



Nicolas Schmit  
Commissioner for Jobs and Social Rights  
European Commission  
1049 Brussels

Brussels, 17 April 2020

## Re.: COVID19 and older persons

Dear Commissioner Schmit,

On behalf of AGE Platform Europe (AGE), the largest EU network of organisations of and for older persons, I would like to thank you for the joint letter you addressed together with Commissioner Kyriakides and Commissioner Dalli to EU Ministers asking them to use all available EU instruments to protect people in the most vulnerable situations as a result of the COVID19 crisis, among whom older persons.

We congratulate you for this initiative and, given your portfolio on social rights, we would like to share with you the work that AGE has done to raise awareness of the situation faced by older persons during this pandemic and express our concerns about [violations of their human rights, including their right to health and long-term care](#)<sup>1</sup>:

- Since a couple of weeks, we witness more and more alarming situations in long-term care facilities across the European Union. Reports of abandoned or even dead older persons in care institutions are shocking. According to the EU Pillar of Social Rights everyone, including persons residing in care institutions, should have access to medical, social and palliative care on an equal basis with the general population. Equally important, personal protective equipment must be available for both staff and residents, as outlined in [our press release for the World Health Day](#)<sup>2</sup>.
- We are also concerned regarding triage protocols applied in some countries and agree to the analysis in your common letter that age alone should not be a criterion for deciding against life-saving treatment.
- Since the numbers of persons infected by COVID19 might rise again soon after confinement measures are partially lifted, we think that the EU should urgently provide guidance to Member States to ensure such tools are developed to support decision-making of healthcare professionals solely on the basis of individual medical needs, scientific evidence and ethical principles that respect international ethical standards defined by WHO and the UN for emergency situations. While some older persons may have decreased immune function and

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1 AGE report on COVID-19 and human rights in older age: <https://www.age-platform.eu/policy-work/news/covid-19-older-persons%E2%80%99-rights-must-be-equally-protected-during-pandemic>

2 <https://age-platform.eu/press-releases/investment-health-all-best-reward-we-can-give-nurses>



suffer from multimorbidity which may impact their chance of surviving intensive medical intervention, chronological age alone should never be a criterion for medical triage. Protocols based on non-medical criteria such as age or disability, deny persons their right to health and life on an equal basis with others.

We welcome your joint statement and would like to call on the European Union to support Member States and strongly encourage them to develop coordinated and solidarity-based answers in the short and long-term perspective to ensure equal access for all to healthcare and long-term care, paying particular attention to those who face challenges such as older persons and persons with disabilities. Looking ahead, massive investment in health promotion and disease prevention will be crucial to make our health and social care systems more resilient to crisis such as the one we are currently facing. The announced EU Coronavirus Response Investment Initiative (CRII) and its extended new package CRIIPlus are most welcome steps and should be used to support EU Member States and regions in mobilising essential investments in the most exposed sectors, notably to strengthen the provision of health and care and other essential services to support those most at risk and severely hit by the pandemic crisis.

In the medium term, initiatives to preserve jobs and maintain employability should also take into account the needs of those who risk not finding new employment opportunities due to their advanced age. The work started by DG Employment on the implementation of principle 18 of the European Pillar of Social Rights should proceed with a thorough reflection on how the EU can contribute to high quality standards in long-term care and to address the investment gap in social infrastructure already identified before the COVID-19 crisis<sup>3</sup> and how to increase the resilience of health and long-term care systems in the context of demographic change.

AGE and our member organisations remain committed to provide support and feedback and to relay your work through our communication channels. It is crucial that citizens of all ages understand what the EU is doing to support their national and local health and long-term care systems, as well as what they can do as individual citizens. We also look forward to the launch of the WHO Decade of Healthy Ageing<sup>4</sup> as being a major opportunity to further enhance access to health and care for everyone including older persons, and we hope that the European Commission will join forces with the World Health Organization and will better support their work in the future.

We thank you again for all your efforts which will benefit all citizens across the EU, and remain

Yours sincerely,



Anne-Sophie Parent  
Secretary General

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<sup>3</sup> Franssen, Lieve et al. [Boosting Investment in Social Infrastructure in Europe](#). European Economy Discussion Paper 074, January 2018.

<sup>4</sup> <https://www.who.int/ageing/decade-of-healthy-ageing>