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## European Social Cohesion Platform (PECS)

# CONCEPT PAPER ON NEW TRENDS AND CHALLENGES IN SOCIAL COHESION PARTICULARLY IN LIGHT OF THE COVID-19 PANDEMIC

## WORKING PAPER

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## INTRODUCTION

The global pandemic health situation related to Covid-19 has resulted in the emergence of new challenges facing Council of Europe member States. Our democratic societies were not prepared for this type of crisis, i.e. a *"major incident interrupting the activities of a significant number of people and causing or threatening to cause physical or material harm to those concerned"*. The consequences in terms of public health, respect for social rights and fundamental rights and freedoms were also difficult to foresee and envisage. In fact, all States had to organise their response to the pandemic as the extent of the consequences on their territory is discovered.

With Covid-19, social and economic inequalities, discrimination and excess mortality<sup>3</sup> in groups of people considered "vulnerable" have become more visible. Indeed, the pandemic has highlighted the inadequacies in health and social protection systems, making it even more difficult to protect the most deprived populations from disease (people with disabilities, the elderly, the chronically ill, migrants, etc.).

Since the beginning of the pandemic, our societies have not been able to continue to function according to their usual practices, due to the imposition of quarantine on a country, a region or individually, thus restricting freedom of movement. In this situation, the measures taken could be considered to infringe upon rights and freedoms even though *"Human rights law recognises that in the context of serious threats to public health and public emergency, restrictions on certain rights may be justified when they have a legal basis, are strictly necessary, based on scientific evidence, neither arbitrary nor discriminatory in their application, of limited duration, respectful of human dignity, subject to review and proportionate to achieve the objective"*<sup>4</sup>.

Furthermore, the introduction of barrier measures and other measures, such as the general wearing of masks or the establishment of social distancing in all public places are not, and will not be, without consequences in the future on the way of living "together" in society. Moreover, it is clear that this will have a considerable impact on the ability of citizens to exercise their social, political, economic, educational and cultural rights effectively. The "distancing" from others, which, out of necessity, has been raised as a social rule of individual protection, has in certain situations brought acts of racism, xenophobia and discrimination to the forefront of the social scene.

However, in the darkness of the situation there remain some rays of light, since in counterpoint to these events, human fraternity has expressed itself in action, giving rise to new forms of solidarity. Thus, it gives hope for a better future, if we succeed in collectively drawing lessons from these life trials and rightly exploit in action the paradox that this crisis imposes on us and exposes us to: isolate ourselves in solidarity, that is to say, in concern for ourselves and for others.

In any event, social rights, the rights<sup>5</sup> as set out in the International Covenant on Economic, Social and Cultural Rights and the right to health have, for a time, taken precedence over economic issues, triggering financial support plans on a scale never before seen in our economies. The priority given to social rights and health is an encouragement to the development of social cohesion policies and to the values supported by the Council of Europe

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<sup>2</sup> Major hazards and people with disabilities, Council of Europe, Strasbourg, 2014.

<sup>3</sup> Source OMS <https://www.euro.who.int/fr/health-topics/health-emergencies/coronavirus-covid-19/statements/statement-where-do-we-stand-today-on-covid-19,-and-what-have-we-learned>.

<sup>4</sup> Syracuse Declarations, UN, 1984, <http://www.eods.eu/library/opendocpdfFR.pdf>

<sup>5</sup> International Covenant on Economic, Social and Cultural Rights. UNITED NATIONS. 1966.

– namely Human Rights, Social Rights, Democracy, Rule of Law, Respect and Dignity. To put it another way, without a democracy of respect and dignity<sup>6</sup>, there can be no social cohesion.

As long as there is no specific treatment for the virus other than the management of respiratory symptoms or a sufficient vaccination rate, we can reasonably expect Covid-19 to come to shake up and challenge many parts of our societies probably over a longer period of time than we could have envisaged at the beginning of the pandemic.

## I. CONTEXT AND ISSUES: NEW TRENDS, NEW PARADIGM AND MOVEMENT OF IDEAS

States have been able to take necessary steps to address the problems that have emerged as the pandemic has progressed and to adopt health and socio-economic measures as necessary. In this context of responding as closely as possible to reality, the exceptional situation caused by Covid-19 provides an opportunity for a "pause" which should be used to rethink situations and events and the way in which they were or were not dealt with. It is in this context that new perspectives can be developed.

However, to be able to identify new lines of action, it is necessary to have identified those that preceded them, which is what we are working on in the following lines. The reference framework for these lines of action is the European Convention on Human Rights and the (revised) European Social Charter, a specific document which<sup>7</sup> provides States with a toolbox for the respect of democracy within the context of Covid-19.

*The orientation of this paper is based on the notion of social cohesion, but not only. To this is added, on the one hand, that of an inclusive society as mentioned in point (i) of the mandate of the European Platform for Social Cohesion (2020-2021) "Ensuring the mainstreaming of **social cohesion** throughout the Council of Europe by further developing the concept, contributing to impact assessments of the various activities carried out in different sectors with a view to achieving social cohesion, including relevant activities aimed at building **inclusive societies**".*

On the other hand, the European Platform for Social Cohesion is in particular responsible for ensuring that "*particular attention will be paid to ensuring that everyone can enjoy their social rights, as guaranteed by the European Social Charter and other relevant instruments, in practice and without discrimination, paying particular attention to **vulnerable groups**, people with disabilities and young people [...]*". This last point gives rise to a third concept, that of "vulnerable group", which includes in a sine qua non manner the situations they may face.

Social cohesion, inclusive society, vulnerable groups. These three concepts were found to be at the forefront of the literature review carried out at the beginning of this report. Indeed, they are the central basis of the current orientations in both the written word and in speeches when these are aimed at analysing the situations experienced by the populations, the consequences and the measures to be taken in view of the evolution of the pandemic.

Against the backdrop of these three notions, we find the values supported and defended by the Council of Europe: Human Rights, Social Rights, Democracy, and the Rule of Law. This is why when we refer to these values and to the notions of social cohesion, inclusive society, vulnerable groups, we must not lose sight of the fact that it is citizens who make society, and that it is not people in vulnerable situations who weaken it, but the opposite. A postulate that can be formulated at a more general level: in this respect it is not the states that are virtuous, but the constitutions that underpin them and the ethics of the citizens that keep them alive. It

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<sup>6</sup> This notion was developed by Emile Durkheim, in, "The Division of Labour in Society", first edition, 1893, Presses universitaires de France, Coll, quadriges, Paris 2013.

<sup>7</sup> Respecting democracy, the rule of law and human rights in the context of the Covid-19 health crisis. A toolkit for Member States. Information documents SG/Inf (2020)11. Strasbourg, 7 April 2020.

is on these notions and postulates that new trends can be formulated and illuminate the movement of the ideas that accompany them. This, however, requires that we take the time to define, even if quickly, these notions and the elements of language that give them meaning.

Social cohesion has been defined as follows: "*The Council of Europe defines social cohesion as the capacity of a society to ensure the well-being of all its members, minimising disparities and avoiding marginalisation, to manage differences and divisions, and to equip itself to provide social protection for all its members. Social cohesion is a political concept which is essential to the realisation of the three core values of the Council of Europe: human rights, democracy and the rule of law*"<sup>8</sup>.

A great deal of work came in discussing<sup>9</sup> this notion<sup>10</sup> in the early 1990s. Social cohesion is still thought of in reference to inequalities. Thus, it is both, a) a process contributing to ensuring equal rights for all, access to fundamental, economic, social and cultural rights, in order to enable everyone to participate fully in society and b) the capacity of a society to reduce inequalities and discrimination by avoiding the marginalisation of individuals or groups.

In particular, the more recent notion of an inclusive society is based on the idea of a social functioning (between State and citizens and between citizens) based on the dominant and fundamental values of respect and dignity. In other words, a society in which the links between individuals and the community are based on involvement, responsibility, active solidarity, participation in a general interest and human dignity. It is in this perspective that the ideas of inclusive growth (OECD) and inclusive education (UN/UNESCO) are being developed.

In an inclusive society, as highlighted by the Convention on the Rights of Persons with Disabilities, we do not define a person, we can only describe their situation with regard to these vulnerabilities/fragilities and the living conditions they encounter. Thus, in this Convention, Article 2: Definition, is careful not to give a clear definition of disability or of what a person with a disability is or should be. It just takes care to give a description of the persons concerned in its first article<sup>11</sup>. This lack of definition is important as it brings to the forefront the issue of social status and recalls the factors first defined in the "*Preliminary Report on the Social Situation in the World 1952*"<sup>12</sup>. Factors which, moreover, have changed little to date<sup>13</sup> "*by social situation is meant the totality of the material or moral conditions in which a person finds themselves, that is to say, sanitary conditions, conditions of food and education, housing, teaching and means of disseminating thought, conditions of work and employment, special circumstances affecting general standards of living and morals and welfare ...*"]".

The notion of social situation thus defined because it is older than that of inclusive society and social cohesion, is central to what is implied by the idea of a person's living conditions at a given point in their existence. It must be acknowledged that the current use of this notion is separate from the notion of need, which was the one used in general to organise the social response to vulnerabilities. This separation is mainly due to the new paradigm of the idea of

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<sup>8</sup> New Council of Europe Strategy and Action Plan for Social Cohesion approved by the Committee of Ministers of the Council of Europe on 7 July 2010.

<sup>9</sup> Social cohesion": what are we talking about? Clarifying the concept in order to consolidate a new model of action. Cyprien Avenel, in *L'année de l'action sociale 2015 : objectif autonomie* (2014), pages 119 to 136 [https://www.cairn.info/resume.php?ID\\_ARTICLE=DUNOD\\_GUEGU\\_2014\\_02\\_0119#](https://www.cairn.info/resume.php?ID_ARTICLE=DUNOD_GUEGU_2014_02_0119#)

<sup>10</sup> "Report of the High Level Task Force on Social Cohesion in the 21st Century: Towards an active, fair and socially cohesive Europe" TFSC (2007) 31 F Restricted circulation. Strasbourg, 26 October 2007

<sup>11</sup> Convention on the Rights of Persons with Disabilities, UN, 2006, Ar.1, para.2, "Persons with disabilities are **defined as** persons who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others. » <https://www.un.org/disabilities/documents/convention/convoptprot-f.pdf>

<sup>12</sup> UN *Preliminary Report on the World Social Situation*, New York, 1952.

<https://digitallibrary.un.org/record/93985?ln=fr>

<sup>13</sup> Cf.. The UN Sustainable Development Goals and in specific targets of SDG3.

an inclusive society and its embeddedness in the world of social rights and solidarity<sup>14</sup>. In the context of social rights and solidarity, the notion of situation when it is attached to that of a person or areas such as disability, exclusion from school, vulnerability has the function of primarily designating all of the social, economic, cultural, health, educational... obstacles encountered by individuals or groups<sup>15</sup> in a given area. However, it is not an expression that seeks to assert that all situations are the same or that a harmonised response or action should be sought. More simply, it expresses the idea that by paying particular attention to the living conditions of people in vulnerable situations we can only gain in social cohesion.

The individualism and selfishness that we encounter, in normal times, can lead us to believe that respect is no longer a cardinal value in our societies. However, it is indeed this notion which has come back in force as a result of the Covid-19 crisis, certainly in the sense of keeping distance from others (respecting them) and the obligation to respect, under penalty of a fine, common rules of protection, respect for actions which prevent the spread of Covid-19, such as, physical distancing, rules of hygiene. But not only that. In the particular context of the pandemic, respect also means not transmitting Covid-19 to others. De facto, "respecting others" brings us back to the primary meaning of the term "taking into consideration" and thus marking our attention to others. It is this attention that opens up an active representation of dignity<sup>16</sup> and makes it not only an individual right, but also a duty. The recognition of dignity through a certain individualism does not imply discrimination and inequality.

## II. NEW TRENDS AND CHALLENGES FOR SOCIAL COHESION IN THE LIGHT OF COVID-19

### 1- Social rights, human rights and public freedoms in line with Covid-19

#### 1.1 Strengthening public freedoms and democracy: for democratic respect and dignity<sup>17</sup>

The arguments put forward in several Council of Europe and United Nations texts take as a premise, inter alia, that democracies<sup>18</sup> have an obligation to develop and maintain public

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<sup>14</sup> The solidarity in question here is the opposite of F.A. Hayek's proposal: "*Solidarity is a hereditary instinct of tribal society that must be discarded in order for the reign of Catallaxia, i.e. the order engendered by mutual adjustment in a market, to come about on a global scale.*" "*A large society does not care about solidarity in the literal sense of the word, i.e. the union of all for known purposes. They are even incompatible.*" F.A. HAYEK, *Droit, législation et liberté, volume 2, "Le mirage de la justice sociale"*, Paris, Presses universitaires de France, 1981.

<sup>15</sup> A group of individuals with common (economic and cultural) living conditions, living in an area defined by administrative or political (province, department, state), or geographical (region, city, town) boundaries. Migrant people, homeless people, single-parent families, unemployed people, dependent, precarious people, those with high assistance needs, victims of accidents or any other event, etc., regardless of their age, gender, geographical origins, etc.

<sup>16</sup> "*Human dignity is not a commodity.*" Alain Supiot, *La gouvernance par les nombres*. Course at the Collège de France (2012-2014), Fayard, Paris 2015.

<sup>17</sup> Equal dignity implies the idea of "a republic of Dignity." [...] Equality of opportunity as a regulatory ideal, a normative criterion of justice, will only be exceeded when society has adopted equal human dignity and excellence in accomplishment and not in production as its regulatory principle. - say the fact that everyone can develop according to their capacities." Émile Durkheim.

<sup>18</sup> Here we understand democracy to mean, beyond elections, a political system based on the balance of power and the protection of citizens' fundamental and social rights. The following definition summarises what this political system is all about. Democracy is '*§213bb, the exercise of public power which is governed by the principle of majority rule, with regular formation of a responsible government and an unfettered opposition, which has the possibility of future access to government... §270 the people must be able to appoint the government and the legislature by free and equal suffrage. In a democracy, the decision of the people is at the centre of the formation and affirmation of political power. Every democratic government knows the fear of losing power if it is not re-elected.*' German Constitutional Court 2009 (Decision BvE 2/08, §213 bb, §270.)

freedoms and the fundamental rights of citizens, which includes respect for and dignity of persons in vulnerable situations. This obligation is seen as an ongoing challenge for democracies.

In the context of the management of the Covid-19 crisis, the bypassing of a certain number of freedoms has turned the daily lives of citizens upside down by rendering old ways of acting obsolete in many areas. Legislative measures limiting certain freedoms have been taken within a perfectly legal framework, authorising the establishment of rules that derogate from ordinary law by introducing a right of exception in<sup>19</sup> response to exceptional circumstances. Within this framework, the majority of governments have, as the consequences of the pandemic have evolved, introduced restrictions on individual freedoms by limiting and/or prohibiting, for example, the possibilities of gathering and/or movement. At the beginning of the pandemic, the implementation of measures to limit freedom may have led to unprecedented situations, for example the analysis of a shopping basket by the police to assess compliance with the criterion for basic necessities.

If the situation of exception justifies exceptional measures, the measures taken by the legislations cannot, by effect of habituation, become normal and enter into ordinary law even though they are prejudicial to freedoms. Risks include, for example, the continued use of new technologies and computer systems for tracing citizens, which is favoured by epidemiologists, or the electronic surveillance of public spaces, which, despite its obvious value in a pandemic situation, is not without risk and may potentially reduce the exercise of freedoms.

The question of the right balance between freedom and security is one that has been raised in many eras, and the current era is no exception. But until now, the threat to civil liberties has often been the response of a political power that finds itself under threat. With Covid-19, the nature of the threat has changed. It is potentially access to social rights, individual freedoms and the living conditions of citizens that are being questioned. This is why it is, in particular, necessary to pay particular attention to developments in these technologies so that they do not become coercive and call into question individual freedoms in a "soft" way.

### **Possible actions**

In many Council of Europe member States, the beginning of the pandemic saw the spontaneous involvement of citizens in acts of solidarity, support and accompaniment actions for people in vulnerable situations or as close as possible to the risks of infection by Covid-19. In many cases, this has highlighted innovative forms of social commitment.

In order not to lose the very meaning of these commitments, it would be advisable to:

- a) Identify and support these solidarity initiatives in the long term, especially when they have invented new ways of action and commitment towards groups of people in vulnerable situations. Through this initiative, the basis can be developed for the implementation of new forms of solidarity, the renewal of social ties and the strengthening of social cohesion.
- b) Take the time to redefine public policies, including the social situation as a primary principle for action. We could thus move away from the simple management of populations and their risks through their needs (assumed or predefined).
- c) Work to define new alliances (social contract, social pact) between citizens, non-governmental organisations (civil society) and the State. The aim is to bring citizens and

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[https://www.revuegeneraledudroit.eu/blog/decisions/bverfg-30-juin-2009-traite-de-lisbonne-decision-numero-2-bve-208/#:~:text=270Dans%20une,s.%20%3E\).](https://www.revuegeneraledudroit.eu/blog/decisions/bverfg-30-juin-2009-traite-de-lisbonne-decision-numero-2-bve-208/#:~:text=270Dans%20une,s.%20%3E).)

<sup>19</sup> International Covenant on Civil and Political Rights. General Comment No. 29. General Comment on Article 4 (adopted on 24 July 2001 at its 1950th session), CCPR/C/21/Rev.1/Add.11 (2001).

<http://hrlibrary.umn.edu/gencomm/french/f-gencom29.html>

public authorities closer together in order to move away from the traditional pattern of dividing responsibilities between citizens and the State: the former to take care of their relatives, pay their taxes and contribute to the collective well-being through their work; the latter to take responsibility for responses to collective problems, education, employment, health, etc.

- d) In the logic of the previous action, new bases for participation should be co-constructed. The situation generated by Covid-19, if we added to it the priority issue of global warming, could be the lever for collectively rethinking social cohesion and inclusive policies through the commitment of the majority of citizens.
- e) Establish as a priority action, the monitoring of the use of new technologies (video, telephony, digital collection of personal data, artificial intelligence, etc.) developed as part of the control of public space. We must be careful that these do not become coercive and that, in the long term, they call into question individual liberties in a more or less "soft" way.
- f) Adopt a new legislation which must include respect for the right to informational<sup>20</sup> self-determination. This implies free access for everyone to this data and the ability to act on it. It is a matter of guaranteeing everyone the security of their personal data against misuse.

## **1.2 Combating racism, xenophobia and stigmatisation: for the respect and effectiveness of social and human rights**

Health crisis or not, social rights cannot suffer from a lack of respect for them and their effectiveness. The same applies to the principle of non-discrimination and the fight against racism, xenophobia and stigmatisation, the current crisis reminds us of the scale of mobilisation that needs to take place. All the legislation of the member States of the Council of Europe includes provisions to combat discrimination, racism, xenophobia and stigmatisation. Measures to combat the Covid-19 pandemic therefore find their place in these. This means, in particular, that all citizens of a State must have access to healthcare and that no one should be denied access because they belong to an administrative category (the elderly, the disabled, etc.), to a group (Roma, LGBTI<sup>21, 22</sup>, cultural or linguistic minority, etc.), or because they are unable to pay the health costs associated with screening or hospital treatment necessary for their health.

A public health crisis, as serious as it may be, cannot become a human and social rights crisis on the pretext that populations would not have access to the necessary means of prevention or adequate medical care. The list of practical difficulties and problems drawn up by the Council of Europe's Directorate of Anti-Discrimination is instructive<sup>23</sup> in this respect.

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<sup>20</sup> <https://rm.coe.int/16806ae51f>

<sup>21</sup> The delegation of the Russian Federation recalls its statement at the adoption of the Recommendation CM/Rec(2010)5 of the Committee of Ministers to member states on measures to combat discrimination on grounds of sexual orientation or gender identity (document CDDH(2009)019, Appendix IV) in which it was explained why the Russian Federation was opposed to elaborating a special instrument aimed at increasing protection of LGBT persons.

<sup>22</sup> Turkey is against all forms of discrimination and acknowledge the right to equal protection in accordance with the Universal Declaration of Human Rights. Turkey believes that all people, as human beings, have the right to benefit from all services provided by the State. However, as the form LGBT has recently started to become an ideological imposition on the world, Turkey states its reservation in regards to any reference to the acronym LGBT.

<sup>23</sup> *There have been "heavy-handed and discriminatory police interventions against Roma, including blatant cases of racial profiling, to enforce quarantine and confinement measures - lack of information and guidelines in languages other than the official language(s) - inability to respect social distancing in refugee camps and Roma settlements - inability to respect hygiene advice in the absence of sanitary facilities - interruption of hormone therapy and other essential medical treatment for LGBTI persons - increased risk of homo-bi-transphobic or gender-based abuse in*



Fear and lack of understanding of the consequences of the virus have, in various situations, led to the flourishing of movements of rejection of people, health workers considered as potential contaminants because of their profession or citizens from Asian countries<sup>24</sup>, allowing the emergence of a contemporary form of racism and stigmatisation which has proved to be a global phenomenon<sup>25</sup>. The fear of being infected has, for its part, led to discrimination and further stigmatisation of people who, because of their situation, cannot fully apply containment measures or other basic preventive measures. On the other hand, the safeguarding of human and social rights has been undermined by the resurgence of hate speech and discrimination, verbal aggression in public places and devaluation on social networks.

Solidarity and citizen action are one of the levers of action that make it possible, particularly in acute phases of crisis (health or disaster), to maintain and strengthen social cohesion and to live together. This is why concepts and vocabularies are important in the dynamics of reducing situations of discrimination, racism, xenophobia or stigmatisation. Unsuitable to the situation, these vocabularies perpetuate stereotypes, without us being fully aware of it, through the use of separating words through expressions of negative designations of others, for example, the poor, the vulnerable, the handicapped, the old, these people... In the case of Covid-19, the use of separating vocabularies gives tools to stigmatise individuals or groups. For example, the use of expressions such as "those people", those who transmit the disease, who spread the virus and infect others, or in another register, referring to the current situation using emotionally charged images such as talking about a plague, an apocalypse. The use of these separative vocabularies only reinforces discrimination and hatred. In this context, combating rumour and misinformation is essential in the fight against discrimination, racism, xenophobia and stigmatisation.

### **Possible actions**

The current pandemic context is a reminder of how crucial it is to safeguard the social rights of the vulnerable and marginalised, regardless of language, religion or ethnic origin, in order to combat the rise in stigmatisation and hate speech that can lead to terrorism. No matter how devastating a pandemic may be, it cannot be a reason to exploit fears and reinforce the exclusion of minorities.

Whereas people in vulnerable situations are often the last to ask for community support. It would be appropriate to:

- a) Address individual and collective representations that authorise an individual or group to produce hate speech and discriminatory acts. The effectiveness of responses to these phenomena depends, of course, on the capacity of legislators to act, and even more so on their ability to enforce the law in these areas. It is also due to the specificities of the situation in which such speech and its manifestations occur. This is why research work that helps to refine the understanding of the roots and changes in representations that produce hate speech and discrimination is essential. This research work is to be seen in the context of targeted action research leading to concrete results.

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*confinement, and reduced possibilities to reach support services - manifestations of intolerance and hate speech associating certain ethnic origins with the virus and its consequences on the economy. ». Response to Covid-19: aspects relating to anti-discrimination, diversity and inclusion.*

<https://rm.coe.int/reponse-au-covid-19-aspects-relatifs-a-l-antidiscrimination-a-ladiver/16809e201e> ;  
<https://rm.coe.int/cdadi-introductory-note-en-08042020-final-version/16809e201d>

<sup>24</sup> Covid-19 is fuelling anti-Asian racism and xenophobia around the world.

<https://www.hrw.org/fr/news/2020/05/12/le-covid-19-attise-le-racisme-anti-asiatique-et-la-xenophobie-dans-le-monde-entier>

<sup>25</sup> Covid-19-related discrimination and stigma: a global phenomenon?

<https://fr.unesco.org/news/discrimination-stigmatisation-liees-au-covid-19-phenomene-mondial>

- b) Make a special effort to support and accompany groups suffering discrimination and stigmatisation by setting up action programmes and public information campaigns aimed at reducing the exclusion of these groups.
- c) Put in place measures to protect against physical violence and discriminatory and xenophobic speech. The setting up of institutional action networks in territories, towns, neighbourhoods, etc., linking public authorities and associations in a relationship of cooperation and co-construction is one of the means of producing appropriate responses that are as close as possible to reality.
- d) Consolidate or set up training tools for public officials working in the fields of health, education and the police so that they can provide the most appropriate responses to reduce stigmatisation and discrimination, but also to raise awareness of these issues in their environment. In this way, the cross-fertilisation of these various professionals in schools can be an effective way of mobilising the younger generations on the issue of rights (social, cultural, human rights, etc.).
- e) Strengthen capacities (particularly financial) to combat and act against xenophobia and stigmatisation, by developing active partnerships. Associations and NGOs that include the participation of victims of acts of discrimination, racism, etc. should be encouraged.

### **1.3 Encouraging the sharing and accessibility of information for all: combating fake news and promoting freedom of expression.**

Freedom of expression and access to information are at the heart of maintaining social cohesion, the implementation of an inclusive society. In light of international conventions and standards, States have a duty to pay particular attention to individual rights, including the ability of everyone to express themselves freely in accordance with social rules. One of the pillars of this - freedom of expression - is rooted in the ability of everyone to have access to accurate and timely information.

In the case of a pandemic, as in the case of a disaster,<sup>26</sup> it is essential that information is provided to the population that describes, for example, what people should do. States must also ensure that accurate and up-to-date information is accessible to all, including groups of people in vulnerable situations. Article 11 of the Revised European Social Charter is fully implemented here.

The Covid-19 crisis highlights the fact that all available information must be made accessible in various formats so that it can be understood by all and that full use must be made of all available public and private means of communication (television press, social network, telephone service with messaging facilities, etc.) in order to reach as many people as possible.

#### **Possible actions**

Information sharing and access to information is a vector for creating social ties and cooperation. In particular, they strengthen participation in community life, the maintenance of social contacts and links between generations and combating isolation and loneliness. Therefore, it would be appropriate to:

- a) Make access to Internet services affordable (free of charge) like television for vulnerable people. Indeed, renewing a television to current standards is not always possible due to the cost of the latter. This possibility of acquiring equipment at reduced

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<sup>26</sup> Major Hazards and People with Disabilities, European and Mediterranean Major Hazards Agreement, Council of Europe, DG II Democracy, Strasbourg 2014.

or free cost is essential. Television is often the main source of information available to people, especially for the elderly.

- b) Set up ad-hoc training systems in the operation and use of digital tools for the groups of people concerned, in particular the elderly. The evaluation of the costs and effectiveness of this action must be considered in the perspective of the sustainability of this measure beyond the time of the pandemic. This type of priority measure should also be included in epidemic or disaster prevention plans.
- c) Set up suitable information areas where information is made comprehensible. This particularly concerns people who are deaf (sign language) or speakers of minority languages, people with a low level of literacy or who have difficulty understanding complex messages due to age or disability. Many States have experimented with these dedicated spaces since the beginning of the pandemic, while others have strengthened the means already existing, whatever the situation, this type of practice should be sustained over time.
- d) Have the means to fight against the dissemination of fake news by relying on the formation of structures associating, for example; societies of journalists, press, social networks, representatives of justice. Among other things, the aim is to avoid the reinforcement of stigmatisation and discrimination of individuals through the propagation of inaccurate information.

## **2 Fight against discrimination and inequality**

### **2.1 Improving the living conditions of those in vulnerable situations: for decent housing and the protection of people deprived of their liberty or in health facilities**

With Covid-19, it became clear that housing, life in institutions (medical-social establishments, hospitals, prisons, etc.) could become a matter of life and death or a threat to the mental health of residents, patients, prisoners or inhabitants of insecure housing. The number of deaths in institutions for older people was so high in some States that health authorities could only drastically increase containment measures for these people to the detriment of the relationships that help them to live.

The obligation for people not to leave their homes for long periods of time has highlighted the inequalities and risks faced by the most vulnerable people or groups of people living in singular living conditions or confinement: overcrowded, unhealthy housing, prisons, health facilities, shelters for the homeless, migrants or people who are victims of domestic violence...

The Covid-19 crisis is an opportunity to identify, once again, the gaps in housing and service provision for the most vulnerable populations. The period of confinement has also brought to the forefront the difficulty of preserving the right to health without considering, at their proper level, the living conditions and access to decent housing of the populations.

When housing becomes a fundamental issue, the provision of decent housing<sup>27</sup> to so-called "invisible" populations is one of the challenges to the effectiveness of an inclusive society based on human rights. Life in institutions, older people's homes, mental health care homes should only be possible with the free and informed consent of the people<sup>28</sup>. However, the use

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<sup>27</sup> Housing is appreciated in particular by its size, but also by its location, its immediate environment (visual and sound).

<sup>28</sup> Art 5: Right to liberty and security of the European Convention on Human Rights.

of unlawful practices of confinement or restriction of freedom of movement has reappeared during periods of confinement, confusing for example health confinement with psychiatric isolation. Reconciling respect for individual rights and freedoms with public health imperatives within the framework of the principles of continuity of care and non-abandonment of people is essential, but restrictions on freedom must be individualised, proportionate and limited in time. Whether in institutional residences, care homes or prisons<sup>29</sup>, maintaining links with families and friends should be a constant concern of institutions and paramedical or medical teams whenever possible.

### **Possible actions**

Providing decent housing and an institutional environment that respects social, civil and political rights is a major challenge in achieving an inclusive society and a democracy of respect and dignity. The right to decent housing<sup>30</sup> is a human right that is universally recognised, but has yet to be made effective. We are reminded of this by the situations experienced by many populations during this pandemic.

For this reason, it would be appropriate to:

- a) Implement the means (structural, financial, etc.) to guarantee the effective right to decent housing. The period of health, economic and social uncertainty generated by the Covid-19 crisis is an opportunity to promote the strengthening of cooperation, particularly technical or financial, between the State, local authorities, associations and private and public donors. The aim is to make progress in the implementation of the right to decent housing. Provisions present in a lot of legislation, but which are still struggling to find their realisation.
- b) Build, in the same spirit as the previous proposal, the necessary cooperation, with the aim of developing new solutions no longer focused exclusively on the production of housing for all, but on the production of integrated and adapted housing. Integrated in the city or at least as close as possible to healthcare, rehabilitation and commercial services. Adapted to situations of disability or the advanced age of the population. The use of institutional accommodation should, as far as possible, be reserved for emergency situations or care.
- c) Organise feedback of experiences following the Covid-19 crisis, with the aim of strengthening the joint action of actors, in particular, in the field of the fight against discrimination. Indeed, the Covid-19 crisis has, in many States, brought the issue of social and human rights to the forefront of political decision-making. It would be a pity not to take advantage of this situation to draw the attention of all citizens and public authorities once again to situations where social, civil and political rights are less and less effectively realised.

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<sup>29</sup> The Nelson Mandela Rules [https://www.un.org/fr/events/mandeladay/mandela\\_rules.shtml](https://www.un.org/fr/events/mandeladay/mandela_rules.shtml)

<sup>30</sup> International Covenant on Economic, Social and Cultural Rights. (see Note 5)

## **2.2 Protecting women and girls from violence and abuse: advancing gender<sup>31</sup> equality and reducing inequalities between women and men.**

Combating ill-treatment, violence against women and girls, gender inequality, sexual abuse is a requirement for all Council of Europe member States. Covid-19, as a result of the confinement of populations, has shown a disproportionate impact of the phenomena of violence on the most vulnerable populations. Although women and men are affected indiscriminately by Covid-19, the pandemic, according to data produced by the United Nations,<sup>32</sup> has increased inequalities between them. It should be noted, that during the pandemic, many States strengthened their legislation and their means of action to combat the social scourge of violence and abuse aimed at people in vulnerable situations.

In addition, travel restrictions to limit the spread of the virus have significantly increased the risk of domestic violence,<sup>33</sup> particularly against women and girls. Adolescent girls, women living in poverty, migrant women, Roma women, women with disabilities, etc. are particularly affected, obliging many States to take special measures (strengthening warning systems, places of respite, etc.). These key elements of human rights are also to be taken into consideration in a general issue which aims at the emergence of new trends aimed at strengthening social cohesion.

On the other hand, Covid-19 highlighted the fact that it is low-skilled or precarious and often poorly paid jobs that have been at the forefront of activities to maintain services to populations, thus potentially exposing women more strongly to Covid-19. One way to advance gender equality<sup>34</sup> is to reduce inequalities in gender pay and career development. Particular attention must be paid to professions where female employment is over-represented, such as health, teaching, low-skilled jobs in industry, trade-related services, social services, etc. In fact, many governments have, in various financial forms, recognised the services provided by these professions.

Although all children have been affected by the closure of day-care centres, schools from kindergarten to the end of primary and secondary education, the impact of these closures have not had the same consequences for all, in particular, for children who need specific support.

The risks of abuse have particularly increased among families living in precarious conditions. The establishment of programmes or the strengthening of child protection measures to support the most disadvantaged children have, in many States, been reviewed in light of the situations experienced. In addition to the health crisis and the subsequent economic crisis, there cannot be a child rights crisis. These measures will likely need to be part of the long-term frame envisaged for the pandemic.

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<sup>31</sup> Russian Federation notes, that there is no definition of the "social sex" in the Russian Federation, as well as in other legal systems in which the feature of the biological sex is fixed. The Russian legislation therefore does not contain the concept of "gender" and there is no commonly accepted definition of the word "gender" at the international level. During the adoption of this Conceptual paper the Delegation of the Russian Federation consistently opposed the use of the word "gender" in the documents of the Council of Europe. Therefore the Russian Federation understands the word "gender" used in this Strategy as a complete analogue of "sex", the word combination "gender-based violence" as "violence against women" etc. The terms "woman" and "man" should thus be applied in their literal meaning, and cannot be construed to include persons other than women and men respectively. Taking this into account the Russian Federation expresses its position that in this document any reference to "gender" as a separate word and in all wordings as "gender-based" should be considered as a sex-based concept.

<sup>32</sup> The impact of Covid-19 on women and girls. [https://www.un.org/sites/un2.un.org/files/note\\_de\\_synthese\\_-\\_l'impact\\_de\\_la\\_covid19\\_sur\\_les\\_femmes\\_et\\_les\\_filles.pdf](https://www.un.org/sites/un2.un.org/files/note_de_synthese_-_l'impact_de_la_covid19_sur_les_femmes_et_les_filles.pdf)

<sup>33</sup> Globally, 243 million women and girls aged 15-49 have been victims of sexual and/or physical violence by their partners in the last 12 months (April 2020), a figure that is increasing due to confinement. <https://www.unwomen.org/en/digital-library/publications/2020/04/issue-brief-covid-19-and-ending-violence-against-women-and-girls#view>

<sup>34</sup> 168079125c (coe.int) Council of Europe Strategy for Equality between Women and Men 2018-2023

It is still necessary today to specify that older people and people with disabilities enjoy the same rights as everyone else and must benefit from the same protections, whether or not there is a pandemic.

### **Possible actions**

The fight against prejudices and gender inequality norms and any events or situations that may accentuate disparities between women and men is essential to the proper functioning of an inclusive society based on respect and dignity.

For this reason, it would be appropriate to:

- a) Affirm as often as possible in all available media that the difference between women and men can never justify any form of inequality.
- b) Strengthen targeted measures to protect people in vulnerable situations from violence and abuse. This means that emergency response and health and social protection measures are accessible to all and cannot be discriminatory. These protections against violence and abuse include personal safety, social services, protection against fraud and scams and the intentional or unintentional neglect of relatives.
- c) Take, in the case of physical violence, emergency measures such as the physical removal of the perpetrators. This implies the implementation of support and reception networks for victims and their relatives.
- d) Organise the financial means (specific allowance), legal, police, social and health protection as close as possible to the situation encountered in order to maintain the autonomy of people subjected to violence.
- e) Develop training and information programmes for professionals working with people in vulnerable situations. These programmes should extend their dissemination to professions that are likely to be confronted with situations of violence or abuse in order to better prevent them and recognise abuse.

### **2.3 Ensuring effective rights of older people and people with disabilities: for the full participation of older people and people with disabilities.**

The failure to combat the marginalisation of people because of their age or disability, failure to combat prejudice and discriminatory behaviour, only reinforces the internal divisions of a society. The full participation in society of older people and people with disabilities is a challenge of great importance for social cohesion and the implementation of an inclusive society. The increase in the number of people aged over 60 in the coming decades (20% of the world's population by 2050<sup>35</sup>) and the rise in life expectancy (over 80 years on the European continent) increase the need for responses in the short and medium term. Efforts in the coming decades should focus on prevention of abuse, violations of people's social rights and dignity, and the provision of care adapted to the increase in disability and disabling diseases.

Older people and people with disabilities are among the groups at increased risk of severe health implications if they are infected with Covid-19, and may in certain situations (e.g., overloading of health services) disproportionately threaten their right to health and other social rights. The period of the pandemic has once again raised, fiercely, the question of an income

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<sup>35</sup> Ageing and quality of life <https://www.who.int/ageing/about/facts/fr>

allowing a decent life, appropriate medical coverage, specific support, as well as the question of an adapted place of residence and the accessibility of means of transport. In the answers provided to these questions, it is important not to hide the fact that people with disabilities or elderly people contribute to the proper functioning of society as long as they are guaranteed sufficient resources and access to dedicated structures.

The issue of 'family carers' needs special attention from the member States. The mental and physical burdens to which they are subjected (these carers are largely women) can lead to situations, in particular, of abuse with devastating consequences for both the individuals and the carers.

The right to independent living and inclusion in society<sup>36</sup>, respecting the relationship between private and professional life of the supported persons, must be the basis for the design of services (various forms of support and care, etc.), including in institutions.

Maintaining solidarity between generations is an essential element of social cohesion. The means should be found for a comprehensive social response in various areas of daily life, for example, taking people out of institutions and creating suitable living places integrated into the general environment. Working on the strengthening of places where social life experiences between the generations intersect and are shared should be a priority in every social project and urban organisation.

### **Possible actions**

Adaptation through the application of principles of non-discrimination, universal design and reasonable accommodation is the major challenge in the implementation of an inclusive society. This means making it a place where older people and people with disabilities can fully participate in social, political, civic, cultural and economic activities.

For this reason for persons with disabilities it would be appropriate to:

- a) Translate the United Nations Convention on the Rights of Persons of December 13, 2006, into domestic law of States, with the stated objective of putting into practice the transformation necessary for the foundation of an inclusive society.
- b) Develop measures in line with SDGs for the inclusion of disability in the response to Covid-19<sup>37</sup>.
- c) Promote the establishment of respite structures, temporary accommodation outside the home for short or medium stays, activities or services outside the home.
- d) Include in the development of these action programs and their evaluation the participation of those concerned (NGOs, civil society). This will guarantee the full effectiveness of participation in the implementation of the measures that will be taken.

For the elderly and people with disabilities, it would be appropriate to:

- e) Develop economic and legislative measures to deal with situations of disability and the advancing age of population aimed at eradicating arbitrariness and discrimination, as well as poverty, through unconditional access to social protection resources.
- f) Reduce situations of poverty by ensuring / promoting a higher income guarantee enabling the elderly and people with disabilities to live in dignity.

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<sup>36</sup> The right of people with disabilities to independent living and inclusion in society <https://rm.coe.int/16806dab9c>

<sup>37</sup> [https://www.un.org/sites/un2.un.org/files/covid-19\\_inclusion\\_du\\_handicap.pdf](https://www.un.org/sites/un2.un.org/files/covid-19_inclusion_du_handicap.pdf)

- g) Strengthen awareness campaigns and information on the life situations encountered by the older persons or persons with disabilities. These campaigns must benefit from accessible means and media communication, such as their dissemination in sign language, accessibility to the digital technologies, subtitling, easy to read and clear messages.
- h) Respect, in the case of the implementation of exceptional institutionalization measures, the free and informed consent of persons, in proportion to the risks (danger) or harm (damage) incurred.
- i) Promote the training of family carers and put in place the means of appropriate financial support (income).

### **3 Promoting the effectiveness of the rights of people in vulnerable situations**

#### **3.1 Protecting the right to education and eliminating disparities in accessing new educational technologies**

The fight against social and economic inequality is doomed to fail if it does not manage to guarantee greater equality of access for all, particularly to quality education for the most fragile or disadvantaged groups. The educational crisis, a consequence of Covid-19, has revealed strong inequalities in access to education (access to digital tools...), particularly for children from disadvantaged social, economic and cultural backgrounds, in many states<sup>38</sup>.

Covid-19 has disrupted access to education, and, in many States, has led to the closure of schools and universities, day-care and early childhood centres, social and medico-social services no longer allowing for continued education and, in some situations, the right to education. Although temporary, this situation is not without consequences in terms of the exercise of social rights, particularly for children belonging to vulnerable groups<sup>39</sup>. The closure of schools depriving them of access to essential services such as canteens or physical exercise can have a significant psychological impact. Furthermore, the closure of schools and education institutions is likely to have a negative impact on the social and psychological well-being of children, pupils and students.

The extension or repetition of a school organisation and/or unusual teaching rhythm (two or three days a week, half-time in class and at home...) set up according to the spread of Covid-19 may jeopardise the future of a generation and be very detrimental to pupils at risk.

In this context, even more than usual, significant attention needs to be paid to children with disabilities. They may need support with everyday tasks, learning, health care. It should be noted that the confinement and measures to prevent the spread of Covid-19 have been marked by a lack of understanding for these children and their families. The fact that these children are the ones who can benefit least from distance learning solutions requires the development of specific provisions and arrangements. This is a question of equity in an inclusive society. Therefore, it is crucial that extra attention is given to reach children and families in vulnerable positions during COVID-19 related lockdowns. This can for example come in the form of certain groups of vulnerable children, pupils and students being exempt from lockdowns and

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<sup>38</sup> One year into COVID-19 education disruption: Where do we stand?  
Social inequalities in the face of the Covid-19 epidemic (insee.fr)

<sup>39</sup> These include children at risk of abuse, children living in poverty, children in low-income families, refugees, children with disabilities, and others.



establishing emergency care arrangements for vulnerable children and pupils who cannot be taken care of at home.

Continued learning has been ensured in many States through alternative learning methods (e.g. distance learning via the Internet, etc.), which has highlighted inequalities in the use of digital tools (lack of digital equipment, insufficient access to broadband, cost of subscriptions, poor parents faced with the use of this type of tool, etc.). This situation has also highlighted the lack of teacher training in the use of new teaching methods, which has not facilitated continued learning. It is true that nothing can replace the direct teaching relationship. The relational dimension is at the heart of all teaching and training activities and educational success depends to a large extent on it. In the context of Covid-19, the massive use of distance learning tools and new technologies has been so urgent that it has been very difficult for many actors to adapt effectively to the use of these tools.

### **Possible actions**

- a) The implementation of short-term actions in the field of education and teaching will benefit from building on the 25 proposals published by the OECD in its guide "A framework to guide an education response to the COVID-19 Pandemic<sup>40</sup>".

In the medium and long term, it will be appropriate:

- b) To analyse and evaluate the tools and the effectiveness of the measures put in place within the framework of Covid-19 with the aim, particularly, of improving the future response to crisis situations. It is essential to involve civil society (parents' associations, teachers' unions, etc.) and as often as possible the children and young people concerned in these processes.
- c) To pay particular attention to the evaluation of distance learning tools and the ways in which they are used. But also to their capacity to provide an appropriate response to the problems posed. Tools which have not been validated by recognised educational bodies may pose problems of protection and respect for private life and infringe rights.
- d) To think about the construction of tomorrow's educational action systems to respond to events such as disasters or pandemics and to build alternative learning models to ensure the continuity of quality education for all, including students with disabilities.
- e) To place rights (human, social) at the centre of education programmes offering young people in the member States the opportunity to understand what it means to exercise their rights and responsibilities as citizens. To give everyone access to critical and reflective thinking. In other words, learning to think for oneself.
- f) To promote all forms of early education from the age of 3 (access to education for all) in order to foster basic learning mechanisms and school success and thus contribute to the objectives of eliminating social and gender inequalities.
- g) To put in place educational action strategies to support all students in need, including students with disabilities, with the clearly stated aim of building an inclusive society.
- h) To provide meals during online learning either free of charge or at a discount, to those children, adolescents and students who are entitled to them.

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<sup>40</sup> [https://globaled.gse.harvard.edu/files/geii/files/framework\\_guide\\_v2.pdf](https://globaled.gse.harvard.edu/files/geii/files/framework_guide_v2.pdf)

### **3.2 Promoting the right to health and access to health care: for the development of long-term cooperation between health and social actors and the advent of new forms of solidarity**

The right to health and access to care is one of the building blocks of respect for everyone. During the Covid-19 crisis, the question of equal treatment, equal access to health care and prevention has questioned the accessibility to all, without discrimination of territory, geographical area, to health services. In the context of the exception and uncertainty of Covid-19, the health systems of many States were confronted with a situation that was difficult to conceive of in peacetime. Testing of the capacity to respond to the demand for care has highlighted, in many places, the difficulty of (a) responding adequately both to the pandemic and to the maintenance of other health services due to a lack of staff, (b) reassigning services to Covid-19 without stopping the provision of other medical services.... Pushed to the limit, some of these systems risked collapse.

Furthermore, in the context of Covid-19 the lack of human, therapeutic and material resources has sometimes led teams of practitioners to make difficult choices and prioritise emergencies such as access to resuscitation, limited treatment or end-of-life support. The prioritisation of patients in access to care due to the saturation of emergency services is difficult to accept and should be the subject of an ethical debate, in light of human rights. This situation does not call into question the quality of the investment made by healthcare personnel in the care of Covid-19 patients, but it does revive the debate in the ethical field.

Furthermore, economic hardship, poverty, lack of public or private insurance cannot be the basis for justifying discrimination against individuals or groups. Similarly, physical barriers to access to health care (difficulties in moving around, distance between home and a healthcare institution, lack of available means of transport, accessibility of facilities, etc.) are all realities that reinforce inequalities and discrimination in access to healthcare rights.

Access to care generally includes assisted living services, which requires the inclusion of vulnerable people in public health and helpdesk protocols and emergency plans. The aim is to ensure that, in the event of limited medical resources, people can benefit from care, assistance and rescue services on an equal footing with everyone else. In addition, setting up appropriate information resources is an integral part of the mission of healthcare assistance services and preventive action. They must enable the people concerned to protect themselves, to be protected whether they are individuals or families.

#### **Possible actions**

- a) Establish "universal health coverage" "universal social security"<sup>41</sup> to eradicate inequalities in access to health care. This measure must allow care needs to be taken into account without discrimination or conditions of life, resources, age or disability, belonging to a minority group, etc. These measures must be coupled with the introduction of a "universal"<sup>42</sup> basic income".

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<sup>41</sup> In a society of respect and consideration for others, to which the texts and guidelines of international or supra-national organisations such as the Council of Europe invite us: everyone must have the right to have enough food to eat, to housing, to healthcare, and to raise their children. We would be wrong to believe that the establishment of an universal income is in itself the miracle cure allowing to wait to solve the evils of our societies. In our societies of consumption and exploitation of resources, whether human, animal or terrestrial, an "universal income" will not necessarily allow everyone to fulfill themselves and contribute to the common world by cultivating their autonomy and social participation. But it is probably one of the relevant means of moving towards what we have called a democracy of respect and dignity.

<sup>42</sup> These proposals may appear as utopian. However, they represent today a working utopia if we refer to the work of the ILO and WHO [wcms\\_176520.pdf \(ilo.org\)](#) or to the ILO World Report 2017-2019. Flagship report:

- b) Initiate a re-actualisation of the ethical and social debate on the end of life, access to health care, discrimination, conditions of use of means and resources in the health field... in light of the events and experience during the Covid-19 pandemic.
- c) Ensure, by all appropriate means, the widespread dissemination of reliable (truthful) information adapted to different populations. This will be a major challenge for the success of the Covid-19 vaccination.
- d) Develop the capacity of health systems to respond to large-scale disasters of any kind or origin, among others, through the implementation of risk prevention plans. The means necessary for this development must be integrated into the dynamics of investment in health systems, access to care and prevention.
- e) Work to break down the barriers between healthcare and social services in order to promote the implementation of integrated action, care and support systems.
- f) In all action programmes, consider people or groups of people in vulnerable situations as a dependent variable in health systems requiring the development of specific responses.
- g) Train health workers to take into account people or groups in vulnerable situations.

### **3.3 Supporting employment and social protection systems: for the implementation of the right for everyone to lead a dignified existence and receive a decent income**

The Covid-19 crisis offers a unique opportunity to rethink working conditions, remuneration and social protection in a context of the struggle against economic and social inequalities, poverty, unemployment and the exclusion of the most vulnerable. It has, moreover, abruptly and unexpectedly raised two questions that will have to be answered in the short term. The first concerns the continuation or even amplification of the downgrading of part of the middle class, the second concerns the downgrading of a generation (18-30 years old), their diplomas no longer opening up for them the same possibilities of access to a social position as that experienced by the generations that preceded them<sup>43</sup>.

The resurgence of the concept of "social classes", which had disappeared under the expressions "invisible", "inaudible" and "abandoned", is being brought to life in the framework of what is today called "downgrading", a term which no longer designates only the working classes, but includes the middle<sup>44</sup> classes, thus indicating to us the gaps which are being created in our societies and of which the Covid-19 crisis gives an account.

The major texts on the fight against inequality, poverty and discrimination are there to help us find the answers, starting with the revised European Social Charter and the idea of social justice that it embodies and which is embodied in the recent PECS document "Towards a revised Council of Europe strategy for social cohesion," from September 2020.

Crises of any kind are an aggravating factor in situations of vulnerability. The Covid-19 crisis is no exception to this rule. In addition to those just mentioned, it highlighted a number of social dimensions that require special attention. This is the case for the recommendations made to enterprises to encourage remote work during the health crisis by many States. While this has

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World Social Protection Report 2017-19: Universal Social Protection to Achieve the Sustainable Development Goals (ilo.org)

<sup>43</sup> <http://www.observationsociete.fr/ages/jeunes/des-jeunes-de-plus-en-plus-souvent-declasses.html>

<sup>44</sup> See PECS "Towards a revised Council of Europe strategy for social cohesion," September 2020.

proved to be an effective means of sustaining whole sections of the economic life of States, it has not been an option for many workers. For example, those working in the retail trade, catering, tourism, entertainment and in the personal services sectors.

The closure or downsizing of enterprises (small and medium-sized) and the economic consequences on employment and, in particular, for low-wage workers, low-income households, intermittent workers (entertainment) or the self-employed (auto-entrepreneurs) have been extremely violent. For some, this has led to a decline in their livelihoods, including, in some situations, problems of food insufficiency and delayed care. Combined with the lack of access to sick leave or healthcare coverage for these categories of workers, the situation quickly became catastrophic for a significant number of people, starting with the most vulnerable. This is all the more true since what is known as "informal, supplementary work", i.e. activities that are often not subject to the general rules governing working conditions and the relationship between an employer and an employee, has suddenly dried up, thereby destroying the livelihood of many workers and their families. Covid-19 has made clear the limits of social models that leave a significant number of people on low or vulnerable incomes isolated and poor.

Financial support in the form of rent moratoria in support of shopkeepers in order to alleviate financial pressures has often been implemented. Some States have put in place exceptional financial support for the most vulnerable. Others have chosen to introduce specific supplementary care benefits... Financial measures taken to support workers (short-term working, bonuses...) and businesses (through various tax cuts...) have been the means to protect jobs and mitigate the most immediate effects of the crisis. Thus, many States have committed to pay part of the wages through various systems to avoid mass layoffs. It should be noted that the various measures to support workers have not been taken in the market economy, but in the context of solidarity through the redistribution of wealth, the scale of which, as a result of political and economic choices, is unprecedented to date.

A high level of income inequality<sup>45</sup> means that more people suffer deprivation and fewer opportunities for professional and social fulfilment. This is why the fight against inequality is doomed if it is not able to guarantee equal access for all to employment and to receive a decent income. Leading a dignified existence, enjoying a minimum of equality from the very beginning of life cannot be reserved for one part of society.

### **Possible actions**

The Covid-19 crisis is one of these rare events, which opens up new possibilities, new ways of thinking, but also the possibility of consolidating a society and its economy in the service of the women and men who make it up. It is an opportunity to support the establishment of a project for an equitable society based on the sharing of wealth and work (this does not mean less work, but decent work and remuneration). This seems all the more necessary at a time when jobs are becoming more precarious, careers are becoming more fragmented, and robotisation and artificial intelligence are widely questioning the need for skilled and expert labour.

For this reason it would be appropriate to:

In terms of employment and vocational training:

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<sup>45</sup> As a reminder, JP Morgan, founder of the Morgan and Chase bank, in the 19th century advocated a salary scale from 1 to 20. Henry Ford recommended a ratio of 1 to 50, today in France we are on a scale of 1 (€1200) to 233 (€280,000 monthly for 1% of employees).

<https://www.cadremploi.fr/editorial/actualites/actu-emploi/tres-hauts-salaires--mieux-vaut-etre-cadre-dirigeant>

- a) Promote and value work, through the prevention of occupational disintegration by engaging in policies to secure professional careers and prevent exclusion from the sphere of work.
- b) Strengthen the mechanisms for upgrading skills and re-qualification for people in a situation of professional exclusion, in particular through a relevant continuing education and training system.
- c) Put in place the necessary prevention tools to target workers in vulnerable or fragile situations in order to secure their careers by offering services adapted to the level of complexity of the situations encountered.
- d) Consider special youth support programs to ensure adequate education and training for entry into the labour market.

At the level of social protection:

- a) Strengthen the social protection mechanisms that are essential to support the situations experienced by citizens, irrespective of times of crisis. Social protection is essential in the fight against inequalities, it strengthens social cohesion and protects the most vulnerable.
- b) Remove financial barriers to access to quality health care. Strengthen income and employment protection through proactive development policies. The response that will have to be given to environmental issues undoubtedly constitutes a strong axis of development and new "sources" of employment.
- c) Take political and economic measures to provide health coverage for all, with special attention to women and men in atypical or informal employment, the self-employed, migrants and vulnerable groups.

More generally:

Programme pan-European studies and research to provide detailed knowledge of the effects, both economic and social, of the decisions taken by member States during the Covid-19 crisis. Not with the idea of producing comparisons between States, but of creating indicators for development and shared practices.

Break the spiral leading to the downgrading of social classes and to an increasing part of youth to think of themselves as part of society. The perspective of an inclusive society as a project for society could partly respond to the current concerns of populations, but it is under construction and little known by the majority. That is why, in order to combat the new heteronomies that are being introduced into democratic societies, member States could already now consider working towards rethinking the income hierarchy and the distribution of wealth.

### **III. PROSPECTS AND POSSIBLE DEVELOPMENT. NEW TRENDS IN LIGHT OF COVID**

The Covid-19 crisis reminds us that we often think that all we have to do to envisage the future is to predict it. Knowing what tomorrow will bring then boils down to formulating predictions and listening to those of others, hiding areas of uncertainty. This reasoning has been

somewhat undermined by the Covid-19 pandemic. If prediction remains something natural, it cannot do without taking into account uncertainty as an element dependent on the situation to which the possible statement intends to provide answers.

With the Covid-19 pandemic, the basic trend is reaffirmed, which poses a challenge to European societies to build democracies based on social rights, human rights and respect for dignity. This construction today calls for the notions of social cohesion, inclusive society and situation and calls for their concrete amplification in order to transform the daily lives of citizens. This is why asserting the right of everyone to a dignified existence makes it necessary to pursue public policies for the support and assistance of people and groups in vulnerable situations through the implementation of appropriate action programmes. But also by promoting in the public debate the issues surrounding the establishment of an inclusive society and the challenges in terms of social cohesion. The participation of the people concerned in these debates is essential for the successful social implementation of the selected responses.

There is still a long way to go before the advent of new forms of solidarity that promote the effectiveness of the rights of vulnerable groups and before their full participation is realised. The increased use of artificial intelligence technologies is likely to bring new answers and new forms of accessibility. This must, however, be accompanied by all the necessary attention so as not to send people in vulnerable situations back, under the guise of new technologies, to new dependencies and to situations where their real consent is not sought, but their mere acceptance of decisions already taken. The processing of personal data, which is nowadays authorised by AI, is not a neutral act but constitutes, as a matter of principle, an invasion of privacy<sup>46</sup>. Citizens cannot be excluded from decisions that concern them in various fields (health, social protection, education...) on the pretext that an algorithm<sup>47</sup> will have said what is good for them and what satisfies their needs. We must not forget that algorithms are neither age nor gender blind and tend to preserve the programmer prejudices. Thus, in applications of AI discrimination against certain groups must be taken seriously.

The Covid-19 crisis is a strong reminder that people with poor general knowledge to access, understand, evaluate information and make a health care decision, are most affected by Covid-19. Five years ago almost one in two adults reported having difficulties with health knowledge to enable them to take care of their own health and that of others<sup>48</sup>. The pandemic and its consequences are forcing a rethink of the thoughts and actions of believing that simply disseminating information is enough to trigger preventive behaviour. As if the simplicity of a message makes real life compatible with the information disseminated. Moving towards new behaviours, if these are to be sustainable, requires that social interactions to be organised to enable in-depth learning and the choice of prevention methods and the transposition of these methods into everyday life to be supported. We cannot be satisfied with an operation that is limited to the simple transmission of information. Covid-19 provides an opportunity to build on the intelligence of citizens (another name for participation) and to open up new forms of solidarity.

Covid-19 offers an opportunity to bring social and human rights to the forefront of decision-making. In particular, the promotion of the right to health and access to health care can be developed through the implementation of health education plans for people in vulnerable situations and the strengthening of cooperation between health and education actors. There is a need to organise large-scale (Council of Europe member States) study and analysis programmes providing feedback with a view to developing new indicators to anticipate the consequences of future crises, whether health-related or not, and new intervention practices.

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<sup>46</sup> [https://www.echr.coe.int/Documents/FS\\_Data\\_FRA.pdf](https://www.echr.coe.int/Documents/FS_Data_FRA.pdf)

<sup>47</sup> The publication of the variables used for the construction of these algorithms is a democratic requirement.

<sup>48</sup> <https://academic.oup.com/eurpub/article/25/6/1053/2467145>

If one of the challenges of an inclusive society is to reduce situations of vulnerability and thus enable everyone to live a dignified life, the introduction of a universal basic income<sup>49</sup> can be a first response to this challenge. However, in view of the paradigm shift that it implies, this response requires that the terms of the reestablishment of the social contract in which it is embedded be submitted to public debate. In the light of the lessons that can be drawn from the consequences of the pandemic, this question is no longer simply a philosophical or conceptual one but one that is taking place in the ongoing transformation of social organisation, work organisation and production methods. The beginning of this century has indeed seen a lasting transformation and precariousness of jobs (unskilled jobs being paid by the task, by the day, to the extent of what we now call "the uberisation of jobs"), careers becoming fragmented, forcing everyone to train throughout their lives, robotisation and artificial intelligence questioning in a broad way the need for qualified and expert labour.

## **Conclusion**

The Covid-19 pandemic affects<sup>50</sup> more than 170 countries more than a year after its onset (December 2019). It has placed every citizen at the centre of the health challenges and has caused a break in the practices of various fields of activity that used to punctuate the life of our societies. The pandemic has brought to light social phenomena that could have been thought to have been partly resolved in the more or less long term, but in fact it has acted as an accelerator of social phenomena and situations of vulnerability. For these reasons, this pandemic must be used as an opportunity to make progress towards the achievement of an inclusive society and the strengthening of social cohesion in European societies brought together within the Council of Europe.

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<sup>49</sup> See ECSP "Towards a revised Council of Europe strategy for social cohesion," September 2020.

<sup>50</sup> [https://www.lemonde.fr/les-decodeurs/article/2020/05/05/coronavirus-age-mortalite-departements-pays-suivez-l-evolution-de-l-epidemie-en-cartes-et-graphiques\\_6038751\\_4355770.html](https://www.lemonde.fr/les-decodeurs/article/2020/05/05/coronavirus-age-mortalite-departements-pays-suivez-l-evolution-de-l-epidemie-en-cartes-et-graphiques_6038751_4355770.html)