

COVID-19 and people with disabilities

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

Liechtenstein



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1 Executive summary

Disability inclusivity of disaster and recovery planning

Liechtenstein is closely bound to Switzerland by the Customs Union Treaty of 1923.¹ Based on this customs union treaty, the Swiss Epidemics Act (EpG)² and other legal requirements for economic national supply also apply in Liechtenstein.

Based on Article 4 in conjunction with Article 10 of the Customs Union Treaty and with respect to Article 6 and 41 paragraph 3 of the Swiss Federal Act (as of 28 September 2012) on the Control of Human Diseases, Liechtenstein issued a statutory ordinance on measures to control the coronavirus (COVID-19 Ordinance) on 25 June 2020.³ This COVID-19 Ordinance has been continuously adapted to pandemic developments, for the last time on 8 January 2021. Within the COVID-19 Ordinance, people with disabilities are not referenced by any specific guideline or measure, with one exception. In amending the COVID-19 Ordinance on 18 January 2021, certain exemptions from the safeguard measurements for people with disabilities were explicitly included in Article 3 of the COVID-19 Ordinance (e.g., persons with certain disabilities for whom wearing a mask is not reasonable or feasible in practice are exempt, for the purpose of necessary communication with people with a hearing impairment, masks can be removed, etc.).

Impact of the virus on mortality among people with disabilities

On a special website, the Office of Statistics publishes selected statistical information on the current economic and social situation in relation to the COVID-19 pandemic.⁴ The latest official figures of the COVID status in Liechtenstein are from 18 January 2021. They show that during the ongoing COVID-19 pandemic in total 52 persons died from / in connection with a COVID-19 infection. There are no official statistics and no data available on infection or the mortality rate in connection with COVID-19 of people with disabilities in Liechtenstein.

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

In terms of independent living (see section 9 for further details) residents of a home for people with disabilities face a different situation under the COVID-19 pandemic. The hygiene and safety guidelines, which each resident-provider had to implement, found their legal basis in the COVID-19 Ordinance and the order of the Office of Public Health (as of 28 May 2020), but had to be developed individually. There was no overall concept/framework. Main differences to an independent living arrangement during the crisis were the obligation to wear a face mask in residential homes, the restriction of visitors (only one at a time, wearing face masks, keeping distance, etc.). Also, the

Treaty of 29 March 1923 between Switzerland and Liechtenstein on the annexation of the Principality of Liechtenstein to the Swiss customs territory (ZV), LGBI. 1923 No. 24 LR 0.631.112 (in Switzerland: SR 0.631.112.514).

Swiss Federal Act of September 28, 2012 on the Control of Communicable Human Diseases (Epidemics Act, EpG), in Switzerland: SR 818.101.

³ Statutory ordinance on measures to control the coronavirus (COVID-19 Ordinance). Published on 25 June 2020. Link: 2020206000 (gesetze.li).

⁴ Office of Statistics: statistical information on the current economic and social situation in relation to the COVID-19 pandemic. Link: Amt für Statistik (AS) - Sonderseite COVID-19 (IIv.li).

temporary leaving of the residential homes was restricted (residents had to be accompanied by instructed relatives and/or caregivers or staff-members, considering hygiene measures).

In terms of access to education (for further details see section 12) the COVID-19 Ordinance defined that classroom instruction must be carried out in Liechtenstein. There was only a short home-learning phase during the first lockdown in spring 2020. Pursuant to Article 3b of the COVID-19 Ordinance, the following rules apply to persons in publicly accessible indoor areas of facilities and operations:

1) Every person must wear a face mask in publicly accessible indoor areas of facilities and establishments......

Paragraph 1 also applies at schools under the School Code, in classrooms of other educational institutions, and in institutions providing supplemental family childcare. Situations in which wearing a mask significantly complicates teaching, therapy or care are exempt.

This reduced the potential negative effect of the COVID-19 pandemic to people with disabilities by avoiding any disproportional burden resulting out of home-based learning. Nevertheless, the effect of distance learning to pupils with disabilities during spring 2020 (first lockdown) is unknown, no studies or data collection have been done so far.

Article 8(4) of the COVID-19 Ordinance refers to the fact that while the government refrains from imposing an obligation to work from home, it recommends working from home wherever possible. Particularly vulnerable persons are specifically protected. For them, the right to home office or equivalent workplace protection or leave of absence is introduced. (See section 13 for further details). For people with disabilities who work in the second labour market, home-based work is in most cases not an option. On the one hand because it would be too time-consuming to adopt or even not possible to set up the required infrastructure to carry out the jobs at home and on the other hand because a targeted, constant assistance is necessary and could not be given at home. Further, due to the changed working conditions, residential homes for people with disabilities have experienced a greatly changed situation. Wherever people with disabilities can no longer pursue their previous employment to the same extent, residential homes have had to find new solutions, since space has become more cramped due to more residents present and the official requirements for the minimum distance between two people. This has also led to a higher potential for conflicts among persons living in residential homes for people with disabilities.⁵ Here, too, the task of finding a solution lays with the residential homes. On the part of the government, no corresponding guidelines were given.

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Information provided by the Office for the Equality of Persons with Disabilities (Liechtensteiner Behinderten-Verband – Büro für Gleichstellung), bilateral exchange on the situation of people with disabilities during the COVID-19 pandemic as of 12.1.2021, homepage: http://www.lbv.li/Buero-Gleichstellung.php.

Examples of good practice

It is certainly positive that the press conferences of the government concerning the pandemic situation where mainly translated into sign language. In addition, there have been two articles in the daily newspapers in Liechtenstein about the COVID-19 measures and situation in "plain language".

Recommendations and opportunities for change

In particular, the importance and urgency during the still ongoing COVID-19 pandemic has shown that translation of government press conferences and accompanying measures into plain language are essential. This awareness should be sustained. Further steps should be taken in this regard in the future, so that the communication of the government as well as the state administration becomes accessible, easier to read and understandable to all residents in Liechtenstein.

2 Disability-inclusive disaster and recovery planning

<u>Article 11 – Situations of risk and humanitarian emergencies & Article 4(3) – involvement of persons with disabilities</u>

The principality of Liechtenstein is a double-landlocked country between Austria and Switzerland. By the end of 2019 Liechtenstein had 38 749 residents, resulting in a population density of 242 residents per km.⁶ The country forms a customs union with the Swiss Confederation in accordance with their customs treaty and is subject to the Swiss Epidemics Act of 2012.⁷

Liechtenstein and Switzerland have close diplomatic and economic relations with each other and therefore have open borders. During the pandemic, there was no change in the border control between these two countries.⁸ Austria, however, closed its borders to Liechtenstein in March 2020 during the first COVID wave. Only people with proof of employment in Liechtenstein were allowed to cross the border.⁹

2.1 Commitments to disability in disaster management and recovery strategies

Liechtenstein is closely bound to Switzerland by the Customs Union Treaty of 1923. ¹⁰ Based on this customs union treaty, the Swiss Epidemics Act (EpG) ¹¹ and other legal requirements for economic national supply also apply in Liechtenstein. This means that Liechtenstein must also apply the Swiss legal measures for combating the coronavirus with reference to the Customs Union Treaty. This has an effect in particular on the requirements for the movement of persons and goods and for the supply of important medical goods. However, with regard to the measures for the population of Liechtenstein, the government has its own legal leeway. This applies in particular to measures in the field of education, the enforcement of assembly bans, etc., which may deviate from the requirements of Switzerland.

Based on Article 4 in conjunction with Article 10 of the Customs Union Treaty in reference to Article 6 and 41 paragraph 3 of the Swiss Federal Act on the Control of Human Diseases, Liechtenstein issued a statutory ordinance on measures to control the coronavirus (COVID-19 Ordinance) on 25 June 2020. 12 This COVID-19 Ordinance

⁶ Office of Statistics. Link: Bevölkerungsstatistik vorläufige Ergebnisse 31. Dezember 2019 (IIv.li)

Schiess, P., Der Zollvertrag und die Massnahmen zur Bekämpfung des Coronavirus. Wie Schweizer Recht via Zollanschlussvertrag und Epidemiengesetz in Liechtenstein Anwendung findet. Bendern (Arbeitspapiere Liechtenstein-Institut, 65). Link: https://www.liechtenstein-institut.li/publikationen/schiess-ruetimann-patricia-m-2020-der-zollvertrag-unddie-massnahmen-zurbekaempfung-des-coronavirus.

⁸ Government of the Principality of Liechtenstein. Media announcementt as of 17 March 2020: Generelles Veranstaltungsverbot und weitere Schliessungen. Link: https://www.regierung.li/coronavirus/2020-3.

Government of the Principality of Liechtenstein. Media announcement as of 16 March 2020: Regierung verschärft Massnahmen zur Verlangsamung der Ausbreitung des Corona-Virus. Link: https://www.regierung.li/coronavirus/2020-3.

Treaty of 29 March 1923 between Switzerland and Liechtenstein on the annexation of the Principality of Liechtenstein to the Swiss customs territory (ZV), LGBI. 1923 No. 24 LR 0.631.112 (in Switzerland: SR 0.631.112.514).

Swiss Federal Act of 28 September 2012 on the Control of Communicable Human Diseases (Epidemics Act, EpG), in Switzerland: SR 818.101.

Statutory ordinance on measures to control the coronavirus (COVID-19 Ordinance). Published on 25 June 2020. Link: 2020206000 (gesetze.li).

has been continuously adapted to pandemic developments, most recently on 8 January 2021. Within the COVID-19 Ordinance, people with disabilities are not referenced by any specific guideline or measure. Even on the government's COVID-19 homepage no separate information or specifications for people with disabilities are documented.¹³

Thus, people with disabilities are not specifically referenced in the governmental core strategy or plan with respect to COVID-specific disaster management or recovery planning. Upon request, the Government referred to the Swiss Ordinance of 19 June 2020 on Measures in the Special Situation to Combat the Swiss COVID-19 Pandemic.¹⁴

The Office for the Equality of Persons with Disabilities proactively contacted the Ministry of Health in early December 2020. The aim of the conversation was to set out the problems that arise for people with disabilities in relation to the COVID-19 measures. In particular, it was pointed out that for people with certain disabilities, wearing a face mask is not reasonable or feasible in practice - for example because of motor limitations. For the purpose of necessary communication with people with a hearing impairment, cognitive impairment, impairment of attention, exemptions from wearing a face mask for accompanying or caring persons are necessary. Furthermore, the Office for the Equality of Persons with Disabilities informed the Ministry of Health that in Switzerland based on Article 3a of the Ordinance of 19 June 2020 on Measures in the Special Situation to Combat the COVID-19 pandemic (COVID-19 Ordinance Special Situation; SR 818.101.26), an information card for deaf people was issued by the government, allowing them special exemptions to be able to participate in daily life without unnecessary difficulties. The information card thus documents the bearer and entitles him/her to make use of the special regulations.

It was not until new COVID-19 measures, which the government enacted by amending the COVID-19 Ordinance on 18 January 2021, that certain exemptions for people with disabilities were also explicitly included in Article 3 of the COVID-19 Ordinance. These state now that persons are exempt from the mask requirement if they can prove, by means of a certificate issued by a physician or psychotherapist licensed to practice under his or her own professional responsibility, that they cannot wear a face mask for special reasons. These may be medical reasons (facial injuries, severe respiratory distress, anxiety when wearing a face mask, people with certain disabilities for whom wearing a mask is not reasonable or feasible in practice - for example due to motor limitations, etc.). For the purpose of necessary communication with people with a hearing impairment, the staff in particular can of course remove the mask.

13 Liechtenstein Government homepage "Covid-19". Link: Regierung des Fürstentums Liechtenstein.

In the explanations to Article 3a of the Swiss COVID-19 Epidemic Ordinance states as follows:
On the other hand, persons who can prove (e.g., by means of a doctor's certificate) that they

cannot wear a face mask for special reasons are exempt from the mask obligation (subparagraph b). These may be medical reasons (facial injuries, severe respiratory distress, anxiety when wearing a face mask, people with certain disabilities for whom wearing a mask is unreasonable or not feasible in practice - for example, due to motor limitations - etc.). For the purpose of necessary communication with people with a disability (e.g., hearing impairment, cognitive impairment, impairment of attention), in particular, the staff or accompanying persons can remove the mask as a matter of course.

The epidemiological measures were relatively mild compared to those of other European countries. The population was never actively put under lockdown and maintained the right to move freely.

At this point it should be mentioned that Liechtenstein has signed in 2020 but not ratified the UN Convention on the Rights of Persons with Disabilities (CRPD) yet. Thus, the CRPD is not in place in Liechtenstein so far, even if the commitment to implement the CRPD has been given in 2020.

The Office for the Equality of Persons with Disabilities (Liechtensteiner Behinderten-Verband – Büro für Gleichstellung)¹⁵ recognised that it is crucial that information about how to prevent and contain the coronavirus has to be accessible to everyone. Thus, the Office for the Equality of persons with Disabilities set up a specific website with all relevant information, links and further documentation including video clips. The information about COVID-19 on this webpage is available to the public in accessible means, modes and formats, including accessible digital technology, captioning, easy-to-read and plain language.

The Liechtenstein Government was slow to respond to the need of people with disabilities to communicate the measures adopted by the government in a comprehensible and accessible manner. In December 2020, when a further partial lockdown was decided by the government, the general public communication of the government was accompanied by a specific, digital information fact sheet in easy-to-read and plain language on the homepage of the Authorities.¹⁶

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

During the process of developing new legal provisions, there are regular consultations (*Vernehmlassung*). It has been a long tradition in Liechtenstein to invite relevant civil society groups to make comments and statements on draft government bills. These comments are made public and are taken into consideration by the government when bringing the final version of an act to the parliament. The Office for the Equality of persons with Disabilities is such an institution which is involved in the process of new legal provisions which have a connection to the concerns of persons with disabilities. The same is valid for the Association for Human Rights in Liechtenstein. In addition, this association has the legally granted competence to deliver opinions on draft laws and regulations as well as on the ratification of international conventions insofar as they are relevant to human rights. Although there has been no consultation on the COVID-19 Ordinance (see final paragraph in this section), the Office for the Equality of Persons with Disabilities requested an exemption for the wearing of masks by persons with disabilities by December 2020. This objection was taken into account by amending the COVID-19 Ordinance on 18 January 2021 (see section 2.1 above).

¹⁶ Easy-to-read and plain language fact sheet of the government about COVID-19 Measures in December 2020. Link: medienmitteilung-winterruhe-in-leichter-sprache-kurz.pdf (IIv.li).

Office for the Equality of Persons with Disabilities. Link: <u>LBV – Sonderseite: Corona</u>. The Office for the Equality of persons with Disabilities was set up by the Liechtenstein Government in accordance with Article 22 of the AEPD after the act entered into force in 2007. In implementation of the act, the office has been established as an independent institution integrated into the organisational set-up of the Liechtenstein Association of Persons with Disabilities.

In relation to COVID-19 the government emphasised the importance of an exchange of information and a discussion regarding the comprehensive and drastic measures to reduce the high number of COVID-19 cases among others also with the Association for Human Rights in Liechtenstein. The support of the association for these measures was clearly given and both parties said that it can therefore be spoken of national solidarity. In detail, the Association for Human Rights judges that the ordered measures of the government:

"To protect against the spread of the COVID-19 pandemic ... are in accordance with human rights. The associated restrictions on civil liberties are enshrined in law. They are proportionate, temporary and regularly reviewed. The Association for Human Rights therefore supports the package of measures decreed by the government from 20 December 2020 to 10 January 2021." ¹⁷

From a juridical perspective, the legal measures to combat the COVID-19 pandemic in Liechtenstein involved the enactment of a new ordinance which did not legally require extensive consultations with affected organisations. Ordinances are issued by the government and are based on legal requirements given by a law. Thus, the involvement of non-governmental organisations in the legislative process was and is not necessary with regard to the decrees on combating the COVID-19 pandemic at the ordinance level.

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

To the knowledge of the author, in Liechtenstein no impact assessments or research concerning the situation of persons with disabilities have been conducted in relation to inform disaster management and recovery planning during the COVID-19 pandemic.

With the start of the first COVID-19 lockdown in Spring 2020, the Liechtenstein government recognised that domestic isolation and quarantine are exceptional situations which have an impact on the psyche of many people and can be very stressful. Therefore, the government has turned to scientifically researched and proven behavioural measures and mental strategies of the Professional Association of Austrian Psychologists (BÖP) and published recommendations on how the population can cope with this exceptional situation. The recommendations were published by the Liechtenstein Victim Support Centre, a government institution. Again, these recommendations do not include specific information for persons with disabilities. No impact assessment or research concerning the situation of persons with disabilities in the COVID-19 crisis was conducted to inform disaster and recovery planning on governmental level.

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¹⁷ Statement of the Association for Human Rights. Link: <u>Nationaler Schulterschluss für Winterruhe</u>: <u>Hebensorg - Corona Schutzkonzept für die Schulen des Fürstentums Liechtenstein</u>.

Recommendations on how the population can cope with the quarantine measurements in the COVID-19 crisis. Published by the Liechtenstein Victim Support Centre. Link: hausliche-isolation-uberstehen.pdf (IIv.li).

2.4 Use of disaster management and recovery planning funds

To the knowledge of the author, in Liechtenstein there are no funds associated with disaster management and recovery planning being allocated to or used on disability-related purposes.

3 Mortality connected to COVID-19 among people with disabilities

Article 10 – The right to life

3.1 Are official statistics available concerning the overall mortality rate of people with disabilities?

No. There are no official statistics available concerning the overall mortality rate of people with disabilities in Liechtenstein.

On a special website, the Office of Statistics publishes selected statistical information on the current economic and social situation in relation to the COVID-19 pandemic.¹⁹ No additional data are collected for this purpose, but existing pandemic-specific data is analysed. For this reason, there is no data on infection or mortality rates of persons with disabilities in connection with COVID-19.

Due to missing statistical data of the mortality rate of people with disabilities, no statement to the proportionately higher or lower mortality rate of people with disabilities and the mortality rate for the general population can be made.

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

No, there is no official statistic available concerning the mortality rate of people with disabilities who died from complications connected to COVID-19.

The latest official figures of the COVID status in Liechtenstein are from 18 January 2021. They show that during the ongoing COVID-19 pandemic in total 52 persons died from / in connection with a COVID-19 infection.²⁰ There is no official statistic available concerning people with disabilities and COVID-19.

There is no official data available concerning the places of death of people with disabilities with a confirmed diagnosis of COVID-19.

There is no official data available concerning the places of residence of people with disabilities that have died with a confirmed diagnosis of COVID-19.

²⁰ Continuously updated data related to the COVID-19 pandemic can be found at the following link: aktuelle-fallzahlen.pdf (IIv.li).

Office of Statistics: statistical information on the current economic and social situation in relation to the COVID-19 pandemic. Link: Amt für Statistik (AS) - Sonderseite COVID-19 (IIv.li).

4 Access to health

Article 25 - Health

The health system in Liechtenstein is characterised by mandatory health insurance. There is one national hospital located in Liechtenstein. However, residents also have access to outpatient and/or hospital care in Switzerland and Austria based on bilateral agreements between Liechtenstein and these two countries.

4.1 Emergency measures

The public health measures in Liechtenstein have corresponded mostly with those of the Swiss Federal Office of Public Health. These measures can be considered relatively moderate in comparison to the lockdowns seen in Italy, Spain, and France, who had much more restrictive regulations. Masks were only required within healthcare and home care settings and visitation of healthcare facilities was prohibited. Consequent and early measures taken in nursing homes (i.e., masks, hygiene, prohibition of visits to nursing home residents, testing of collaborators in contact with the index patient) contributed to containing the pandemic and preventing further serious outcomes in individuals at high risk.²¹

Article 4 of the COVID-19 Ordinance regulates the obligation to develop and implement a protection concept, which is the responsibility of the individual operators of all publicly accessible facilities, including educational institutions. Without a protection concept ready for implementation, the facility may not be open to the public or the activities and events may not be held. The protection plans must include the safety and security personnel present at the retail, service, educational or recreational venues or at the event location, such as the customers, guests, visitors and participants.

The ban on visits to the Liechtenstein National Hospital was relaxed as of 10 June 2020. However, the requirements of the protection concept drawn up by the hospital apply.²² This is based on the legal requirements and the order from the Office of Public Health. Due to the tight infrastructural conditions in the hospital, visits were limited to 1 visitor at a time. This means that a maximum of 2 visitors per day and per patient (one at a time) with a maximum visit duration of 1 hour are permitted. In addition, the hygiene and protective measures must be observed. This includes the general mask obligation.

Article 7b of the Liechtenstein COVID-19 Ordinance describes "persons at particular risk" and calls on them to "stay at home and avoid crowds". People for whom an illness may have a particularly disastrous effect are thus protected by requirements that go further than those for everyone, regardless of whether they would take the risk of severe complications if they were infected.

Pursuant to Article 11 of the COVID-19 Ordinance, Liechtenstein applies the provisions of the Swiss COVID-19 Ordinance on the maintenance and adequate supply of care

M. Paprotny (in corporation with further authors), Liechtenstein National Hospital, Flattening the curve in 52 days: characterization of the COVID-19 pandemic in the Principality of Liechtenstein, link: ResearchGate.

²² Protection concept of the Liechtenstein National Hospital, as of 21. July 2020. Link: <u>Schutzkonzept-vom-Landesspital.pdf</u>.

and essential medical supplies to the population on the basis of the customs treaty with Switzerland. In addition, orientation is given to the guidelines for triage in intensive care units of the Swiss Academy of Medical Sciences (SAMS) and the Swiss Society of Intensive Care Medicine (SGI).²³

The coronavirus created additional challenges for intensive care units, with health professionals facing particularly difficult situations and carrying a heavy weight of responsibility. In 2020, the SAMS therefore prepared an annex on triage decisions under resource scarcity, supplementing the 2013 guidelines. Thus, the guidelines for triage in intensive care units clarifies the importance of the principle of short-term survival prognosis, which is crucial for triage. It is formulated more explicitly that the aim is always to make decisions in such a way that as few people as possible die. The principle of careful consideration and re-evaluation of the patient's will be also clarified. The explanations regarding age, disability and dementia as inadmissible criteria for triage decisions and the use of the Clinical Frailty Scale were in part formulated too succinctly in the previous version, which had led to misunderstandings. These passages were supplemented or reworded with the involvement of patient organisations.

The Act on Equality of Persons with Disabilities Act (AEPD)²⁵ aims to eliminate and prevent discrimination against people with disabilities. It seeks to guarantee equal participation in the daily life of society for people with disabilities. The act covers the fields of education, employment, goods and services, social protection and security as well as social advantages. In relation to the COVID-19 crisis no amendments have been made to the AEPD, nor is any legal reference between the COVID-19 Ordinance and the AEPD in place.

4.2 Access to hospital treatment for COVID-19

There is only one observational study describing all the patients who had an RT-PCR-confirmed diagnosis of COVID-19 infection in the Principality of Liechtenstein during March and April 2020. The study aims to characterise the development of the COVID-19 pandemic in Liechtenstein while also highlighting the containment strategies used in its initial phase.²⁶ The study did not focus on or specifically research the situation of persons with disabilities during the COVID-19 pandemic.

There is no official data available concerning the number of people with disabilities who were hospitalised and admitted to intensive care units because of COVID-19 symptoms.

SAMS annex on triage decisions under resource scarcity, supplementing the 2013 guidelines, available at: https://www.samw.ch/dam/jcr:be92b741-c1df-4dab-8d1d-0ef66619d0ae/guidelines_v3-1_sams_triage_intensive_care_resource_scarcity_20201217.pdf.

In these guidelines (SAMS/SGI, No. II.2), under the keyword "equity", it is stated as follows: Available resources are to be distributed without discrimination, i.e., without unjustified unequal treatment according to age, gender, place of residence, nationality, religious affiliation, social status, insurance status, or chronic disability."

²⁵ Act on Equality of Persons with Disabilities (*Gesetz über die Gleichstellung von Menschen mit Behinderungen, Behindertengleichstellungsgesetz* (AEPD), BGIG), 25 October 2006, LGBI. 2006, No. 243, available at: https://www.gesetze.li/konso/pdf/1999096000?version=5.

M. Paprotny (in corporation with further authors), Liechtenstein National Hospital, Flattening the curve in 52 days: characterization of the COVID-19 pandemic in the Principality of Liechtenstein, link: ResearchGate.

4.3 Treatment for COVID-19 in congregate settings

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

4.4 Public health promotion and testing during the pandemic

Starting on 30 March 2020, suspected COVID-19 cases were referred to either a drive-through testing facility or the national hospital, depending on the severity of the symptoms. The drive-through testing facility was established on the same day. Testing was available to the residents of Liechtenstein as well as anyone working in Liechtenstein, regardless of their place of residence. The possibilities and requirements to use the facility had shown a low-threshold access to testing. The test criteria varied over time and were adapted according to the official recommendations of the Swiss Federal Office of Public Health (FOPH).²⁷ The testing frequency in Liechtenstein was considerably higher than in Switzerland (0.81 vs. 0.53 tests per 1 000 inhabitants per day during the first COVID-19 wave).

The Government of Liechtenstein has extended public communications to the population regarding COVID-19 measures and developments through simultaneous translation into sign language. Apart from the written government communications and advertising campaigns accompanied by plain language, pictures and symbols, no further measures have been taken to provide barrier-free access to the announcements and guidelines concerning public health announcements and measures for people with disabilities. ²⁹

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

Due to missing statistical data regarding people with disabilities, no statement on the impact of the COVID-19 crisis on access to health services related to pre-existing physical or mental health conditions or general health conditions, including access to treatments and medication, can be made.

4.6 Vaccination programmes

In Liechtenstein, vaccination against the COVID-19 virus started on 18 January 2021. The following vaccination schedule was established by the government in terms of prioritisation for the population:³⁰

 Group 1: residents of nursing homes including persons with disabilities living in the various residential areas of the Special Education Centre in Liechtenstein (Heilpädagogisches Zentrum Liechtenstein, HPZ);³¹

²⁷ Swiss Federal Office of Public Health. Link: Coronavirus (admin.ch).

²⁸ Liechtenstein's Government media orientation as of 3 November 2020. Link: <u>Aktuelle Informationen zum Coronavirus - Medienorientierung der Regierung vom 3. November 2020 (vimeopro.com).</u>

²⁹ Liechtenstein's government communications campaign regarding COVID-19 measures. Link: <u>bus-plakat-a4-okt22-v3-b-26112020.pdf</u> (IIv.li).

Liechtenstein Governmental vaccination schedule forthe COVID-19 pandemic 2021, link: <u>Amt für Gesundheit (AG) - Informationen zur Impfung (Ilv.li)</u>.

³¹ HPZ, Special Education Center Liechtenstein. Link: Heilpädagogisches Zentrum - Wohnen (hpz.li).

- 2. Group 2: staff of nursing homes, family assistance, national hospital;
- 3. Group 3: exposed persons in primary care;
- 4. Group 4: age groups 85+, 80+, 75+, 70+;
- 5. Group 5: risk groups under 70;
- 6. Group 6: population under 70.

Regarding point 4 "age groups", the Liechtenstein Vaccination Strategy states that the government reserves the right to adjust this prioritisation of groups of persons and this can be done dynamically on the basis of the respective vaccine deliveries and the current registrations of persons willing to be vaccinated.

Besides the inclusion of people living in a residential home (e. G. HPZ, see detail above regarding group 1), there has been no additional priorisation accorded to persons with disabilities in the vaccine roll out programmes in Liechtenstein

The decisive factor for the progress of vaccinations in Liechtenstein is the availability of vaccine doses. In the first quarter of 2021, the focus will be on the risk groups (point 1 to 5 in the above priorisation list) and in the second quarter, i.e., approximately from April 2021, on the general population, because only then will sufficient vaccine probably be available. For this reason, the government has also not yet allowed registration for vaccination for the general population at this time. It is not known at this time when the population under the age of 70 will be able to register for vaccination.

Within the framework of this vaccination campaign, the following persons are eligible for vaccination, according to the government's announcement:

- the resident population of Liechtenstein;
- the cross-border commuters employed in the health sector;
- the diplomatic corps of Liechtenstein.

With regard to education about the COVID-19 vaccination and the communication of important information, the Government of Liechtenstein, bound to Switzerland by the Customs Union Treaty of 1923, refers to the Swiss Epidemics Act (EpG)³² and to the information provided by the Swiss Federal Office of Public Health concerning the vaccination.³³

With the beginning of the COVID-19 vaccination the Office for the Equality of Persons with Disabilities has launched information on its website, giving relevant facts in an easy-to-read language and access to promotional or advisory materials about the vaccination.³⁴

Currently, enrolment for eligible populations occurs in 3 steps. First, eligible individuals for COVID-19 vaccination (group 1) receive a personal written invitation from the government. To schedule an appointment, invited individuals must register by calling a telephone hotline in their community of residence. Only after telephone confirmation

³² Swiss Federal Act of September 28, 2012 on the Control of Communicable Human Diseases (Epidemics Act, EpG), in Switzerland: SR 818.101.

³³ Swiss Federal Office of Public Health, COVID-19 vaccination information, link: <u>Wieso impfen? - So schützen wir uns (bag-coronavirus.ch)</u>.

The Office for the Equality of Persons with Disabilities, access to information concerning the COVID-19 vaccination, link: LBV – Sonderseite: Corona.

of the appointment will the vaccination take place at a central vaccination centre. Due to the small size of Liechtenstein, there is currently only one central vaccination centre. Transport to and from the vaccination centre must be organised independently. However, the Seniors' Association, for example, has already promised its members transportation upon request. The Liechtenstein Seniors' Association with its organization "Seniors for Seniors" offers a free transport service to the COVID-19 vaccination centre and back. This is intended for members of the Seniors' Association who have no way of getting to the vaccination centre in their own car or by public transport. Likewise, the Liechtenstein Disability Association (*Liechtensteiner Behindertenverband*, LBV) provides transport for members in the form of appropriate vehicles and drivers. ³⁶

Currently there are no specific plans or information available that vaccines are being delivered in institutional care settings or people's own homes if they are unable to travel to vaccine centres. But it can be assumed, that in such cases, where the person eligible for a vaccination and willing to get it but unable to go to the vaccination centre, individual solutions will be found in cooperation with the authority in charge.

However, in Liechtenstein the entire cost of vaccination is covered by the state.

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³⁵ Liechtenstein Seniors' Association, "Seniors for Seniors" offers free transport service, link: <u>Impffahrdienst für Mitglieder :: Seniorenbund Liechtenstein.</u>

³⁶ Liechtenstein Disability Association, Transportation Services, link: LBV - Fahrdienst.

5 Income and access to food and essential items

Article 28 – Adequate standard of living and social protection

5.1 Emergency measures

In order to provide financial assistance to employees affected by the consequences of the COVID-19 pandemic in their job engagement, the entitlement to Corona-related short-time working compensation was introduced. Short-time work involves a temporary reduction in working hours when there is a significant loss of work due to the COVID-19 crisis. The pandemic-related short-time working compensation is valid until the end of June 2021.

All employees who are required to pay unemployment insurance contributions and those who have not yet reached the minimum age for compulsory AHV contributions and whose working hours have been reduced or completely discontinued due to the COVID-19 crisis are eligible for short-time work compensation (see also Article 39 paragraph 1 Unemployment Act).³⁷

Persons who are not entitled to short-time work compensation pursuant to Article 39 (3) Unemployment Act and who are employed in a company are eligible for "support for directly affected sole proprietors and shareholders (UEK)" or "support for comanaging directors and directly assisting spouses (UEB)" during the COVID-19 crisis. This means that further financial support is available for individual entrepreneurs and partners in the form of the UEK allowance. The aim of the UEK is to support self-employed entrepreneurs, regardless of their legal form, during the COVID-19 crisis. The UEB was set up to support entitled persons in the same company who are not entitled for UEK, mainly additional managing directors or the spouse working in the company. The benefit (UEK) can only be claimed once per company. Likewise, an operating subsidy in the form of a flat-rate operating cost share allowance can be applied. This is measured according to the number of employees on the cut-off date (18 December 2020) and is calculated on the basis of the full-time equivalent (FTE).³⁸

Within these three financial allowance/support regulations, the Liechtenstein Government did not set out specific measures relating to people with disabilities.

5.2 Impact of the COVID-19 crisis

To the best knowledge of the author there is no official data or any statistic available providing evidence about the impact of the COVID-19 crisis on income and poverty and access to food for people with disabilities.

³⁸ Liechtenstein Office of Economics. Link: <u>Massnahmen der Liechtensteiner Regierung zur</u> Unterstützung der Wirtschaft während Corona19 - Amt für Volkswirschaft / Corona (avw.li).

Unemployment Act (Gesetz vom 24. November 2010 über die Arbeitslosenversicherung und die Insolvenzentschädigung (Arbeitslosenversicherungsgesetz; ALVG), 30.12.2010, LGBI. 2010 No. 452. Link: 2010452000 (gesetze.li).

6 Access to transportation and the public spaces

Article 9 – Accessibility

6.1 Emergency measures

The online brochure Barrier-free through Liechtenstein serves as a practical guide through everyday life for people with disabilities.³⁹ As a means of public transport, there is a bus system in Liechtenstein. All public buses are handicapped accessible, and the chauffeurs will assist with boarding and alighting upon request. There are no other means of public transport in Liechtenstein, i.e., no subway, no streetcars or trains.

The Austrian railroad operates a connecting line between Austria and Switzerland, which passes through part of Liechtenstein. Two stations in Liechtenstein are connected to this train line. Barrier-free use of the train line depends on the design of the Austrian trains. Liechtenstein itself does not maintain a train line.

For people who have a mobile limitation and no access to public transport or who cannot use public transport, the Liechtenstein Association for People with Disabilities provides a transport service.⁴⁰

6.2 Impact of the COVID-19 crisis

As of 6 July 2020, masks are mandatory for persons 12 years of age and older on public transportation. There were no regulatory restrictions on public transport and separate requirements for people with disabilities related to COVID-19.

To the best knowledge of the author there has been no impact of the COVID-19 crisis on access to transportation and the public realm for people with disabilities in Liechtenstein so far. None of the relevant institutions providing service to persons with disabilities or acting as a representative of interests for them reported any problems or disproportionate impacts in connection with access to transportation.

³⁹ Office for Social Services, online brochure Barrier-free through Liechtenstein. Link: <u>Herzlich</u> willkommen bei «Barrierefrei durch Liechtenstein» (barrierefreies.li).

⁴⁰ Liechtenstein Association for People with Disabilities, transport service. Link: LBV – Fahrdienst.

7 Involuntary detention or treatment

Article 14 – Liberty and security of person

Article 15 - Freedom of torture or cruel, inhuman or degrading treatment or

punishment

Article 16 – Freedom from exploitation, violence and abuse

Article 17 – Protecting the integrity of the person

7.1 Emergency measures

There is no information that procedural requirements and safeguards in place prior to placing people with disabilities in involuntary treatment have been modified or reduced, respectively, as a result of the COVID-19 pandemic.

The government's COVID-19 measures did not specify any requirements in this regard. Further, no official action was taken by the government to change existing laws and policies that restrict access to family or friends for people living in institutional care.

7.2 Impact of the COVID-19 crisis

There is no public evidence available in regard to any increase or decrease in institutional living or in rates of compulsory detention, treatment or restraints or restrictions in access to family or friends for people living in institutional care.

The measures based on the statutory ordinance on measures to control the coronavirus (COVID-19 Ordinance) are generally applicable and have no specific exemptions for a particular population group, e. g. people with disabilities.

8 Violence, exploitation or abuse

Article 16 – Freedom from violence, exploitation and abuse

8.1 Emergency measures

To the best knowledge of the author there is no emergency law, policy or measure on violence, exploitation or abuse that has an explicit disability or older age dimension in Liechtenstein.

8.2 Impact of the COVID-19 crisis

To the best knowledge of the author there is no evidence publicly available about domestic or institutional violence and the disability hate crime experienced by people with disabilities since the beginning of the COVID-19 pandemic in Liechtenstein.

9 Independent living

Article 19 – Living independently and being included in the community

9.1 Emergency measures

The rights of people with disabilities did not change by any kind of emergency legal amendment during the COVID-19 crisis.

The legal provisions concerning placement or retention of persons against their will in institutions or psychiatric clinics is currently regulated in Articles 11 to 13 of the Social Assistance Act (*Sozialhilfegesetzes*, SHG). According to these, persons who are mentally ill or 'mentally deficient', suffer from addictive disorders or are severely neglected may be placed or retained in a suitable institution against their will if the necessary assistance cannot be provided to them in any other way. These legal provisions had been in part incomplete and outdated. Therefore, the Liechtenstein Government adopted the law in November 2020, the adoption and approval of the law by the state parliament is currently pending.⁴¹ Since the existing law on placement and restraint was essentially adopted from Switzerland and placement - in the absence of a suitable domestic institution or clinic - is in practice carried out across borders, mainly in Switzerland, the provisions from Switzerland are used as a basis for the revision of the law. Unlike in Switzerland, placement in the Liechtenstein law is only possible in the case of danger to oneself or of exclusive danger to others.

There had also been a need for regulation in the case of a stay in residential or care facilities, as restrictions on freedom of movement during a corresponding stay are currently not regulated by law. For this reason, corresponding provisions were inserted into the law.

However, these new legislative proposals are not in context with the COVID-19 measures or COVID-19 Ordinance.

Liechtenstein faced two lockdowns during which all restaurants and bars were closed (the second lockdown is still ongoing: from 20 December 2020 until the end of February 2021). Take-away and delivery service are still possible. Since 6 July 2020, masks have been compulsory for people aged 12 and older on public transportation. Masks are available in pharmacies and supermarkets during normal opening hours. In addition to the hygiene and safety regulations applicable to all persons residing in Liechtenstein, the government has not enacted any separate measures for residential homes.

Within the Liechtenstein old-age and health assistance institution (*Liechtensteinische Alters- und Krankenhilfe, LAK*),⁴² which offers living space in 6 facilities with care and assistance for people who are no longer able to live independently due to their age and/or disabilities, the protection concepts apply on the basis of the order of the Office of Public Health (as of 28 May 2020). This prescribes in particular, but not conclusively, the following:

⁴² LAK, Liechtenstein old-age and health assistance institution. Link: <u>Schutzkonzept COVID-19</u>

Amendment to the Social Assistance Act (*Sozialhilfegesetzes*, SHG) Link: https://www.llv.li/files/srk/bua_129_2020_abanderung-shg-und-weiterer-gesetze.pdf.

- visitors (relatives and caregivers) must stay in the resident's room;
- a face mask must be worn for the entire duration of the visit and the hygiene and distance rules must be observed;
- visits to common areas (cafeteria, home chapels, etc.) are prohibited;
- visits to the isolation ward are not permitted.

With regard to temporarily leaving the nursing and residential homes of the LAK, special regulations have applied since the beginning of the COVID-19 pandemic. These state that residents may leave the nursing home premises accompanied by instructed relatives and/or caregivers or staff-members, considering hygiene measures.

The Special Education Center (*Heilpädagogisches Zentrum Liechtenstein*, HPZ)⁴³ in Liechtenstein offers residential areas with different forms of living, which are designed individually and needs-oriented. The offer includes accompanied, partially assisted and assisted living for adults. Based on the written statements of the management, the HPZ also has a comprehensive hygiene and protection concept, whereby the special needs of the residents were taken into account to a high degree. However, the COVID-19 protection concept was not made publicly available.

For care recipients and the caregivers who live with them in private households, the government has not enacted any separate measures or regulations related to the COVID-19 pandemic. The general requirements of the COVID-19 Ordinance and the recommendations on rules of conduct concerning hygiene measures in private households also apply here.⁴⁴

9.2 Impact of the COVID-19 crisis

Due to the lack of publicly available data regarding people with disabilities, no evidence can be shown about the COVID-19 related impacts on people with disabilities of access to support for independent living.

Office of Public Health. Rules of conduct and hygiene. Link: Amt für Gesundheit (AG) - Verhaltensund Hygieneregeln (IIv.li).

⁴³ HPZ, Special Education Center Liechtenstein. Link: <u>Heilpädagogisches Zentrum - Wohnen (hpz.li)</u>.

10 Access to habilitation and rehabilitation

<u>Article 26 – Habilitation and rehabilitation</u>

10.1 Emergency measures

Based on the COVID-19 Ordinance as of 25 June 2020, all therapy and medical treatment facilities have been required to develop and implement an appropriate hygiene concept based on the COVID-19 regulation for their patients and staff. The umbrella organisation of physicians in Liechtenstein, the Liechtenstein Medical Association, has drawn up an industry concept for all domestic medical practices, which must be complied with as a minimum standard.⁴⁵

The protection concept stipulates that only accompanying persons are allowed who are necessary for the patients (in the case of frail persons or cognitively impaired persons). A maximum of one accompanying person per patient is allowed. The patient protection measures apply analogously to all accompanying persons.

According to paragraph 1b of the COVID-19 Ordinance, a general obligation to wear a mask applies in schools for teaching and school staff as well as for all pupils from the age of 12. Exceptions are situations in which wearing a mask makes teaching, therapy or care significantly more difficult, such as during speech therapy. In such situations, the minimum distance must be observed, and protection must be ensured by further measures.

To the best knowledge of the author, no other emergency measures have been issued by the government for the access of people with disabilities to habilitation and rehabilitation support and services.

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

Due to the lack of publicly available data in the area of changes in access to and rehabilitation support and services during lockdowns and period of physical distancing, no evidence or analyses of causes of any change can be given or made.

Präsentation (aerztekammer.li).

⁴⁵ Liechtenstein Medical Association (Liechtensteinische Ärztekammer). Industry standard to meet the legal requirements of a hygiene concept based on the COVID-19 regulation. Link: PowerPoint-

11 Access to justice

Article 13 - Access to justice

11.1 Emergency measures

Ordinary court operations have been maintained during the Corona pandemic in Liechtenstein. The applicable recommendations of the government and the Office of Public Health regarding hygiene and social distancing will be observed. However, despite the fact that the courts are still in operation, there have been delays due to the limited use of space based on the COVID-19 protection concept of the courts. This concept includes among others and not exhaustively the following measures for the protection of the public:⁴⁶

- as far as possible, all communication with parties shall take place by telephone;
- legal advice, which is free of charge, shall be given by telephone as far as possible;
- the possibility of submitting written submissions over the counter remains unchanged;
- negotiations, hearings, etc., as well as enforcement actions will be carried out in compliance with the indicated protective measures regarding hygiene and social distancing.

There are no specific measures relating to access to justice that have an explicit disability or older age dimension.

11.2 Impact of COVID-19 crisis

Due to the lack of publicly available data regarding the impact of the COVID-19 crisis to people with disabilities, no statement or analysis can be made on the access to justice for people with disabilities during the current crisis.

⁴⁶ Princely courts in Liechtenstein. COVID-19 protection concept. Link: <u>Wichtige Corona Infos:</u> Fürstliche Gerichte.

12 Access to education

Article 24 – Education

12.1 Emergency measures

Liechtenstein has an explicit regulation in Article 18 of the Law on the Equality of Persons with Disabilities (AEPD) to oblige the state to ensure that children and young people with disabilities receive early intervention and a basic training that is customised to their specific needs to integrate them into regular schools as far as possible.⁴⁷ The State shall further ensure that children and young people with disabilities receive vocational education with respect to their special needs, abilities and interests. Nevertheless, there are no specific political targets set out for the time being.

On the basis of the current version of the COVID-19 Ordinance of 25 June 2020, classroom instruction must be carried out in Liechtenstein. For this reason, the Ministry of Home Affairs, Education and Environment has issued guidelines regarding school-specific implementation plans (protection concept) at public kindergartens, elementary schools, lower and upper secondary schools and at private schools approved by the government. The aim of these requirements is to ensure that classes are attended, to minimise the risk of transmission despite the confluence of many people, and to keep new infections at a low level. The focus is also on protecting persons at risk. School operations must take place within the framework of the developed protection concept.⁴⁸

Pursuant to Article 3b of the COVID-19 Ordinance, the following rules apply to persons in publicly accessible indoor areas of facilities and operations:

1) Every person must wear a face mask in publicly accessible indoor areas of facilities and establishments......

Paragraph 1 also applies at schools under the School Code, in classrooms of other educational institutions, and in institutions providing supplemental family childcare. Situations in which wearing a mask significantly complicates teaching, therapy or care are exempt.

Beside the above-mentioned measures, the Government of Liechtenstein has not launched specific measures during the COVID-19 pandemic regarding the education for children and adults with disabilities.

12.2 Impact of the COVID-19 crisis

There is no Liechtenstein focused study, no official data and no public statement available on how pandemic-related circumstances such as social distancing, online learning, etc. affect the well-being of children or adults in general. Thus, no evidence can be provided about the impact of the COVID-19 crisis on education for children and adults with disabilities.

Law on the Equality of Persons with Disabilities (Gesetz vom 25. Oktober 2006 über die Gleichstellung von Menschen mit Behinderungen (Behindertengleichstellungsgesetz; BGIG)), LGBI. 2006. No. 243. Link: https://www.gesetze.li/konso/pdf/2006243000?version=4.

Ministry of Home Affairs, Education and Environment. Guidelines regarding school-specific implementation plans. Link: <u>vorgaben-betr-schulspez-umsetzungsplane-schutzkonzept-v44-def.pdf</u> (llv.li).

Based on the latest available data as of 2019, 153 children of mandatory kindergartenand school-age out of 4, 321 had been recognised as pupils with disabilities who attended special schools or school classes. As no statistical data for the year 2020 is available, no analysis on the effect of the COVID-19 crisis to the attendance of pupils with disabilities in regular school classes or in special classes of the HPZ (school institution for persons with disabilities) can be made.

13 Working and employment

Article 27 – Work and employment

13.1 Emergency measures

Article 8(4) of the COVID-19 Ordinance refers to the fact that while the government refrains from imposing an obligation to work from home, it recommends working from home wherever possible. Particularly vulnerable persons are specifically protected. For them, the right to home office or equivalent workplace protection or leave of absence is introduced. For this purpose, the legal provision refers to Article 11 in conjunction with the applicable Swiss provisions. Article 27a of the COVID-19 Ordinance reads as follows:

- The employer shall enable his employees who are particularly at risk to fulfil their work obligations from home. He shall take the appropriate organizational and technical measures for this purpose. Employees shall not be entitled to any compensation for expenses incurred in fulfilling their work obligations from home on the basis of this provision.
- If it is not possible to fulfil the original work obligation from home, the employer shall, in derogation of the employment contract, instruct the employee concerned an equivalent substitute job with the same remuneration, which may be performed from home.

Persons at particular risk are pregnant women and persons who have not been vaccinated against COVID-19 and have certain diseases. Article 7b (2) of the COVID-19 Ordinance states as persons at special risk:

- a) persons 65 years of age or older; and
- b) persons who have any of the following conditions in particular:
 - hypertension;
 - o diabetes;
 - o cardiovascular disease;
 - chronic respiratory diseases;
 - o diseases and therapies that weaken the immune system;
 - cancer
- c) The categories under paragraph 2 are specified in Annex 5 on the basis of medical criteria. This list is not exhaustive. A clinical assessment of the risk in individual cases remains reserved.

As far as home-based work is concerned, the possibilities, opportunities and risks of people with disabilities working in the primary labour market are similar to those of non-disabled people. I.e., the regular "first" labour market in Liechtenstein gets by without subsidies, government grants and other guidance by politics. Searching companies and employees find each other in the free economy. This means that the government's recommendation for home-based work wherever possible and feasible applies to all employers and employees, without any special or supplementary recommendations for people with disabilities.

There are no statements on possible problems that may arise from the need for a regular daily routine, a daily structure or even the loss of social contacts, and which may be more significant in the case of homework for people with disabilities.

The second labour market exists for people who have little or no chance of finding employment on the open labour market. It is regulated and subsidised by government measures. The subsidies include specially maintained workplaces, so-called protected workplaces, and subsidies for wages and assumption of costs for infrastructure suitable for the disabled to those companies that hire people with disabilities. For people with disabilities who work in the second labour market, home-based work is not an option. On the one hand, because it would be too time-consuming to adopt or even not possible to set up the required infrastructure to carry out the jobs at home and on the other hand because a targeted, constant assistance is necessary and could not be given at home.

However, since the government has not made home-based work compulsory, especially in the second labour market, the corresponding sheltered workplaces have had to develop their own protection concepts in order to be able to maintain employment. This was the responsibility of the respective employers; on the part of the government, no guideline was defined, or other orientation measures were set in this regard.

13.2 Impact of the COVID-19 crisis

Due to the lack of publicly available data regarding the impact of the COVID-19 crisis to people with disabilities, no evidence can be given on the effects on work and employment for people with disabilities during the current crisis.

Due to the changed working conditions, residential homes for people with disabilities have experienced a greatly changed situation. Wherever people with disabilities can no longer pursue their previous employment to the same extent, residential homes have had to find new solutions, since space has become more cramped due to more residents present and the official requirements for the minimum distance between two people. This has also led to a higher potential for conflicts among persons living in residential homes for people with disabilities.⁴⁹ Here, too, the task of finding a solution lays with the residential homes. On the part of the government, no corresponding guidelines were given.

Since the handling of these situations from the COVID-19 pandemic was therefore individual to each residence or sheltered workplace, there is no official data or information available.

Gleichstellung.php.

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Information provided by the Office for the Equality of Persons with Disabilities (Liechtensteiner Behinderten-Verband – Büro für Gleichstellung), bilateral exchange on the situation of people with disabilities during the COVID-19 pandemic as of 12.1.2021, homepage: http://www.lbv.li/Buero-

14 Good practices and recommendations

14.1 Examples of good practice

It is certainly positive to mention the fact that the press conferences of the government concerning the pandemic situation and the COVID-19 measures to fight the pandemic are also translated into sign language. That press conferences with short notice sometimes results in no sign language interpreter being available is regrettable, but the basic tendency of the appropriate consideration of deaf people is an improvement.

In the area of information, there is also the issue of "plain language" for people with disabilities to provide them with barrier-free access to government information. For this purpose, within the framework of the COVID-19 measures publications, the government has commissioned the Office for Plain Language of the Liechtenstein Disability Association to write two newspaper advertisements accordingly. These were published in the Liechtenstein daily newspapers in December 2020 (for details please see Annex A).

14.2 Recommendations

On the part of the Liechtenstein Disability Association, it has been made clear that it is imperative that government as well as state administration communication has to be tailored to the needs of people with disabilities. In particular, the importance and urgency during the still ongoing COVID-19 pandemic has shown that (simultaneous) translation of government press conferences and accompanying plain-language measures are essential. This awareness should be sustained. Further steps should be taken in this regard in the future, so that the communication of the government as well as the state administration becomes easier to read and understandable. To this end, the Office for Plain Language of the Liechtenstein Disability Association will push forward in the second guarter of 2021.

No other recommendations for disability-related reforms have been made to the knowledge of the author.

14.3 Other relevant evidence

There is no further relevant evidence known to the author.

Annex A

Plain-Language article in the daily newspaper "Vaterland" in Liechtenstein as of 22 December 2020.



Bis zum 10. Januar bleiben diese Betriebe geschlossen:

- Kultur-Betriebe



Pflicht erweitert. Im öffentlichen Raum müssen jetzt Schutz-Masken getragen werden. Auch in Vereinen und Organisationen sollen Schutz-Masken getragen werden. Grund dieser Massnahme: persönliche Begegnungen sicherer machen und die Fall-Zahlen verringern.

die Fall-Zahlen verringern.

Es gibt viele Menschen in Liechtenstein, die sich mit dem CoronaVirus inflziert haben. Inflzieren bedeutet das Wrus bekommen,
Manche Menschen haben starte
Symptome. Sie müssen ins Krankenhaus. Manchmal auch auf die
Intensiv-Station. Die Spitaler on 12 sozialkontakte.

Bei privaten Treffen sind
höchstens 10 Personen erlaubt.
Halten Sie sich and let HygieneMassnahmen. Waschen oder
der Intensiv-Station. Dass
macht Angst. Denn es besteht das
Kisko, dass über die Feiertage
miehr Leute krank werden. Darum
hat die Regierung mehr Massnahmen. Waschen oder
regelmässig.

Vernatet und ver
privaten Treffen sind
höchstens 10 Personen erlaubt.
Halten Sie sich and let HygieneMassnahmen. Waschen oder
regelmässig.
Vernichten sie auf bei
verlichten sie auch im privaten
Halten Sie auch im privaten
Halten Sie auch im privaten

Veranstaltungen

Es ist verboten Veranstaltungen

- Ausnahmen des
 Verbots sind:
 Sitzungen vom Landtag
 Sitzungen vom Gemeinderat
 Sitzungen von GemeindeKommissionen
- Sitzungen von Gemeinde-Ausschüssen
- Ausschüssen
 Veranstaltungen zur politischen
 Meinungsbildung bis
 50 Personen
 Religiöse Veranstaltungen
 Bestattungen
 Private Veranstaltungen bis

- 10 Personen
- 10 Personen Sport-Veranstaltungen ohne Publikum Kultur-Veranstaltungen ohne Publikum Dazu gehören zum Beispiel Konzerte, die über Fernseher oder Radio gezeigt werden.

- Bereich 1.5 Meter Abstand.

 Kann der Abstand nicht ein gehalten werden? Dann tragen
- Sie eine Schutz-Maske. Lüften Sie die Räume in denen Sie sich befinden oft.

Fühlen Sie sich krank? Haben Sie Corona-Sympt Die Symptome sind:

- Fieber
 Husten
 Kurzatmigkeit, wenn man also oft und schnell atmen muss
 Andere Atmen-Beschwerden
- Dann bleiben Sie Zuhause, Rufen Sie die Testhotline an. Bei der Testhotline werden Sie beraten.

Kultur-, Unterhaltungs-, Freizeit-, und Sportbetriebe bleiben geschlossen

Öffentlich zugängliche Betriebe bleiben geschlossen.
Zu den Kultur-, Unterhaltungsund Freizeitbetrieben gehören zum

- Kinos Museen Ausstellungshallen Galerien Lesesäle von Bibliotheken
- Casinos

Bei den Sportbetrieben ist Sport in Innenräumen nicht

gestattet. Das betrifft zum Beispiel:

- Diese Betriebe bleiben geöffnet:

 Schwimmbäder die zu Hotels
- gehören
 Der Spitzensport ist weiterhin
- spirzensport ist weren erlaubt Sport im Freien ist erlaubt. Dafür braucht es aber ein Schutz-Konzept. Das gilt zum Beispiel für: die Skilifte in Malbun.



- Restaurants

- Diese Betriebe bleiben geöffnet:
- Take-Away-Betriebe
 Schulmensen
 Betriebskantinen
 Lieferdienste
 Restaurantbetriebe für

06.00 und 23.00 Uhr geöffnet sein.

Schulferien werden bis zum 10. Januar verlängert

cs ist weiternin wichtig: Die Schutzkonzepte in den Schulen einzuhalten. Die Schule muss bis 23. Dezember 2020 besucht wer-den. Die Schulferien werden bis zum 10. Januar 2021 verlängert. Der Schulbertieb startet am 11. Januar 2021.

Einkaufsläden und Dienstleister können offen bleiben

Diese Dienstleistungs-Betriebe dürfen auch geöffnet bleiben.

- Dazu gehören:
 Coiffeure
 Massage-Studio
 Tattoo-Studio
 Kosmetik-Studio

- Es muss weiterhin das Schutz-Konzept eingehalten werden.
- Masken-Pflicht im öffentlichen Raum

Kann der Mindestabstand draussen bände, C nicht eingehalten werden? Dann müssen alle Personen eine Schutz- gebeten. Maske tragen.

Unterstützung für die

In den letzten Wochen wurde festgelegt:
Welche finanzielle Unterstützung
Welche finanziella Unterstützung
Welche finanziella Unterstützung
Unterstützung wurde für das 4,
Quartal 2020 und das 1. Quartal
2021 festgelegt. Auch Einzel- und
kleinstbetriebe bekommen wieder
Unterstützung bezieht sich auch auf
die Umsatz-Einbrüche. Die Unterstützung bezieht sich auch auf
die Warzarbeits-Einbrüche. Die Unterstützung bezieht sich nicht auf die
Kurzarbeits-Eintschädigung.
Die Task Force Wirtschaft überlegt
sich derzeit: Wie können wir Betriebe unterstützen? Eine Task
Force ist eine Expertern-Gruppe.
Die Entscheidung der Task Force Die Entscheidung der Task Force wird in den nächsten Tagen ver-kündet.

Unterstützung durch Verbände, Organisatio-nen und Institutionen

Die Fall-Zahlen sollen sinken.
Darum ist es wichtig:
Alle müssen mithelen.
Die Regierung sprach mit Verbänden, Organisationen und Institutionen. Alle waren sich einig:
Wir müssen zusammenhalten um die Fall-Zahlen zu senke.
Die zuständigen Personen die Verbände, Organisationen und Institutionen wurden um Stellungnahmen gebeten.



Plain-Language article in the daily newspaper "Volksblatt" in Liechtenstein as of 24 December 2020.



Medienmitteilung in Leichter Sprache

Die Reglerung von Liechtenstein hat eine Medienmitteilung geschrieben. Thema der Medienmitteilung sind die neuen Massnahmen wegen des Corona-Virus. Damit die Medienmitteilung von vielen Menschen verstanden wird, wurde sie in Leichte Sprache übersetzt.

Winterrube

Leider gibt es wieder mehr Corona-Fälle. Darum gelten über die Feiertage stärke re Massnahmen. Die Regierung nennt diese Zelt auch: Winterruhe. Die Massnah-men gehen vom 20. Dezember 2020 bis 10. Januar 2021.

Bis zum 10. Januar bleiben diese Betriebe geschlo

- Kultur-Betriebe
 Kultur-Betriebe
 Utterhaltungs-Betriebe
 Freizelt-Betriebe
 Sport-Betriebe
 Gastronomie-Betriebe

Zusätzlich wird die Masken-Pflicht erweitert

Im öffentlichen Raum müssen jetzt Schutz-Masken getragen werden. Auch in Vereinen und Organisationen sollen Schutz-Masken getragen werden. Grund dieser Massnahme: + persönliche Begegnungen sicherer machen + Fall-Zahlen verringern.





Es gibt viele Menschen in Liechtenstein, die sich mit dem Corona-Virus influsiert haben, Infl-zieren bedeutet das Virus bekommen. Manche Menschen haben starke Symptome. Se missen ins Krankenhaus. Manchmal auch auf die Inints Krainsenhauss. Stanchman auch auf die Hi-tensis Station. Die Sphiller sind stark ausgelas-tet. Das heisst, es hat nicht mehr so viele frese Betten auf der Intensiv-Station. Das macht Angst. Denn es besteht das Risiko, dass über die Feiertage mehr Leute krank werden. Darum hat die Regierung mehr Massnahmen ge



Veranstaltungen verboten

Es ist verboten Veranstaltungen durchzuführen.

- nahmen des Verbots sind-
- Sitzungen vom Landtag
 Sitzungen vom Gemeinderat
 Sitzungen von Gemeinde-Kom
- · Sitzungen von Gemeinde-Ausschüssen
- Veranstaltungen zur politischen Meinungsbildung bis 50 Personer
 Religiöse Veranstaltungen
 Bestattungen

- Bestattungen
 Private Veranstaltungen bis 10 Personen
 Sport-Veranstaltungen ohne Publikum
 Kultur-Veranstaltungen ohne Publikum
 Dazu gehören zum Beispiel Konzerte,
 die über Fernseher oder Radio gezeigt werden.



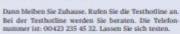
Veranstaltungen im privaten Bereich

Die Regierung bittet die Bevölkerung

- Vermeiden Sie nicht notwendige Sozialkontakte.
 Bei privaten Treffen sind höchstens to Personen erlaubt.
- Bet privaten Treiten sind nochstens to Personen erfantst.
 Halten Sie sich an die Hygiene Massonahmen.
 Waschen oder desinflaieren Sie ihre Hände regelmässig.
 Verzichten Sie auf das Händeschütteln.
 Hälten Sie auch im privaten Bereich 1,5 Meter Abstand.
 Kann der Abstand nicht eingehalten werden?
 Dunn tragen Sie eine Schuzz-Maske.
 Lüften Sie die Räume in denen Sie sich befinden oft.

Fühlen Sie sich krank?

- Haben Sie Corona-Symptome? Die Symptome sind:
- · Kurzatmigkeit, wenn man also oft
- und schnell atmen muss
- · Andere Atmen-Beschwerden





Unterstützung durch Verbände, Organisationen und Institutionen

Die Fall-Zahlen sollen sinken. Darum ist es wichtig: Alle müssen mithelfen! Die Regierung sprach mit Verbänden, Organisationen und Institutionen. Alle waren sich einig: Wir müssen zusammenhalten um die Fall-Zahlen zu sen-ken. Die zuständigen Personen die Verbände, Organisationen und Institutionen wurden um Stellungnahmen gebeten.

Kultur-, Unterhaltungs-, Freizeit-, und Sportbetriebe bleiben geschlossen

Öffentlich zugängliche Betriebe bleiben geschlossen. Zu den Kultur-, Unterhal-tungs- und Preizellbetrieben gehören zum Beispiel:

• Kinos

• Museen

• Ausstellungshallen

- · Galerien
- · Lesesäle von Bibliotheken · Casinos
- Konzertsäle
 Theater



- Schwimmbäder die zu Hotels gehören
 Der Spitzensport ist weiterhin erlaubt
- · Sport im Freien ist erlaubt.

Dafür braucht es aber ein Schutz-Konzen-Das gilt zum Beispiel für: die Skilifte in Malbun



Gastronomie geschlossen

Diese Betriebe müssen wieder schliessen:

- Club
 Diskotheken
- · Tanzlokale

iese Betriebe bleibe Take-Away-Betriebe ns geöffnet:

- · Betriebskantinen
- · Lieferdienste
- · Restaurantbetriebe für Hotelgäste

Diese Betriebe dürfen zwischen 6 und 23 Uhr



Schulferien werden bis zum 10. Januar verlängert

- Es ist weiterhin wichtig:

 Die Schutskonzepte in den Schulen einzuhalten.

 Die Schule muss bis 23. Dezember 2020 besucht werden.

 Die Schulferien werden bis zum 10. Januar 2021 verlängert.

 Der Schulbetrieb startet am 11. Januar 2021.

Einkaufsläden und Dienstleister können offenbleiben

Alle Einkaufsläden und Dienstleister dürfen geöffnet bleiben. Auch Kladerbe-treuungs-Einrichtungen bleiben geöffnet. Diese Dienstleistungs-Betriebe dürfen auch geöffnet bleiben.

- Coffeure Massage-Studio Tattoo-Studio
- Tattoo-Stunso
 Kosmetik-Studio



Es muss weiterhin das Schutz-Konzept eingehalten werden

Masken-Pflicht im öffentlichen Raum

Kann der Mindestabstand draussen nicht eingehalten werden∋ Dann müssen alle Personen eine Schutz-Maske tragen.

In den letzten Wochen wurde festgelegt: Welche finanzielle Unserstützung bekommt man im Härtefall? Diese Unterstützung bezortet wurde für das 4. Quartal 2020 und das 1. Quartal 2021 festgelegt. Auch Einzel und Kleinstbetriebe bekommen wieder Unterstützung. Die Höhe der Unterstützung. stützung bezieht sich auch auf die Umsatz-Einbrüche. Die Unterstützung bezieht sich nicht auf die Kurzarbeits-Entschädigung.

Die Task Force Wirtschaft überlegt sich derzeit:

Wie können wir Betriebe unterstützen? Eine Task Force ist eine Experten-Gruppe. Die Entscheidung der Task Force wird in den nächsten Tagen verkündet.

Annex B

In 2015, an analysis about child disability measurements in more than 185 United Nations Member States was published by the UNICEF. In relation to Liechtenstein, the authors identified the following: "Practically all countries in the world have collected some information on disability. Specifically, data sources on disability were identified for 185 United Nations Member States. Therefore, the review was unable to trace data for only eight UN Member States. Of these, two are located in Sub-Saharan Africa (Equatorial Guinea and Somalia) and six are countries with a child population below 125,000 (Andorra, Brunei Darussalam, Liechtenstein, Monaco, San Marino and Tuvalu)." ⁵⁰

Unfortunately, the situation has not changed since then, and Liechtenstein still has no specific data source regarding information on persons with disabilities. In 2017, the Liechtenstein Disability Association (*Liechtensteiner Behinderten-Verband*, LBV) commissioned a study regarding the situation of disabled persons in Liechtenstein. The study concluded that there are only few analyses and statistical data regarding disabled persons in Liechtenstein to make any validated statement on the situation.⁵¹

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Navigating the landscape of child disability measurement: A review of available data collection instruments, by Claudia Cappa, Nicole Petrowski, Janet Njelesani, Data and Analytics Section, Division of Data, Research and Policy, United Nations Children's Fund (UNICEF), 3 UN Plaza, 10017 New York, USA, 2015.

W. Marxer. Liechtenstein Institut. On behalf of Liechtensteiner Behindertenverband. Rechte von Menschen mit Behinderungen in Liechtenstein, 2017. Link: http://www.lbv.li/00- Downloads/Studie_UNCRPD-Behinderung_Marxer_final.pdf.

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