februar 2021, <https://www.bizeps.or.at/wiener-impfplan-behinderte-menschen-mit-persoelichen-assistentinnen-ab-15-februar/>.

⁴⁴ Ferner, Jakob (2021), Menschen mit Behinderungen fordern Impfstrategie, <https://www.bizeps.or.at/menschen-mit-behinderungen-fordern-impfstrategie/>.

⁴⁵ In German: Ladstätter, Martin (2021), Wiener Impfplan: Behinderte Menschen mit Persönlichen AssistentInnen ab 15. Februar 2021, <https://www.bizeps.or.at/wiener-impfplan-behinderte-menschen-mit-persoelichen-assistentinnen-ab-15-februar/>.

⁴⁶ In German: Österreichische Gesellschaft für Psychiatrie, Psychotherapie und Psychosomatik (2021), Stellungnahme COVID-19 Impfstrategie: Menschen mit schweren psychischen Erkrankungen gehören zur Risikogruppe. via <https://www.oegpp.at/news/aktuelles/detail/news/covid-19-impfstrategie-menschen-mit-schweren-psychischen-erkrankungen-gehoeeren-zur-risikogruppe/>.

⁴⁷ In German: Österreichischer Behindertenrat (2021), Online Impfanmeldung für Alle? Nein! <https://www.bizeps.or.at/online-impfanmeldung-fuer-alle-nein/>.

⁴⁸ In German: Volksanwaltschaft (2020), Pressekonferenz Pflegeeinrichtungen in Zeiten der Corona-Pandemie. 1. Juli 2020, 10 Uhr, p. 13 and p. 16.

⁴⁹ In German: Lebenshilfe Österreich (2020), Lebenshilfe fordert Inklusion in Krisenzeiten. <https://www.bizeps.or.at/lebenshilfe-fordert-inklusion-in-krisenzeiten/>.

Mid of February 2021 the Federal Ministry of Social Affairs, Health, Care and Consumer Protection published a leaflet⁵⁰ in German Easy-To-Read on how to protect oneself from COVID-19.

⁵⁰ In German: Bundesministerium für Soziales, Gesundheit, Pflege und Konsumentenschutz (2021), Wie schützen wir uns vor dem Corona-Virus? Via <https://www.sozialministerium.at/Services/Leichter-Lesen/Corona-Schutzimpfung/Wie-schuetzen-wir-uns-vor-dem-Corona-Virus.html>; see also (in German): Müllbner, Katharina (2021), Impfen schützt - informieren Sie sich! https://www.bizeps.or.at/impfen-schuetzt-informieren-sie-sich/?utm_source=BIZEPS+Newsletter&utm_campaign=c48770297d-EMAIL_CAMPAIGN_20180806_COPY_01&utm_medium=email&utm_term=0_97d1b918c2-c48770297d-85029543.

5 Income and access to food and essential items

[Article 28 – Adequate standard of living and social protection](#)

5.1 Emergency measures

There are no particular emergency measures relating to adequate standard of living and social protection with an explicit disability or older age dimension. See chapter 2.1.

5.2 Impact of the COVID-19 crisis

Generally, the COVID-19 crisis reinforced and still reinforces previously existing inequalities and disadvantages. There is, e.g., already evidence, that women experience disproportionately more repercussions in the COVID-19 crisis compared to men.⁵¹ It must be assumed that this is true for persons with disabilities, too. In Austria, experts in the field of disability policy assume that further exclusion and discrimination of persons with disabilities will be a consequence of the current crisis in the long-run. They are worried that positive developments for the inclusion of persons with disabilities that have been achieved during the last could easily be reversed and that a backlash might follow. They suggest more creativity for dealing with the COVID-19 challenges in the field of disability services. Segregation may not be the only reply to a risk.⁵² Data on the economic impact of the crisis to persons with disabilities is not yet available in Austria.

⁵¹ See e.g. “#nextGenerationEU” Leaves Women Behind Gender Impact Assessment of the European Commission Proposals for the EU Recovery Plan https://alexandrageese.eu/wp-content/uploads/2020/07/Gender-Impact-Assessment-NextGenerationEU_Klatzer_Rinaldi_2020.pdf.

⁵² Krisenmanagement im Kontext Behinderung am Beispiel der COVID-19-Pandemie. In: BSGPK (2020) Evaluierung des Nationalen Aktionsplans Behinderung 2012–2020, https://www.sozialministerium.at/dam/jcr:ec106d2c-7346-4360-8756-975de92d9576/Evaluierung_des_NAP_2012_2020.pdf, p. 665.

6 Access to transportation and the public spaces

Article 9 – Accessibility

6.1 Emergency measures

No emergency measures relating to transportation or the public realm with an explicit disability or older age dimension.

6.2 Impact of the COVID-19 crisis

The authors of the evaluation⁵³ of the National Action Plan Disability 2012-2020 highlight the fact that during the pandemic, personal/face-to-face contacts changed to online/virtual contacts. Also, mainly during the first lockdown, institutions were closed and persons living in these institutions were not allowed to leave the institutions. It is argued in the evaluation⁵⁴ of the National Action Plan Disability 2012-2020 that persons with disabilities were locked up (e.g. by removing doorknobs; see chapter 7.2). This shows, that during the pandemic (and mainly during the lockdowns), persons with disabilities and also (old)er persons did/do not access the public realm at all.

Regarding transportation, the authors of the evaluation⁵⁵ of the National Action Plan Disability 2012-2020 argue that in the course of interviewing persons with regard to the impact of the pandemic on persons with disabilities, one interviewee argued that for persons who rely on accessible public transport the curfews and also the regulations for using public transport meant more severe restrictions of the radius of movement than for other persons (e.g. persons using a bicycle, who walk long(er) distances or who have their own car).

§ 4 (2) of the 4th COVID-19 protective measure regulation⁵⁶ transportation of persons with disabilities is addressed - persons with disabilities may use taxis or transportation similar to taxis (taxiähnliche Betriebe) if this is necessary due to the number of passengers.

⁵³ In German: Bundesministerium für Soziales, Gesundheit, Pflege und Konsumentenschutz (2020). Endbericht. Evaluierung des Nationalen Aktionsplans Behinderung 2021-2020, Strategie der österreichischen Bundesregierung zu Umsetzung der UN-Behindertenrechtskonvention. Wien, p. 646f.

⁵⁴ In German: Bundesministerium für Soziales, Gesundheit, Pflege und Konsumentenschutz (2020), Endbericht. Evaluierung des Nationalen Aktionsplans Behinderung 2021-2020, Strategie der österreichischen Bundesregierung zu Umsetzung der UN-Behindertenrechtskonvention. Wien, p. 658.

⁵⁵ In German: Bundesministerium für Soziales, Gesundheit, Pflege und Konsumentenschutz (2020), Endbericht. Evaluierung des Nationalen Aktionsplans Behinderung 2021-2020, Strategie der österreichischen Bundesregierung zu Umsetzung der UN-Behindertenrechtskonvention. Wien, p. 648.

⁵⁶ In German: 58. Verordnung des Bundesministers für Soziales, Gesundheit, Pflege und Konsumentenschutz, mit der besondere Schutzmaßnahmen gegen die Verbreitung von COVID-19 getroffen werden (4. COVID-19-SchuMaV), ausgegeben am 5. Februar 2021, https://www.ris.bka.gv.at/Dokumente/BgblAuth/BGBLA_2021_II_58/BGBLA_2021_II_58.html.

7 Involuntary detention or treatment

[Article 14 – Liberty and security of person](#)

[Article 15 – Freedom of torture or cruel, inhuman or degrading treatment or punishment](#)

[Article 16 – Freedom from exploitation, violence and abuse](#)

[Article 17 – Protecting the integrity of the person](#)

7.1 Emergency measures

Not available with regard to crisis management, see 2.1.

Involuntary confinements and restrictions to personal freedom are generally regulated in the Federal Act for Stays in Residential Homes⁵⁷ but this does not include any references to situations of disaster or emergencies.

7.2 Impact of the COVID-19 crisis

Due to the general lack of meaningful data on persons living in institutions or other residential facilities no data is available on increases or decreases in institutional living in Austria during the COVID-19 crisis.

The COVID-19 crisis had major repercussions on the fundamental rights of children, adults and old people living in institutional settings. It is argued in the evaluation⁵⁸ of the National Action Plan Disability 2012-2020 that persons with disabilities were locked up in institutions (e.g. by removing doorknobs). This shows, that during the pandemic (and mainly during the lockdowns), persons with disabilities and also (old)er persons did/do not access the public realm at all.

Overall, they experienced restrictions of the freedom of movement and personal liberty to a much larger degree compared to people living in private households. Confining persons in institutions of all kind and restricting visits of relatives and other close persons was and still is a main measure to protect residents. Reports from individuals, relatives and official bodies to monitor human rights indicate that all over Austria many persons with disabilities experienced involuntary confinement in different kind of institutions. “Several times my daughter was confined in her room on the basis of unsubstantiated suspected cases. Once, she was isolated in her room for 10 days despite a negative test. She cannot speak and cannot speak up against this. In her small room there was no occupation for her. She could not even get some fresh air. This is like prison!”⁵⁹ The head of the regional commission to monitor human rights in institutions, Verena Murschetz, reported that in some institutions persons had to stay in their rooms for days, weeks and in single cases even for months. She emphasizes

⁵⁷ See Heimaufenthaltsgesetz:

www.ris.bka.gv.at/GeltendeFassung.wxe?Abfrage=Bundesnormen&Gesetzesnummer=20003231.

⁵⁸ In German: Bundesministerium für Soziales, Gesundheit, Pflege und Konsumentenschutz (2020), Enderbericht. Evaluierung des Nationalen Aktionsplans Behinderung 2021-2020, Strategie der österreichischen Bundesregierung zu Umsetzung der UN-Behindertenrechtskonvention. Wien, p. 658.

⁵⁹ Tiroler Monitoringausschuss (2021). Menschen mit Behinderungen im Krisen- und Katastrophenfall. Stellungnahme, https://www.tirol.gv.at/fileadmin/themen/gesellschaft-soziales/UN-Konventionen/tiroler-monitoring-ausschuss/dokumente/stellungnahmen/Stellungnahme_Corona_2021.pdf, p. 19.

that to confine those at risk instead of those who are a risk is in contradiction to basic rights.⁶⁰ Violations of the right to liberty of action in residential facilities for persons with disabilities were reported and criticised, too, in a statement of the Vienna Monitoring Body for the rights of persons with disabilities.⁶¹ The residents' representation, an agency that controls and monitors restrictions of freedom in institutions in Austria, heavily criticised such unsubstantiated confinements and took some cases to court in late spring and summer 2020. At least some of these cases were declared not legal.⁶²

Many residential institutions for persons with disabilities or old persons decided to install comprehensive bans to visit residents during the first lockdown in March 2020. An all-encompassing ban on visits to old people and care homes was recommended by the Federal Ministry of Social Affairs, Health, Care and Consumer Protection as mentioned in the recommendations on COVID-19 protective measures for care and support in partly and entirely stationary institutions and mobile services. Correspondingly, all nine regional governments issued restrictions on the visits to old people and care homes. Those severe restrictions were heavily criticised in public by NGOs as well as by controlling bodies. In May 2020, the weekly newspaper Falter reported about the case of a six-year-old girl with profound disabilities who lives in a residential home for persons with disabilities in Lower Austria and who needs touching for communication. Her desperate relatives were not allowed to meet her for weeks.⁶³

Persons with disabilities living in institutions experienced less reduction of restrictions in summer 2020 as was pointed out by Verena Murschetz. The regional commission observed e.g. that residents could meet visitors only outside, not inside. This meant, as a consequence, that adults could not meet their partners living in another place. Some institutions prohibited residents to go for a walk on their own. Due to a lack of attendants some residents were not allowed to leave their living facility for weeks.⁶⁴

As of January 2021, the 3rd COVID-19 Emergency Measures Ordinance regulates that in retirement and nursing homes “residents may be visited by no more than one person once a week (except for patients in palliative care, hospice care and receiving pastoral care).”⁶⁵ As the severe restrictions to visits had been heavily criticised a few adaptations were made: a maximum of two visitors per day is allowed for persons with

⁶⁰ Murschetz, Verena (2020), Presentation at the Public Meeting of the Tyrolean Monitoring Committee for the UN CRPD on Persons with Disabilities and COVID-19 on 9 Dec. 2020. Video: <https://www.youtube.com/watch?v=NWzh-cp-NK8>, 41:50 – 54:51.

⁶¹ Wiener Monitoringstelle (November 2020), Wahrnehmungsbericht: Auswirkungen der COVID-19 Krise in Wien: <https://www.monitoringstelle.wien/News/Wahrnehmungsbericht-Auswirkungen-der-COVID-19-Krise-in-Wien>.

⁶² See report by Rosalinde Pimon and Elke Mayerhofer (2020), https://vertretungsnetz.at/fileadmin/user_upload/5a_SERVICE_Wir_in_der_Oeffentlichkeit/MB_2020/2020-09_rundbrief_Mayerhofer_Pimon_corona-aph.pdf.

⁶³ See report in Falter 21/20: https://www.falter.at/zeitung/20200520/lisa-marias-lockdown/_91817b3198.

⁶⁴ Murschetz, Verena (2020), Presentation at the Public Meeting of the Tyrolean Monitoring Committee for the UN CRPD on Persons with Disabilities and COVID-19 on Dec. 9th 2020. Video: <https://www.youtube.com/watch?v=NWzh-cp-NK8>, 41:50 – 54:51; personal communication with a resident of a group home in Tyrol in May 2020.

⁶⁵ See 3rd COVID-19 Emergency Measures Ordinance (January 2021, summary in English): https://www.sozialministerium.at/dam/jcr:80e4c6c9-3a89-4c9f-b642-c0112a28bc3e/210128_3%20COVID-19-Notma%C3%9FnahmenVO_Englisch_pdfUA.pdf.

high support needs and if the visitors provide this support; a maximum of two visitors per day is also allowed for children in residential facilities for persons with disabilities.⁶⁶

Regarding the negative impact of the pandemic on persons with mental health conditions, the Tyrolean UN CRPD Monitoring Committee argues that involuntary hospitalisation in psychiatric wards increasing during the pandemic.⁶⁷

⁶⁶ See 3rd COVID-19 Emergency Measures Ordinance (3. COVID-19-Schutzmaßnahmenverordnung)

https://www.ris.bka.gv.at/DOKUMENTE/BGBLAUTH/BGBLA_2020_II_566/BGBLA_2020_II_566.RTF.

⁶⁷ In German: Tiroler Monitoring-Ausschuss zur Förderung, zum Schutz und zur Überwachung der Durchführung des Übereinkommens über die Rechte von Menschen mit Behinderungen (2021), Menschen mit Behinderungen im Krisen- und Katastrophenfall, p. 25.

8 Violence, exploitation or abuse

Article 16 – Freedom from violence, exploitation and abuse

8.1 Emergency measures

No emergency laws, policies and measures on violence, exploitation or abuse with an explicit disability or older age dimension.

At least, in the funding strategy (but which is not explicitly referring to emergency situations) of the Federal Ministry of the Interior, persons with disabilities and old(er) persons are mentioned with regard to measures for violence prevention against these persons which can be funded via this funding strategy.⁶⁸

8.2 Impact of the COVID-19 crisis

No evidence as there exists no respective data.

No legal framework or specific measures in the context of the pandemic exist that explicitly refers to violence against persons with disabilities and/or old(er) persons in times of the pandemic. In November 2020, in a press release the Österreichische Behindertenrat (Austrian Disability Council) highlighted the importance and necessity of respective measures and pointed to the fact that as a result of the pandemic, mechanisms of control and protection do no longer work.⁶⁹

Millner et al.⁷⁰ argue in a report published by the Federal Ministry of Social Affairs, Health, Care and Consumer Protection that the increase of violence mainly in families during the lockdowns and non-existing contacts with counselling centres lead to increased pressure on persons, e.g. on children, young persons, persons with disabilities and persons in care settings.

Example Vienna:

Regarding the prevention of violence and in the context of the pandemic, since the beginning of April 2020 the Fonds Soziales Wien (Vienna Social Fund) finances 'Fachstelle Selbstlaut'⁷¹ which is a counselling centre for preventing violence in institutions and at home.

At the end of April 2020, the Stadt Wien/Strategische Gesundheitsversorgung (City of Vienna/Strategic Health Care provision) referred⁷² to the fact that nearly no data exists

⁶⁸ In German: BM.I/Bundesministerium für Inneres (2015), Förder.Strategie. des BMI. Sicherheit und Schutz fördern. Version 1.0 2015, Wien, p. 18.

⁶⁹ In German: Monitoringausschuss (Independent Austrian Monitoring Committee on the Implementation of the UN CRPD) (2020), Frauen mit Behinderungen besonders häufig von Gewalt betroffen. OTS-Meldung OTS0029 vom 24.11.2020: https://www.ots.at/presseaussendung/OTS_20201124_OT0029/frauen-mit-behinderungen-besonders-haeufig-von-gewalt-betroffen.

⁷⁰ In German: Bundesministerium für Soziales, Gesundheit, Pflege und Konsumentenschutz (ed.) (no year - the presentation of the report took place in October 2020), COVID-19: Analyse der sozialen Lage in Österreich. Vienna, p. 94.

⁷¹ In German and German Easy-To-Read: <https://selbstlaut.org>.

⁷² In German: Repnik, Ulrike (2020), Die Corona-Krise als Frauengesundheitskrise? Stadt Wien/Strategische Gesundheitsversorgung, p. 7. <https://www.wien.gv.at/gesundheit/beratung-vorsorge/frauen/frauengesundheit/pdf/corona-krise-artikel.pdf>.

with regard to women with disabilities living in Vienna (which is also true for persons with disabilities as such) which makes obvious that it is not possible to get any information on the impact of the pandemic on persons with disabilities and diverse forms of violence and hate crime as long as data is missing per se.

9 Independent living

[Article 19 – Living independently and being included in the community](#)

9.1 Emergency measures

No data available on any emergency measures on the right of people with disabilities to live independently and to be included in the community. See chapter 2.1.

9.2 Impact of the COVID-19 crisis

In the first phase of the COVID-19 crisis (March to April 2020) persons with disabilities who live in private households were completely overlooked or neglected by the government, by responsible authorities and generally by the public. In a short report on persons with disabilities in the COVID-19 crisis in May 2020, the Austrian Broadcasting only mentioned persons living in institutions, as was criticised by Katharina Müllebner, an activist of the Independent Living Centre BIZEPS in Vienna. In a public comment she writes: “Not all persons with disabilities live in residential facilities or work in sheltered workshops. (...) where are those who live with personal assistance?”⁷³

No emergency-plans were in place to provide persons with disabilities and their personal assistants or other supporting persons with protective equipment. Neither were there any concepts to advise persons with high needs of support on how to deal with their higher risk of infection. Individuals as well as some NGOs started to organise and distribute protective equipment, e.g. Independent Living Austria, the umbrella organisation of independent living groups in Austria, which provides detailed information and advice for persons with high needs of support who organise their everyday life with personal assistance. Already in March 2020 they provided a website with advice for persons with disabilities and their assistants on how to reduce the risk of getting infected. A particular focus is on persons with permanently assisted ventilation. It includes information on how to best organise a team of Personal Assistants in the situation of a pandemic, on personal health self-monitoring, as well as measures for hygiene and protection. The website also includes an analysis of the situation of persons with high support needs which explains why they constitute a high-risk group and why certain protective measures need to be taken, e.g. frequent screening of personal assistants.⁷⁴

Individuals as well as DPOs went public to make the Government aware of their situation. In April 2020, the Austrian Disability Council asked in a press release: “Why are persons with disabilities, their relatives and supporters always last on the list?”⁷⁵

In a public meeting of the Tyrolean Monitoring committee on persons with disabilities and COVID-19 Christine Riegler, a woman with disabilities who herself employs and coordinates a team of personal assistance, gave a detailed report on how she coped with the COVID-19 situation in the beginning and still is coping. Free and frequent

⁷³ See: Müllebner, Katharina (2020). Leben mit Behinderung in der Krise – kann das wirklich alles sein? <https://www.bizeps.or.at/leben-mit-behinderung-in-der-krise-kann-das-wirklich-alles-sein/>.

⁷⁴ <https://www.sliö.at/covid-19581068c5>.

⁷⁵ See <https://www.behindertenrat.at/2020/04/interessenvertretungen-der-menschen-mit-behinderungen-muessen-gehoert-werden/>.

screening of her personal assistance, which was only available in Tyrol months after the beginning of the crisis, relieves her stress and psychological burden a bit. She, too, points out differences among those who live in institutions compared to those who live in private households. In the beginning, testing for care-persons was only available for those working in institutions, not for assistants of individuals with disabilities living independently. Riegler says: “Personal Assistance does not have the importance that it should have according to the UN CRPD.”⁷⁶ The Vienna Monitoring Body concludes: “Users of Personal Assistance usually live together with less persons than people in institutions. Thus, they get less easily infected. Furthermore, independent living is a protection against segregation and isolation.”⁷⁷

Some reports indicate that persons with intellectual disabilities who live independently with assistance experienced more restrictions compared to non-disabled persons. E.g. they were not allowed to leave their place and go for a walk without attendance⁷⁸ or attendants prohibited them to go shopping during the first lockdown.⁷⁹ This confirms the conclusion that even persons with disabilities who live independently experience much harder restrictions in their everyday life compared to non-disabled persons in Austria.

⁷⁶ Riegler, Christine (2020). Statement at the Public Meeting of the Tyrolean Monitoring Committee for the UN CRPD on Persons with Disabilities and COVID-19 on 9 Dec. 2020. Video: <https://www.youtube.com/watch?v=NWzh-cp-NK8>, 4:20 – 16:30.

⁷⁷ Wiener Monitoringstelle für die Rechte von Menschen mit Behinderungen (2020) Wahrnehmungsbericht „Auswirkungen der COVID-19 Krise in Wien“ <https://www.monitoringstelle.wien/assets/uploads/Wahrnehmungsbericht-Covid.pdf>.

⁷⁸ Murschetz, Verena (2020) Presentation at the Public Meeting of the Tyrolean Monitoring Committee for the UN CRPD on Persons with Disabilities and COVID-19 on 9 Dec. 2020. Video: <https://www.youtube.com/watch?v=NWzh-cp-NK8>, 41:50 – 54:51.

⁷⁹ Personal communication with a woman with intellectual disabilities in May 2020.

10 Access to habilitation and rehabilitation

[Article 26 – Habilitation and rehabilitation](#)

10.1 Emergency measures

No emergency measures on access by persons with disabilities to habilitation and rehabilitation support and services.

10.2 Impact of COVID-19 and/or emergency measures adopted

The authors of the evaluation⁸⁰ of the National Action Plan Disability 2012-2020 highlight the fact that during the lockdowns (especially during the first lockdown) persons with disabilities faced isolation and exclusion, as day structures/vocational therapies and care facilities closed.⁸¹

Millner et al.⁸² argue in a report published by the Federal Ministry of Social Affairs, Health, Care and Consumer Protection that stress and marginalisation increased in the course of closing day structures/vocational therapies and hence, the reduction of social contacts. Similarly, in a recommendation⁸³ the Menschenrechtsbeirat der Volksanwaltschaft (Human Rights Advisory Board at the Austrian Ombudsman Board) argued in October 2020, that closures lead to stress and that physical social contacts should be made possible for persons with intellectual disabilities (e.g. in day structures/vocational therapies).

⁸⁰ In German: Bundesministerium für Soziales, Gesundheit, Pflege und Konsumentenschutz (2020), Endbericht. Evaluierung des Nationalen Aktionsplans Behinderung 2021-2020, Strategie der österreichischen Bundesregierung zu Umsetzung der UN-Behindertenrechtskonvention. Wien, p. 37, pp.640f, p. 647.

⁸¹ Same argumentation, see e.g.: European Union Agency for Fundamental Rights (2020), Coronavirus pandemic in the EU - Fundamental Rights Implications. Austria, 3 June 2020, p. 9.

⁸² In German: Bundesministerium für Soziales, Gesundheit, Pflege und Konsumentenschutz (ed.) (no year - the presentation of the report took place in October 2020), COVID-19: Analyse der sozialen Lage in Österreich. Vienna, p. 132.

⁸³ In German: Menschenrechtsbeirat der Volksanwaltschaft (2020), COVID-19 - Wünschenswerter SOLL-Zustand betr. (psychiatrische) Krankenanstalten (PAK/KRA), Maßnahmenvollzug, Einrichtungen der Tagesstruktur und des teilbetreuten Wohnens sowie der Kinder- & Jugendhilfe (Empfehlung einer AG des MRB für die Volksanwaltschaft), November 2020, p. 1, p. 7 and p. 8.

11 Access to justice

[Article 13 - Access to justice](#)

11.1 Emergency measures

No emergency measures relating to access to justice with an explicit disability or older age dimension.

11.2 Impact of COVID-19 crisis

No such analysis available. In an information sheet⁸⁴ on how courts proceed during the lockdowns published by the Austrian Federal Ministry of Justice, persons with disabilities and/or old(er) persons are not mentioned with regard to wearing FFP2 masks (only children are mentioned and exempt from wearing masks).

In an answer to FAQs⁸⁵ regarding COVID-19 and its impact on persons with disabilities published in May 2020 by ÖZIV (Bundesverband für Menschen mit Behinderungen; Federal Association for Persons with Disabilities), several informations are provided how to proceed with regard to legal action: As valid legal action (rechtswirksame Einbringung) is not possible via email, it is recommended to ask a persons for help to bring it to the post office.⁸⁶

⁸⁴ In German: Bundesministerium für Justiz (2021), Informationsblatt: Verhalten in Gebäuden der Gerichte und Staatsanwaltschaften sowie in Verhandlungen. Stand: 1.2.2021, via <https://www.justiz.gv.at/home/covid-19/betrieb-bei-gerichten-und-staatsanwaltschaften~9ab.de.html>.

⁸⁵ In German: ÖZIV (2020), FAQs - Fragen zur Corona-Krise für Menschen mit Behinderungen. Stand: 19.5.2020.

⁸⁶ For the general situation of the access to justice in Austria, see e.g. European Union Agency for Fundamental Rights (2020), Coronavirus pandemic in the EU - Fundamental Rights Implications. Austria, 3 June 2020, pp. 7f.

12 Access to education

[Article 24 – Education](#)

12.1 Emergency measures

Not available, see section 2.1.

12.2 Impact of the COVID-19 crisis

The school-ordinance to cope with the COVID-19 impact regulates measures taken in all schools on primary and secondary level in Austria. Since the beginning of the pandemic this ordinance has been amended several times, this report refers to the version of 4 February 2021.⁸⁷ Special schools are mentioned several times with regard to exemptions of regular preventive measures like operating classes in shifts, wearing protective masks inside the classroom or exemption of compulsory schooling for individual students of special schools. For persons with disabilities and their personal assistants or care persons there is an exemption of the duty to keep personal distance. Exemptions of the duty to wear a FFP2-mask apply only to students with disabilities if this is unreasonable for them. There are no particular regulations for students with disabilities included in regular schools in this ordinance.

During the first phase of the COVID-19 pandemic in spring 2020 releasing all students with special educational needs from compulsory education for the rest of the schoolyear 2019/20 was taken into consideration. There was also a plan to consider all students with disabilities to be at risk of becoming infected. This was considered discriminatory by the Human Rights Board of the Austrian Ombudsmen Board.⁸⁸ However, parents reported that they had to provide medical certificates to prove their child with disabilities does not belong to a risk group.⁸⁹

During the 2nd lockdown in November 2020, special schools were completely excluded from distance learning and had to provide onsite education. However, after much criticism mostly by teacher representatives, the Ministry for Education decided to leave this decision up to the individual special schools.⁹⁰ There were no special regulations which applied to students with disabilities included in regular schools.

⁸⁷ See (in German): Verordnung des Bundesministers für Bildung, Wissenschaft und Forschung zur Bewältigung der COVID-19 Folgen im Schulwesen für das Schuljahr 2020/21 (COVID-19-Schulverordnung 2020/21 – C-SchVO 2020/21) BGBl. II Nr. 84/2020 <https://www.ris.bka.gv.at/eli/bgbl/II/2021/56>.

⁸⁸ See: COVID-19 - Wünschenswerter SOLL-Zustand betr. (psychiatrische) Krankenanstalten (PAK /KRA), Maßnahmenvollzug, Einrichtungen der Tagesstruktur und des teilbetreuten Wohnens sowie der Kinder- & Jugendhilfe <https://volksanwaltschaft.gv.at/downloads/3ufoe/2021-01-11%20Covid-19-W%C3%BCnschenswerter%20SOLL-Zustand%20%27PAK%20KRA%20JWF%20-%20Version%2011.1.2021.1>, p. 9.

⁸⁹ See: Krisenmanagement im Kontext Behinderung am Beispiel der COVID-19-Pandemie. In: BSGPK (2020) Evaluierung des Nationalen Aktionsplans Behinderung 2012–2020 https://www.sozialministerium.at/dam/jcr:ec106d2c-7346-4360-8756-975de92d9576/Evaluierung_des_NAP_2012_2020.pdf, p. 663; Tiroler Monitoringausschuss (2021), Menschen mit Behinderungen im Krisen- und Katastrophenfall. Stellungnahme. https://www.tirol.gv.at/fileadmin/themen/gesellschaft-soziales/UN-Konventionen/tiroler-monitoring-ausschuss/dokumente/stellungnahmen/Stellungnahme_Corona_2021.pdf, pp. 13-14.

⁹⁰ See: Sonderschulen wechseln am Montag in Distance-Learning <https://orf.at/stories/3198499/>.

Reports indicate that there was and is generally no particular consideration of students with disabilities in the educational system. Much burden was put on families and parents who in many cases felt unsupported, particularly during the first phase of the pandemic. No particular attention was paid to making distance learning accessible for students with disabilities, it is assumed that they were not well equipped with the necessary hardware. In statements and interviews it is repeatedly assumed that exclusion and discrimination of children with disabilities is enforced in the COVID-19 pandemic.⁹¹

There is practically no information available on the situation of students with disabilities in tertiary education during the COVID-19 crisis in Austria. No information on COVID-19 is available on the Website of the working-group on equality for students with disabilities at Austrian universities in Austria.⁹² No information on COVID-19 measures with regard to students with disabilities is available on the website of the contact person for students with disabilities at the University of Innsbruck.⁹³ Some information regarding adaptations for students with disabilities during the COVID-19 pandemics is available at the website "University of Vienna accessible".⁹⁴ Issues of students with disabilities during the COVID-19 crisis are neither mentioned in any of the official statements of the monitoring bodies in Tyrol or Vienna, nor are they mentioned in the inquiry carried out in the evaluation of the NAP disability. A personal report of a student with disabilities was anonymously published in May 2020. It illustrates the barriers, challenges and the psychological burden of a student with disabilities to cope with distance learning at a university during the first COVID-19 phase in spring 2020.⁹⁵

There is no information on any COVID-19 related research with references to students with disabilities or with a focus of the effects of COVID-19 on the education of children and adults with disabilities.

Overall, the effects of the COVID-19 pandemic on the education of children and adults with disabilities tend to be a marginalised and neglected issue in Austria. The Ministry of Education's focus is on special schools, it neglects to consider children and adults with disabilities who are included in regular education.

⁹¹ See: Krisenmanagement im Kontext Behinderung am Beispiel der COVID-19-Pandemie. In: BSGPK (2020) Evaluierung des Nationalen Aktionsplans Behinderung 2012–2020, https://www.sozialministerium.at/dam/jcr:ec106d2c-7346-4360-8756-975de92d9576/Evaluierung_des_NAP_2012_2020.pdf, p. 663; Tiroler Monitoringausschuss (2021). Menschen mit Behinderungen im Krisen- und Katastrophenfall. Stellungnahme. https://www.tirol.gv.at/fileadmin/themen/gesellschaft-soziales/UN-Konventionen/tiroler-monitoring-ausschuss/dokumente/stellungnahmen/Stellungnahme_Corona_2021.pdf, pp. 13-14.

⁹² See: <https://www.uniability.org/>.

⁹³ See: <https://www.uibk.ac.at/behindertenbeauftragte/>.

⁹⁴ See: <https://barrierefreielehre.univie.ac.at/beeintrachtigungsformen/covid-19-corona-virus/>.

⁹⁵ See: <https://www.integration-tirol.at/erfahrungen-corona-krise.html>.

13 Working and employment

[Article 27 – Work and employment](#)

13.1 Emergency measures

No emergency measures relating to work and employment that have an explicit disability or older age dimension.

13.2 Impact of the COVID-19 crisis

In the shadow report on the list of issues in connection with the forthcoming state audit by the UN Committee of experts, the Independent Austrian Monitoring Committee and the UN CRPD and the Laender Monitoring Bodies for the implementation of the UN CRPD argued in August 2020 that generally and before the COVID-19 pandemic speaking "the situation on the labour market for people with disabilities has worsened dramatically in recent years: Even before the labour market policy changes caused by the COVID-19 pandemic, there was a significant increase in the number of people with disabilities looking for work. In July 2020, a total of 82,000 people with 'health-related placement difficulties' were looking for work, an increase of 19.4 % compared to 2019. However, people with learning difficulties do not appear at all in these labour market statistics: Around 27,000 people work in workshops or occupational therapy facilities for the disabled, without, however, having any social security cover or receiving any remuneration."⁹⁶

The authors⁹⁷ of the evaluation of the National Action Plan Disability 2012-2020 point to the fact that the unemployment rate of persons with disabilities increased in the time span between 2012 and 2020.

In the course of the interviews for the evaluation of the National Action Plan Disability 2012-2020, interviewees⁹⁸ argued that in times of the COVID-19 pandemic, persons with disabilities lose their jobs (instead of being on short-time work) more often than persons without disabilities, and that it is often not possible for persons with disabilities to get another/new job. In the context of the current crisis, measures for work and employment render more difficult because of closures of firms/businesses, and also because of the health risk of certain job placements. Important to note, unemployment may have a negative impact on psychological and/or physical health and can contribute to an increased COVID-19-infection risk.⁹⁹

⁹⁶ Shadow report on the List of Issues in connection with the forthcoming State Audit by the UN Committee of Experts August 2020; in German: https://www.monitoringausschuss.at/download/berichte/Schattenbericht-zur-List-of-Issues_final.pdf.

⁹⁷ In German: Bundesministerium für Soziales, Gesundheit, Pflege und Konsumentenschutz (2020). Endbericht. Evaluierung des Nationalen Aktionsplans Behinderung 2021-2020, Strategie der österreichischen Bundesregierung zu Umsetzung der UN-Behindertenrechtskonvention. Wien, p. 656.

⁹⁸ In German: Bundesministerium für Soziales, Gesundheit, Pflege und Konsumentenschutz (2020). Endbericht. Evaluierung des Nationalen Aktionsplans Behinderung 2021-2020, Strategie der österreichischen Bundesregierung zu Umsetzung der UN-Behindertenrechtskonvention. Wien, p. 656.

⁹⁹ In German: Hofmarcher, Maria M. and Christopher Singhuber (2020), Fact Book Leistungskraft regionaler Gesundheitssysteme in Zeiten von COVID-19. Ambulante Versorgung im Bundesländervergleich. August 2020. Health Systems Intelligence Austrian Health Academy Research Report, p. 41 and p. 43.

Data provided by the AMS (Public Employment Service Austria)¹⁰⁰ in and for 2020, the most difficult year in decades on the labour market with an unprecedented increase of unemployment, show that in 2020, 14 588 persons with disabilities (absolute increase compared with the previous year: 1 850 persons, relative increase compared with the previous year: 14.5 %) and 75 824 persons with other health-related restrictions (sonstige gesundheitliche Einschränkungen) (absolute increase compared with the previous year: 13 040, relative increase compared with the previous year: 20.8 %) were unemployed.

Data provided by the AMS (Public Employment Service Austria)¹⁰¹ at the beginning of 2021 show that at the end of January 2021, 15 852 persons with disabilities (absolute increase compared with the previous year: 2 107 persons, relative increase compared with the previous year: 15.3 %) and 81 904 persons with other health-related restrictions (sonstige gesundheitliche Einschränkungen) (absolute increase compared with the previous year: 12 949, relative increase compared with the previous year: 18.8 %) were unemployed.

Since May 2020, a regulation on risk groups (so called COVID-19-Risikogruppe-Verordnung) came into force. This regulation defines groups which may receive a notification classifying them as 'at risk', which consequentially can be used for being granted temporary paid leave from work, as the Fundamental Rights Agency argues in their report from 3 June 2020.¹⁰² On the basis of a COVID-19 risk medical certificate (COVID-19-Risiko-Attest),¹⁰³ a derogation exists for persons with certain chronic illnesses and physical restrictions who are potentially more at risk for being infected with COVID-19. This medical certificate is based upon a recommendation¹⁰⁴ by the Federal Ministry of Social Affairs, Health, Care and Consumer Protection. The derogation is about paid time off from work for persons who belong to the risk groups described in the recommendation: Besides e.g. lung diseases, heart disease, also, other severe illnesses with functional or physical restrictions (sonstige schwere Erkrankungen mit funktionellen oder körperlichen Einschränkungen) are mentioned. On the basis of a regulation,¹⁰⁵ the derogation for COVID-19 risk groups is running until the end of March 2021.¹⁰⁶

¹⁰⁰ In German: Arbeitsmarktservice Österreich (2020), Spezialthema zum Arbeitsmarkt 2020, p. 1 and p. 2.

¹⁰¹ In German: Arbeitsmarktservice Österreich (2021), Übersicht über den Arbeitsmarkt Jänner 2021, p. 2.

¹⁰² European Union Agency for Fundamental Rights (2020), Coronavirus pandemic in the EU - Fundamental Rights Implications. Austria, 3 June 2020, p. 6.

¹⁰³ In German:

<https://www.aekoee.at/index.php?eID=dumpFile&t=f&f=3775&token=cee6e7d2799942363aaab4505fbc6ef3eec4917d>.

¹⁰⁴ In German: Bundesministerium für Soziales, Gesundheit, Pflege und Konsumentenschutz (no year/2020), Empfehlung des BMSGPK zur Erstellung einer individuellen COVID-19 Risikoanalyse bezüglich eines schweren Krankheitsverlaufs. Wien.

¹⁰⁵ In German: BGBl. 2020 II 609, 609. Verordnung der Bundesministerin für Arbeit, Familie und Jugend betreffend Verlängerung des Zeitraums für Freistellungen nach § 735 Abs. 3 Allgemeines Sozialversicherungsgesetz und § 258 Abs. 3 Beamten-Kranken- und Unfallversicherungsgesetz.

¹⁰⁶ In German: Arbeits-Freistellung für Corona-Risikogruppe verlängert.

<https://www.tips.at/nachrichten/linz/wirtschaft-politik/524111-arbeits-freistellung-fuer-corona-risikogruppe-verlaengert>.

14 Good practices and recommendations

14.1 Examples of good practice

Independent Living Austria provides detailed and in-depth information for persons with high needs of personal support which they organise with Personal Assistance on their website. A particular focus is on persons with permanently assisted ventilation. See 9.2 for details and reference.

In Tyrol, a so called COVID-19 crisis group disability-services (Krisengremium COVID-19 Behindertenhilfe) was installed which includes representatives of service providers, users and relatives of persons with disabilities. This group holds meetings on a regular basis and focuses on the needs of persons with disabilities during the COVID-19 crisis, but no further or detailed information is publicly available.¹⁰⁷

14.2 Recommendations

The authors of the ad hoc inquiry on the COVID-19 for the NAP evaluation included the following recommendations for the new NAP 2022 – 2030:

- further research on the development of COVID-19 with regard to persons with disabilities;
- inclusion of the issue 'disaster management' into the new NAP;
- consideration of those articles of the UN CRPD which are relevant for disaster management;
- flexibility of the new NAP by frequent evaluation;
- preventive, unbureaucratic and inclusive disaster management;
- investigation of the impact of the COVID-19 crisis management on the inclusion and exclusion of persons with disabilities;
- institutionalisation of an inclusive disaster management;
- investigation of the limits of digital alternatives for persons with disabilities and improvement of the digital infrastructure in the field of education and social service.

Recommendations by the authors of this report on this basis of its findings have been made in the executive summary above.

14.3 Other relevant evidence

Not applicable.

¹⁰⁷ Tiroler Monitoringausschuss (2021). Menschen mit Behinderungen im Krisen- und Katastrophenfall. Stellungnahme. https://www.tirol.gv.at/fileadmin/themen/gesellschaft-soziales/UN-Konventionen/tiroler-monitoring-ausschuss/dokumente/stellungnahmen/Stellungnahme_Corona_2021.pdf, p. 41.

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