

De : Haydn hammersley <haydn.hammersley@edf-feph.org>

Envoyé : mercredi 14 avril 2021 17:08

À : Magritte Olivier <Olivier.Magritte@minsoc.fed.be>

Cc : Duchenne Véronique <Veronique.Duchenne@minsoc.fed.be>; Bensalah Khadija <Khadija.Bensalah@minsoc.fed.be>

Objet : RE: Follow-up Board EDF : deinstitutionalisation

Dear Olivier,

Thank you for the email. You ask many very good questions. Indeed, we had quite a lengthy discussion on this in the EDF Social Policy and Inclusion Committee meeting on the 3rd of March.

It is hard for me to say, but I agree with your analysis that the way the National Managing Authorities for the use of the funds most typically interpret this kind of wording is that, as you say, a) is what comes out of the FSE regulation and position and b) is the expectation of some of the DPO movement.

The Regulation strictly prohibits investment in what we can all agree is institutional care (by which we mean the indisputable cases of large, segregated and outdated care settings), but doesn't clarify what is understood by community-based services, where there is of course less unanimity and the reality is more nuanced. With the text in the EU Regulations serving as a general but non-explicit basis, this is usually interpreted at the national level by the National Managing Authorities and with the involvement of national DPOs once the money starts flowing.

There is EU-level civil society advocacy, such as from the EEG in which we are involved, that guides Commission desk officers overseeing the use of jointly-managed funds to be careful about agreeing to let Member States invest in any setting that is too large, too isolated or too controlling over a person's life – the typical red flags for institutions.

I see your concern over the term "family-based care". This is something asked for mostly by children's rights organisations and not so much by DPOs, since the directive covers care for a range of different groups and not just persons with disabilities. Indeed it is not a suitable model for most persons with disabilities and again, now that the wording in the regulation has been finalized, the next stage is to communicate to the national managing authorities covering the use of ESF that pushing adults with disabilities to live with their families is not the solution we are aiming at.

I hope this response was in some way helpful to you.

Wishing you all the best,

Haydn

From: Magritte Olivier <Olivier.Magritte@minsoc.fed.be>

Sent: 14 April 2021 10:02

To: Haydn hammersley <haydn.hammersley@edf-feph.org>

Cc: Duchenne Véronique <Veronique.Duchenne@minsoc.fed.be>; Bensalah Khadija <Khadija.Bensalah@minsoc.fed.be>

Subject: Follow-up Board EDF : deinstitutionalisation

Dear Haydn

I hope everything goes well for you.

BDF had a follow-up discussion of the Board meeting. There was a discussion on “deinstitutionalization” and on “FSE funding”.

It seems that there was a difference of view among participants on the possibility for MS to use FSE funding:

- a) The soft view saying that “small institutions” could still receive EU funding
- b) The hard view saying that no institution, small or large, can receive EU funding

Could you confirm that position a) is what comes out of the FSE regulation and position b) is the expectation of DPO movement (ENIL position, in fact)

It is not to have an argument, but it is important to have a clear view when discussing with members of governments and administrations.

Could you also give me your point of view on the expression “transition from institutional to family and community-based care” that we find in DOC-BOARD-21-03-13. It is quite different from “living in the community to which we were getting used to, isn’t it? The concern of the BDF is that a transition based on the notion of “back to the family” without sufficient support, financing and assessment would create an extra load on families.

Sorry, I had no sufficient time to read the ESF text...

Kind regards

Olivier Magritte
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