Dear Ms Drieskens,

Thank you for your letter of 19 May, in which you request the mobilisation of CRII, CRII+, EU Funds and the upcoming updated Multiannual Financial Framework to support families and family carers during the COVID-19 pandemic.

I would like to reiterate first that the European Parliament remains firmly committed to the implementation of the principles of the European Pillar of Social Rights, the UN Convention on the Rights of the Child, and the UN Convention on the Rights of Persons with Disabilities. Supporting families and family carers is of particular importance, and we are following closely the ongoing implementation of the Work-Life Balance Directive, which aims to support a work-life balance for parents and carers. Measures under this Directive include, among others, the introduction of carers' leave (workers providing personal care or support to a relative will be entitled to five days of leave per year) and provisions extending the right to request flexible working arrangements to carers and working parents of children up to eight years old. The Directive is also accompanied by a set of policy measures that are designed to support Member States in achieving the aims of better work-life balance and more equally distributed caring responsibilities. These include encouraging the use of European funds to improve the provision of formal care services.

The European Union has been facing an unparalleled crisis since March 2020, which requires an unprecedented, multifold, response. Several measures have thus been adopted to support Member States in crisis repair in the context of the COVID-19 pandemic and prepare the social and resilient recovery of the economy. The European Social Fund can, through the CRII, provide in particular support to healthcare, for example, funding disease preventive measures or measures to ensure access to healthcare for the most vulnerable groups. Moreover, it can support national schemes, which help to cushion the impact of the outbreak in combination with upskilling and reskilling during the programming period. Additional measures have been introduced by CRII+, including measures to support the most deprived by changing the rules for the Fund for European Aid to the Most Deprived (FEAD). For example, it is now possible to deliver food aid and basic material assistance to the most deprived through vouchers in any form, as requested by the European Parliament.
I would like to also recall that in its resolution of 17 April 2020 on EU coordinated action to combat the COVID-19 pandemic and its consequences (2020/2616(RSP)), the European Parliament largely echoed the concerns that you expressed in your position paper. More specifically, in this resolution, the European Parliament:

- Expressed concern over whether the Member States are paying sufficient attention to the mental health implications of the crisis and called for the organisation of an EU-wide mental health campaign that advises citizens on how to safeguard mental well-being in the present circumstances and on where to seek advice when needed;

- Called on the Commission and the Member States to prioritise aid and crisis-mitigation measures for the most vulnerable citizens, women and children exposed to domestic violence, the elderly, people with disabilities, ethnic minorities and people from remote and isolated regions, including the Overseas Countries and Territories and outermost regions by means of a dedicated exceptional support fund focused on the healthcare system and sectors hit by the COVID-19 outbreak, and people at risk of poverty or social exclusion, who all run the greatest risk of being infected with COVID-19 but also suffer the most from its economic effects;

- Called for the measures adopted by the EU and by Member States to respect the rights of persons with disabilities in line with the UN Convention on the Rights of Persons with Disabilities; stressed that particular attention should be given to equal access to healthcare, and ensuring that community-based care and support services, needed by persons with disabilities on a daily basis, are funded and well equipped and staffed; stressed also that public information concerning the COVID-19 pandemic should be accessible to the widest range of persons with disabilities, and that persons with disabilities should be included in all income protection measures;

- Recalled that relevant measures need to be in line with the UN Convention on the Rights of Persons with Disabilities, ensuring equal and non-discriminatory access to social and healthcare services, as well as adopting specific measures aiming at the protection of persons with disabilities, based on consultations and involvement of persons with disabilities, through their representative family members or organisations, when adopting measures that affect them;

- Proposed the creation of an EU COVID-19 Solidarity Fund of at least EUR 50 billion, consisting of up to EUR 20 billion outside the MFF ceilings in grants and up to EUR 30 billion in loans, guaranteed by the EU Budget, supporting the financial efforts undertaken by the healthcare sectors of all Member States during the current crisis, as well as investments in the healthcare sector in the post-crisis period in order to make health-care systems more resilient and focused on those most in need;

- Underlined the fact that in addition to the health dimension, the crisis is dramatically affecting workers, employees, the self-employed and SMEs – the backbone of our societies; considered that the Commission together with the Member States must take all measures to keep as many jobs as possible and to ensure that the recovery is based on upward social economic convergence, social dialogue and improved social rights and working conditions with targeted measures for those in precarious forms of work;

- Insisted that Member States should give particular attention to equal access to healthcare, especially non-discrimination in access to medical treatment and urgent care, ensuring the rights of persons living in residential institutions, who are more at risk of infection, in particular the elderly and persons with disabilities, and ensuring that community-based care and support services, needed by these persons on a daily basis, are funded and well
equipped and staffed, insists also that confinement measures should take into account the needs of persons with disabilities, that public information concerning the COVID-19 pandemic should be accessible to the widest range of persons with disabilities, and that persons with disabilities should be included in all income protection measures;

- Called on the Member States to take the necessary actions to safeguard jobs, working conditions and wages, including measures for short-time work, income compensation arrangements and similar measures.

As far as the discussion in the European institutions on the next Multiannual Financial Framework (MFF) is concerned, I would like to further stress that the European Parliament has urged the European Council not to downsize it. I would also like to highlight that the European Parliament believes that the recovery of the economy must not be to the detriment of social and health policies. This is why the European Parliament strongly opposes the proposal to reduce the European Social Fund Plus (ESF+) despite its enlarged scope and the foreseeable increasing needs in view of the post-COVID-19 crisis, and insists that the ESF+ budget includes EUR 5.9 billion for a Child Guarantee. The Parliament also welcomes the Commission proposal to have a dedicated EUR 9.4 billion EU4Health Programme. In its resolution of 10 July 2020 on the EU's public health strategy post-COVID-19, the European Parliament has also requested the establishment of a dedicated EU fund to improve hospital infrastructure and health services.

Please note that your letter has been forwarded to MEP Lucia Šutiš Nicholsonová, Chair of the Committee on Employment and Social Affairs of the European Parliament.

Yours sincerely,

[Signature]

David Maria SASSOLI