



COVID-19 and people with disabilities

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

Latvia

November 2021

EUROPEAN COMMISSION

Directorate-General for Employment, Social Affairs and Inclusion

Directorate D — Social Rights and Inclusion

Unit D3 — Disability and Inclusion

European Commission

B-1049 Brussels

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This report has been developed under Contract VC/2020/0273 with the European Commission.

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Manuscript completed in March 2021

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1 Executive summary

Disability inclusivity of disaster and recovery planning

In general situations, the necessary Regulations for the management of emergencies are set by *Law on Emergency Situation and State of Exception* (2013) and *Civil Protection and Disaster Management Law* (2016), where people with disabilities are not referenced.

COVID-19 specific disaster management is regulated by several legal acts of which the most important are as follows - *Law on the Management of the Spread of COVID-19 Infection* (2020), *Law on the Suppression of Consequences of the Spread of COVID-19 Infection* (2020), *Cabinet Order No.655 'Regarding Declaration of Emergency Situation'* (2020) and *Cabinet Regulation No. 360 'Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection'* (2020). These legal acts do not include specific measures for persons with disabilities, except for the right to receive assistant services also during an emergency period. During the emergency, the planned support measures, restrictions, epidemiological requirements for persons with disabilities apply in the same way as any other person. Non-governmental organisations of persons with disabilities were not involved in the drafting of the designated legal acts. They have made separate proposals in the process of drafting the Plan for the Recovery and Resilience Facility of Latvia (2021).

Impact of the virus on mortality among people with disabilities

The disability criterion has not been determined by listing death cases with COVID-19 or the associated co-morbidities. The total number of persons who died from COVID-19 during 29 January 2020, to 29 January 2021, was 1 166 persons.¹ About 14 % of these persons or 146 persons were clients of long-term social-care centres.²

The first emergency of the COVID-19 pandemic in spring 2020 Latvia was overcome relatively well, but when the second emergency in autumn 2020 started, the general public took the threat less seriously. It affected most the health and life of people with disabilities and seniors in long-term social care centres. The number of clients who become infected, fallen ill and died increased sharply. Because of the limited mobility of centre clients outside the centre areas due to functional disorders, potential infection carriers could be staff or visitors to the centres. Despite a series of guidelines developed by the responsible authorities (Centre for Disease Prevention and Control, Ministry of Health and Ministry of Welfare), the necessary measures in the long-term social care centres were introduced late (in more detail in sections 3.1 and 14.2).

Some cases may be identified where the support measures laid down in the first emergency did not correspond to the needs of persons with disabilities or seniors, but the measures are being modified or new ones defined in the second emergency period. For example, if the first emergency (March 2020) did not take into account the specific needs of students undertaking special education programmes and defining remote

¹ Centre for Disease Prevention and Control. The spread of COVID-19 infection in Latvia during 29.01.2020.-29.01.2021. Available at: <https://spkc.maps.arcgis.com/apps/opsdashboard/index.html#/4469c1fb01ed43cea6f20743ee7d5939>.

² Kļava B., 'Virus takes over care homes', Journal IR, No.3, 2021.

learning, then during the second emergency (November 2020) there was provided a possibility to study on-site (section 12). A similar example may also be given to the costs of idle time benefits for persons who received a disability or an old-age pension (section 13.1).

Examples of good practice

For persons with a disability, there was the availability of assistant services during an emergency period without reducing the average monthly service duration (in hours). For example, for time that was previously designated to go to and from work, disabled people can use for leisure, such as walks in the fresh air. Access to assistants' services was also provided to students who were granted an assistant service in an educational institution if the training process in general education institutions is organised partially or wholly remotely.

Provision of states' financial support for families raising a child with disability. The volunteer's movement 'Stay Home' delivered the food and essential goods for persons at home who cannot or are advised not to visit public places such as a shop.

Recommendations and opportunities for change

The emergencies of 2020 have highlighted the need to:

1. Educate professionals in all sectors in immediate response to crises in the event of epidemiological threats, including staff involved in the provision of social care services and volunteers, to provide long-term and high-quality social care services in the person's place of residence or long-term social care centres. Use financial resources for recovery planning to develop small (in numbers) social care centres closer to a family environment. Provide local governments with the necessary material-technical base (including, movement and communication means for social care workers, teachers).
2. Carry out studies on the effects of COVID-19 directly on people with disabilities to obtain evidence (not emotion) based proposals for potential emergencies in the future. The public, including the NGO of persons with disabilities, should be involved in a timely way in developing of crisis and emergency measures, restrictions and other conditions.
3. Provide the necessary technical aids to provide services and support in the digitalised environment, improve existing skills and ensure the acquisition of new skills to use ICT solutions (training, programming) for people with disabilities, seniors, and specialists.

2 Disability-inclusive disaster and recovery planning

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

2.1 Commitments to disability in disaster management and recovery strategies

In general situations, the necessary regulations for the management of emergency situations are set by the *Law on Emergency Situation and State of Exception*³ and *Civil Protection and Disaster Management Law*.⁴ People with disabilities are not referenced.

COVID-specific disaster management is regulated by several legal acts of which the most important are the following - *Law on the Management of the Spread of COVID-19 Infection*,⁵ *Law on the Suppression of Consequences of the Spread of COVID-19 Infection*,⁶ Cabinet of Ministers (further – Cabinet) Order No. 655 ‘*Regarding Declaration of Emergency Situation*’⁷ and Cabinet Regulation No. 360 ‘*Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection*’.⁸ The *Law on the Management of the Spread of COVID-19 Infection* lays down the basic principles for the operation of public authorities, the rights and obligations of public authorities and private individuals for the prevention and management of the threat to the State during the spread of COVID-19 infection.⁹

In this Law persons with disability are set out by defining the rights of the Cabinet to issue Regulations (inter alia) regarding:

- restrictions on the provision of health care services (maintaining the health care services which are life-saving and which require continuity of treatment);
- the procedures by which the service of an assistant shall be financed to educatees with a disability¹⁰ within the remote learning process;

³ Law on Emergency Situation and State of Exception (likums “Par ārkārtējo situāciju un izņēmuma stāvokli”), 2013. Rīga: Saeima. Available at <https://likumi.lv/ta/en/en/id/255713-on-emergency-situation-and-state-of-exception>.

⁴ Civil Protection and Disaster Management Law (Civilās aizsardzības un katastrofas pārvaldīšanas likums), 2016. Rīga: Saeima. Available at: <https://likumi.lv/ta/en/en/id/282333-civil-protection-and-disaster-management-law>.

⁵ Law on the Management of the Spread of COVID-19 Infection (COVID-19 infekcijas izplatības pārvaldības likums), 2020. Rīga: Saeima. Available at: <https://likumi.lv/ta/en/en/id/315278-law-on-the-management-of-the-spread-of-COVID-19-infection>.

⁶ Law on the Suppression of Consequences of the Spread of COVID-19 Infection (Covid-19 infekcijas izplatības seku pārvarēšanas likums), 2020. Rīga: Saeima. Available at: <https://likumi.lv/ta/en/en/id/315287-law-on-the-suppression-of-consequences-of-the-spread-of-COVID-19-infection>.

⁷ Cabinet Order No. 655 ‘Regarding Declaration of Emergency Situation’ (rikojums Nr.655 “Par ārkārtas situācijas izsludināšanu”), November 2020. Rīga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/id/318517>.

⁸ Regulation No. 360 ‘Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection’ (Ministru kabineta noteikumi Nr. 360 “Epidemioloģiskās drošības pasākumi Covid-19 infekcijas izplatības ierobežošanai”), 2020. Rīga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/en/en/id/315304-epidemiological-safety-measures-for-the-containment-of-the-spread-of-COVID-19-infection>.

⁹ Law on the Management of the Spread of COVID-19 Infection, 2020. S.1, p. (2) Rīga: Saeima. Available at: <https://likumi.lv/ta/en/en/id/315278-law-on-the-management-of-the-spread-of-COVID-19-infection>.

¹⁰ Educatees with a disability have rights to the service of an assistant in the educational institution and outside it. Both services are funded through the State budget and have been granted in

- the conditions for the receipt of social services;
- the procedures for financing from the State budget the service of an assistant in a local government, and also for the students of higher education institutions and colleges;¹¹
- the procedures for extending the term of validity of an administrative act issued previously by the State Medical Commission for the Assessment of Health Condition and Working Ability if a person has not submitted the documents necessary for carrying out the assessment of disability.¹²

The following Articles of the Law apply to persons with disabilities:

- Section 25, paragraphs (4¹) and (4²) set out the obligation of the Cabinet to determine the group of persons and the quantity of personal protective equipment to be transferred to these persons by local governments free of charge.
- Section 44, paragraph (4) provides the extension of the time limit of evaluation issued by the pedagogical and medical commission¹³ and application of the issued opinion during the extended period.
- Chapter VI on Conditions for the Provision of Social and Health Care Services and Social Assistance. Section 47 of this Chapter determines that the placement of new clients in social service institutions is allowed if a provider of social services can ensure compliance with the epidemiological safety measures. This section also determines a supplement for the personnel involved in the care in conditions of increased risk for the care of the infected clients and contact persons of such clients and the procedure for covering additional expenditures of local governments for supplements to be paid from the State budget programme 'Funds for Unforeseen Events'. Section 48 provides the rights of local government to determine the status of a needy person or low-income person according to provisions for the receipt of aid specified by the Fund for European Aid to the Most Deprived (average income per family member does not exceed EUR 242 per month) based on previously submitted documents if the status determined to

accordance with the procedures specified in laws. The service of an assistant to an educatee with a disability supports moving about and performing self-care at an educational institution.

¹¹ According to the *Disability Law* (2010) a person with a very severe or severe disability has the right to receive the service of an assistant in performing activities outside his or her dwelling which due to persons' disability cannot be performed independently, such as - to get to the place where he or she is studying, working, receiving services; to move about and to take care of himself or herself in an educational institution, or in a place of paid employment; to be in contact with other natural and legal persons, and also to assist a person with visual disability to acquire a programme of basic vocational education, secondary vocational education or higher education (S. 1). Riga: Saeima. Available at: <https://likumi.lv/ta/en/en/id/211494-disability-law>.

¹² Law on the Management of the Spread of COVID-19 Infection, 2020. S.4. Riga: Saeima. Available at: <https://likumi.lv/ta/en/en/id/315278-law-on-the-management-of-the-spread-of-COVID-19-infection>.

¹³ The State pedagogical medical commission (established by the Minister for Education and Science) and the pedagogical medical commissions of the local governments (established by the local governments) issue opinions regarding the necessity of a special education program for children with acquired or congenital functional disorders. Special education programmes ensure the possibility of acquiring general education for educatees according to their special needs. The Cabinet of Ministers determine the criteria by which the pedagogical medical commission shall provide an opinion on the educational programme most appropriate for the needs of an educatee with special needs, as well as the competence of the pedagogical medical commissions of State and local governments and the professional requirements for members of the commission. *General Education Law*, 1999. S. 4, S.49, S.50, S. 54. Riga: Saeima. Available at: <https://likumi.lv/ta/en/en/id/20243-general-education-law>.

a family (person) expires or it needs to be extended within three months after the revocation of the emergency situation. All benefits and reliefs granted by the local government and the State remain valid for the extended period for the person (family). Section 49 determines that a person with disability shall not cover the costs for a self-isolation place provided by the local government if a police decision on separation or a court decision on temporary protection against violence which prohibits to stay in a dwelling has been taken concerning a person who must implement special epidemiological safety measures and the person himself or herself is not able to ensure self-isolation.

Cabinet Regulations No. 360¹⁴ determine in more detail the epidemiological safety measures to be taken for the containment of the spread of COVID-19 infection. Persons with disabilities are not directly identified, but there have been highlighted several groups of persons such as persons above 65 years of age, persons with chronic diseases (chronic respiratory diseases, diabetes mellitus, cardiovascular system diseases, mental impairments),¹⁵ and also persons with immuno-deficiency, in relation to whom special precautionary measures shall be implemented,¹⁶ educatees studying according to special education programmes¹⁷ or educatees who are entitled to receive assistant services,¹⁸ as well as athletes of the Latvian Paralympic team.¹⁹

Subparagraph 27.1.4. of the Regulations determines that the condition regarding organisation of training remotely shall not apply to special educational institutions and to such special classes of educational institutions in which a special basic education programme is implemented for pupils with a severe mental disorder or multiple severe disabilities, and also to pupils with severe mental disorders attending special basic education programmes.²⁰ When the educational institution wholly or partially organises the educational process remotely, educatees who have received the service of an assistant at the educational institution have the right to receive the service of an assistant paid from the State budget for up to 40 hours per week at the general pre-school education institution²¹ or up to 25 hours per week at the general primary

¹⁴ Cabinet Regulation No. 360 'Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection', 2020. Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/en/en/id/315304-epidemiological-safety-measures-for-the-containment-of-the-spread-of-COVID-19-infection>.

¹⁵ Mental impairments include both intellectual disability and psychiatric disorders.

¹⁶ Cabinet Regulation No. 360 'Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection', 2020. Par. 8.1 Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/en/en/id/315304-epidemiological-safety-measures-for-the-containment-of-the-spread-of-COVID-19-infection>.

¹⁷ Cabinet Regulation No. 360 'Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection', 2020. Par. 27.1.4 Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/en/en/id/315304-epidemiological-safety-measures-for-the-containment-of-the-spread-of-COVID-19-infection>.

¹⁸ Cabinet Regulation No. 360 'Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection', 2020. Par. 27.1, 27.2 Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/en/en/id/315304-epidemiological-safety-measures-for-the-containment-of-the-spread-of-COVID-19-infection>.

¹⁹ Cabinet Regulation No. 360 'Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection', 2020. Par. 31.1 Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/en/en/id/315304-epidemiological-safety-measures-for-the-containment-of-the-spread-of-COVID-19-infection>.

²⁰ Educatees who acquire special education programs may be with and without a disability.

²¹ Cabinet Regulation No. 360 'Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection', 2020. Par. 27.1 Riga: Cabinet of Ministers. Available at:

education, basic vocational education, vocational training, general secondary education and vocational secondary education institutions.²²

Paragraph 31.1 of the Regulations determines that organisation of training outdoors, individually or remotely, does not apply to the Latvian Paralympic team athletes.

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

The procedures by which a special legal regime - emergency situation or state of exception - shall be declared and revoked, the rights of State administration and local government authorities, natural persons and legal persons, their restrictions, special duties and provision of the rule of law during validity of such legal regimes are prescribed by the *Law on Emergency Situation and State of Exception*.²³ Referring to the *Constitution*²⁴ and *National Security Law*,²⁵ in the drafting of the Law, there were involved institutions and officials responsible for the declaration of emergency situation and state of exception, as well as on the measures to be taken.²⁶ Non-governmental organisations, including those representing persons with disabilities, were not involved.

In the annotation of the *Law on the Operation of State Authorities During the Emergency Situation Related to the Spread of COVID-19*²⁷ of 3 April 2020, it was pointed out that due to the spread of COVID-19, it was 'necessary for the legislator to take immediate action to regulate the actions of the national authorities during an emergency situation; therefore public participation in the drafting of the proposal was not possible.'²⁸

In turn in the annotation of the *Law on the Management of the Spread of COVID-19 Infection*, it was stated that 'Public participation about this proposal will take place

<https://likumi.lv/ta/en/en/id/315304-epidemiological-safety-measures-for-the-containment-of-the-spread-of-COVID-19-infection>.

²² Cabinet Regulation No. 360 'Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection', 2020. Par. 27.2 Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/en/en/id/315304-epidemiological-safety-measures-for-the-containment-of-the-spread-of-COVID-19-infection>.

²³ Law on Emergency Situation and State of Exception, 2013. S. 2 Riga: Saeima. Available at <https://likumi.lv/ta/en/en/id/255713-on-emergency-situation-and-state-of-exception>.

²⁴ The Constitution of the Republic of Latvia (Latvijas Republikas Satversme), 1922. Riga: Constitutional Assembly. Available at: <https://likumi.lv/ta/en/en/id/57980-the-constitution-of-the-republic-of-latvia>.

²⁵ National Security Law (Nacionālās drošības likums), 2000. Riga: Saeima.

²⁶ Initial impact assessment report (annotation) of the legal act project, 'Draft Law on Emergency Situation and State of Exception', 2012. Riga: Cabinet of Ministers. Available at: <http://titania.saeima.lv/LIVS11/SaeimaLIVS11.nsf/0/7A9BD98FE16DF054C2257A9C00486764?OpenDocument#b>.

²⁷ Law on the Operation of State Authorities During the Emergency Situation Related to the Spread of COVID-19 (likums "Par valsts institūciju darbību ārkārtējās situācijas laikā saistībā ar Covid-19 izplatību"), 2020. Riga: Saeima. Available at: <https://likumi.lv/ta/en/en/id/313730-on-the-operation-of-state-authorities-during-the-emergency-situation-related-to-the-spread-of-COVID-19>. Repealed with Law on the Management of the Spread of COVID-19 Infection of June 5, 2020.

²⁸ Annotation to the Law on the Operation of State Authorities During the Emergency Situation Related to the Spread of COVID-19, 2020. Riga: Cabinet of Ministers. Available at: <http://titania.saeima.lv/LIVS13/SaeimaLIVS13.nsf/0/A575309CA41C2AB9C225853D003E833E?OpenDocument#B>.

within the framework of draft law progress'.²⁹ The draft law regarding the provision of tourism services was coordinated with a number of non-governmental organisations of the tourism sector³⁰ prior to submitting to the *Saeima*. The draft law was reviewed in *Saeima* as a matter of urgency on 4 and 5 June 2020. Announced on 9 June 2020. Materials of the Defence, Internal Affairs and Corruption Prevention Commission responsible for the draft law indicate that the proposals of *Saeima* deputies and ministries were reviewed. There was practically no involvement of the public (except tourism industry organisations).³¹ Organisations of persons with disability were not involved.

In the annotation of the *Law on the Suppression of Consequences of the Spread of COVID-19 Infection*³² it was stated that 'the draft law has no impact on this area'.³³ The draft law was reviewed as a matter of urgency on 4 and 5 June 2020. Announced on 9 June 2020. However, the Budget and Finance (Taxation) Commission responsible for the draft law examined the proposals of the Finance Latvia Association and the Latvian Association of Gaming Business before second reading.³⁴ Society (including organisations of persons with a disability) were not involved.

In December 2020, the Ministry of Finance organised a public debate on the draft plan for the Recovery and Resilience Facility of Latvia. More than 100 representatives from the non-governmental sector, responsible sectoral ministries and the European Commission attended the meeting on the component 'Reduction of inequalities'³⁵ and 90 representatives attended the meeting on the component 'Health'.³⁶ The summaries of the debate do not identify specific organisations representing persons with disabilities who have participated in the debate or made proposals, but it is possible to conclude from the statement of comments received regarding the draft plan for the Recovery and Resilience Facility of Latvia prepared within the framework of the European Union Structural Funds and the Cohesion Fund for the programming period

²⁹ Annotation to the Law on the Management of the Spread of COVID-19 Infection, 2020. Riga: Cabinet of Ministers. Available at: <http://titania.saeima.lv/LIVS13/SaeimaLIVS13.nsf/0/C0F7B89859934871C22585770022A499?OpenDocument#B>.

³⁰ Precisely - Association of Latvian Travel Agents and Operators, Latvian Insurers Association and Latvian Association for Consumer Rights Protection.

³¹ *Saeima*. Draft laws. Available at: [https://titania.saeima.lv/LIVS13/saeimalivs13.nsf/webAll?SearchView&Query=\(Title\)=*COVID+19*&SearchMax=0&SearchOrder=4](https://titania.saeima.lv/LIVS13/saeimalivs13.nsf/webAll?SearchView&Query=(Title)=*COVID+19*&SearchMax=0&SearchOrder=4).

³² Law on the Suppression of Consequences of the Spread of COVID-19 Infection, 2020. Riga: *Saeima*. Available at: <https://likumi.lv/ta/en/en/id/315287-law-on-the-suppression-of-consequences-of-the-spread-of-COVID-19-infection>.

³³ Annotation to the Law on the Suppression of Consequences of the Spread of COVID-19 Infection, 2020. Riga: Cabinet of Ministers. Available at: <http://titania.saeima.lv/LIVS13/SaeimaLIVS13.nsf/0/A2283977BBCC62A2C22585770026E772?OpenDocument#B>.

³⁴ *Saeima*. Draft laws. Available at: [https://titania.saeima.lv/LIVS13/saeimalivs13.nsf/webAll?SearchView&Query=\(Title\)=*COVID+19*&SearchMax=0&SearchOrder=4](https://titania.saeima.lv/LIVS13/saeimalivs13.nsf/webAll?SearchView&Query=(Title)=*COVID+19*&SearchMax=0&SearchOrder=4).

³⁵ Summary on meeting 5 'Component 'Reduction of inequalities' of the Draft Plan of Recovery and Resilience Facility, 14 December 2020. Available at: https://komitejas.esfondi.lv/_layouts/15/WopiFrame.aspx?sourcedoc=/Protokoli/Kopsavilkums_AN M_5.Nevienlidziba_14122020.docx&action=default.

³⁶ Summary on meeting 2 "Component "Health" of the Draft Plan of Recovery and Resilience Facility, 11 December 2020. Available at: https://komitejas.esfondi.lv/_layouts/15/WopiFrame.aspx?sourcedoc=/Protokoli/Kopsavilkums_AN M_2.Veseliba_11122020.docx&action=default.

2021-2027,³⁷ that objections or proposals might have been provided by the Latvian Umbrella Body For Disability Organisations SUSTENTO, Liepaja Society of the Blind and the Samaritan Association of Latvia.

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

A procedure is set up in Latvia that provides for attaching an initial impact assessment report as an annotation to the legal act. This annotation includes the justification, description of the current situation and the problems for which the legal act was drafted, purpose and substance of the legal framework, bodies involved in drafting the project, the impact of the legal act project on society, economic development and administrative burden, on State and local government budgets (during the adoption of the draft law and for the following three years), on the system of existing legal provisions, and on compliance of the legal act with the international obligations of the Republic of Latvia (including EU legal acts). It also includes information on the participation of the public and communication activities and provision of the legal act project implementation and its impact on the institutions.

There is no evidence of the use of impact assessment concerning the situation of persons with disabilities in the annotations of the Laws described in sections 2.1 and 2.2.

Following the first outbreak of COVID-19, within the state research programme 'COVID-19 mitigation' it was planned to implement ten projects in three thematic areas by the end of 2020, including 'Life with COVID-19: Assessment of overcoming the crisis caused by a coronavirus in Latvia and proposals for the resilience of society in the future'.³⁸ This project aimed to assess Latvia's state and society's readiness and the effectiveness of the mechanisms used to overcome the crisis and prepare proposals for future scenarios to strengthen society's resilience to future crises. One of the thematic strands of the project was 'Change in the labour market and employment structures, the new logic in the provision of social services'. Four reports are planned:

- the possibilities for reconciling work and private life between different socio-demographic groups for reduction of the spread of COVID-19 during the period of restrictions;
- an assessment and proposals on the necessary changes to policies and / or legal acts to promote employment and a safe working environment (including in remote work) for reduction of the spread of COVID-19 during imposed restrictions;
- an assessment of the effectiveness and coverage of social protection measures provided by national and local governments, their impact on the support of different socio-demographic groups during the crisis and provision of welfare for people;

³⁷ Statement of comments received regarding the Draft Plan for the Recovery and Resilience Facility of Latvia prepared within the European Union Structural Funds framework and the Cohesion Fund for the programming period 2021-2027, 2021. Points 92, 94, 97, 105. Riga: Ministry of Finance. Available at: <https://www.esfondi.lv/atveselosanas-un-noturibas-mehanisms>.

³⁸ On the Ministry of Education and Science website under the section 'Current events', 'Ten projects will be implemented within the state research programme 'COVID-19 mitigation'. Available at: <https://www.izm.gov.lv/lv/jaunums/valsts-petijumu-programma-COVID-19-seku-mazinasanai-tiks-istenoti-10-projekti>.

- the short-term and medium-term impact of significant restrictions on social services, assessing the approaches to imposing restrictions on services in different areas.³⁹

The contracting authority was the Ministry of Welfare. According to the project manager's phone response, in January 2021 the reports have been submitted to the Ministry of Welfare for consideration, but they are not publicly available. The results of this study are likely to be used in the future.

Considering that the topics are broadly formulated, the possibilities that these research projects and reports will include anything explicitly focusing on people with disabilities concerning the issues the reports are covering are small.

2.4 Use of disaster management and recovery planning funds

Measures aimed at mitigating the consequences of COVID-19 are funded mainly from the State budget programme 'Funds for Unforeseen Events'. Special measures concerning persons with disabilities and financing are not provided for, except in the Cabinet Regulations No. 360 specified funding for educatees entitled to receive assistant services in educational institutions.⁴⁰

In February 2021, the Ministry of Finance intends to submit to the Cabinet a Draft Plan for the Recovery and Resilience Facility of Latvia.⁴¹ The objectives set out in this plan are intended to be achieved using the EU Recovery Facility. Component 3 'Reduction of inequalities' and Component 4 'Health' are related to persons of disability most directly.

Component 3 aims "To reduce the territorial and social inequality of society and to improve the living conditions of people in regions, including the availability of social services and employment in regions, by promoting the provision of high quality universal secondary education in municipal areas, by promoting the accessibility of housing [...]". It intends, inter alia, to ensure the availability of social and employment services to support the minimum income reform. As part of this reform, it is intended to implement the following activities:

- adapt the environment of public and local government buildings and housing for persons with disabilities (related to persons with disabilities, including persons with functional limitations for whom disability has not been determined);
- develop a forecasting tool for long-term forecasts of the social insurance system (related to persons with disability indirectly);
- adapt long-term social care institutions to the epidemiological risk situation and develop new care institutions close to the familial environment (related directly to

³⁹ Riga Stradins University website. Section 'Projects'. 'Life with COVID-19: Assessment of overcoming the crisis caused by a coronavirus in Latvia and proposals for the resilience of society in the future', January 2021. Available at: <https://www.rsu.lv/projekts/dzive-ar-COVID-19>.

⁴⁰ Cabinet Regulation No. 360 'Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection', 2020. Par. 27.1 Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/en/en/id/315304-epidemiological-safety-measures-for-the-containment-of-the-spread-of-COVID-19-infection>.

⁴¹ The EU Recovery and Resilience Facility. Central Finance and Contracting Agency. Available at: <https://www.esfondi.lv/atveselosanas-un-noturibas-mehanisms>.

- persons with disabilities, including persons with functioning limitations for whom disability has not been determined);
- establish a Social Integration Centre for the Development of Competencies to promote the securitability (drošumspēja)⁴² of people with functioning limitations (also related to persons with disabilities);
 - develop the necessary skills for the involvement of unemployed people, job seekers and people at risk of unemployment in the labour market (including people with disabilities).⁴³

For the adaptation of long-term care institutions for epidemiological risk situations, there are planned EUR 11.5 million; for the development of new care institutions close to the familial environment EUR 15.0 million; for the promotion of accessibility of public services and employment EUR 8.4 million; for the establishment of the Social Integration Centre for the Development of Competencies EUR 6.0 million; for the development of a forecasting tool for long-term forecasts of the social insurance system EUR 2.0 million. The total amount initially indicated for these components is EUR 330 million or 20 % of the total funding available to Latvia.⁴⁴

The objective of Component 4 is to 'Improve the availability and quality of health services through the implementation of complex measures in an integrated health system'. The following activities are planned for ensuring the availability of quality services and readiness for epidemiological crises:

- support the adaptation of medical treatment facilities to provide integrated health services at the places where medical staff are available;
- strengthen the resilience and readiness of medical facilities for epidemiological crises;
- improve the accessibility of the environment in medical facilities;
- change health services by improving their effectiveness;
- introduce a development model of the medical education system;
- develop common principles in the field of oncology.

Persons with disabilities, persons with functioning limitations, and persons of retirement age and pre-retirement age are identified as population groups for which health services will become more accessible due to the implemented reforms.⁴⁵ For strengthening the resilience and readiness of medical treatment facilities for epidemiological crises, there are planned EUR 150.5 million; for setting up an innovation fund to improve the efficiency and accessibility of health care services EUR 20.0 million; for accessibility of the environment in medical facilities EUR 7.5 million; for the introduction of a development model of the medical education

⁴² Securitability - a person's ability not to lose the sense of security and the ability to regain it if it has been lost for some subjective or objective reasons.

⁴³ Plan for the Recovery and Resilience Facility of Latvia for 2021-2026 (project), 2021. Para (495), (564) – (593), (638) – (755). Riga: Ministry of Finance. Available at: <https://www.esfondi.lv/atveselosanas-un-noturibas-mehanisms>.

⁴⁴ Thematic discussion on EU Funds 2021-2027 planning period. Welfare related investments within the framework of Plan for the Recovery and Resilience Facility, December 2020. Available at: [https://komitejas.esfondi.lv/layouts/15/WopiFrame.aspx?sourcedoc=/Shared%20Documents/4_L_M_ANM_\(RRF\)_Nevienlidziba_14122020.ppt&action=default](https://komitejas.esfondi.lv/layouts/15/WopiFrame.aspx?sourcedoc=/Shared%20Documents/4_L_M_ANM_(RRF)_Nevienlidziba_14122020.ppt&action=default).

⁴⁵ Plan for the Recovery and Resilience Facility of Latvia for 2021-2026 (project), 2021. Para (758) – (776), (797), (820). Riga: Ministry of Finance. Available at: <https://www.esfondi.lv/atveselosanas-un-noturibas-mehanisms>.

system EUR 3.0 million; for the development of common principles in the field of oncology EUR 0.5 million. The total amount initially indicated for the component is EUR 181.5 million or 11% of the total funding available to Latvia.⁴⁶

However, the measures, funding and distribution identified in the draft plan for the Recovery and Resilience Facility of Latvia will be precisely known after the plan is adopted in Latvia and the European Commission positively assesses it.

⁴⁶ Thematic discussion on EU Funds 2021-2027 planning period. Plan for the Recovery and Resilience Facility. Health. Availability of qualitative services and readiness to epidemiologic crises, December 2020. Available at:
[https://komitejas.esfondi.lv/layouts/15/WopiFrame.aspx?sourcedoc=/Shared%20Documents/2_V_M_ANM_\(RRF\)_Veseliba_11122020.pptx&action=default](https://komitejas.esfondi.lv/layouts/15/WopiFrame.aspx?sourcedoc=/Shared%20Documents/2_V_M_ANM_(RRF)_Veseliba_11122020.pptx&action=default).

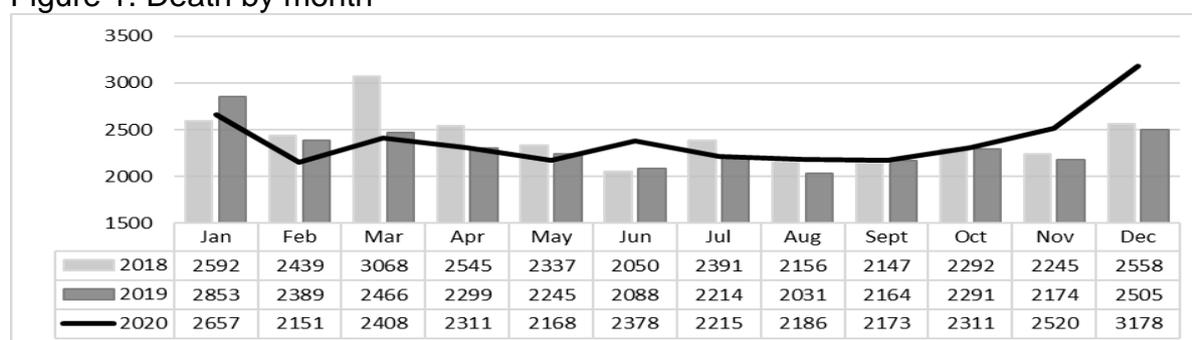
3 Mortality connected to COVID-19 among people with disabilities

[Article 10 – The right to life](#)

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

No. Publicly available data regarding COVID-19 are available in the official COVID-19 website.⁴⁷ In the Central Statistical Bureau databases there is the available information on socio-economic indicators under the impact of COVID-19.⁴⁸ Information is available on the total number of deaths (see Figure 1),⁴⁹ as well as deaths by age groups in 2018 and 2019 (information is not available for 2020). There are no official statistics concerning the overall mortality rate of people with disabilities.

Figure 1. Death by month



Source: Central Statistical bureau database.

Information on the spread of COVID-19 in Latvia, the cumulative number of tests performed and the number of tests performed in the last 24 hours, the total number of persons confirmed for COVID-19 infection and the number of cases recorded during the last 24 hours, and the percentage of positive tests, are available on the website of the Latvian Centre for Disease Prevention and Control Centre. Publicly, the mass media is informed about the number of tests carried out on the preceding day, the proportion of positive cases, the number of persons hospitalized and the number of deaths. Age groups indicate the number of dead persons. For example, on 29 January 2021, among 14 deaths, one person was at the age of 50-55, two persons at the age of 60-70, four persons at the age of 70-80, four persons at the age of 80-90, and three persons at the age of 90-95.⁵⁰

The total number of deaths from 29 January 2020 to 29 January 2021, related to COVID-19 was 1166 persons.⁵¹ Persons with disabilities are not identified separately.

⁴⁷ Official website COVID-19. Distribution of Covid-19 in Latvia. Available at: <https://covid19.gov.lv/covid-19/covid-19-statistika/covid-19-izplatiba-latvija>.

⁴⁸ Central Statistical Bureau. Socio-economic indicators under the impact of COVID-19. Available at: <https://www.csb.gov.lv/en/Statistics/COVID19>.

⁴⁹ Central Statistical Bureau database. IE040m. Live births and deaths by sex and by month. Available at:

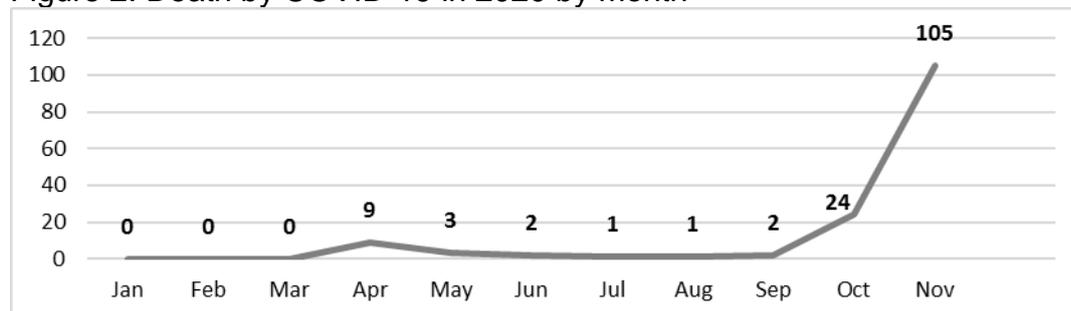
https://data.csb.gov.lv/pxweb/en/iedz/iedz_iedzskaits_isterm/IE040m.px/table/tableViewLayout1/

⁵⁰ TVNET. Available at: <https://www.tvnet.lv/7168201/piektdien-latvija-registreti-785-jauni-inficetas-gadījumi-14-mirusie>.

⁵¹ Latvian Centre for Disease Prevention and Control Centre. COVID-19 infection spread in Latvia 29.01.2020.-29.01.2021. Available at: <https://spkc.maps.arcgis.com/apps/opsdashboard/index.html#/4469c1fb01ed43cea6f20743ee7d5939>.

A number of persons whose main cause of death is COVID-19 are reflected in Figure 2, persons with disabilities are not specified separately.

Figure 2. Death by COVID-19 in 2020 by month



Source: Health Statistic Database.⁵²

Due to the outbreak of COVID-19 in long-term social care centres, the Centre for Disease Prevention and Control in cooperation with the Ministry of Welfare informed the public that between the beginning of the pandemic and mid-January 2021, COVID-19 was revealed in 13 public and 67 municipal and private long-term social care centres (together 80) of 184 centres with approved infections which accounted for 10.4 % of all infections in Latvia. Four thousands of all clients from the centres (about one-third of the total number of clients) got ill, and 146 clients have died (representing 14 % of all deaths). Also, 1 300 employees of care centres were infected. In September 2020, three infections were reported in social care centres (or 0.7 % of 428 infections), in October - 66 cases (or 1.6 % of 4 070 infections), in November - 826 cases (or 7.4 % of 11 181 infections) and in December – 3 184 (or 13.4 % of 23 829 infections).⁵³

It is not possible to determine the proportion of persons with disabilities among dead persons as that there is no official statistics on the death rates of persons with disabilities.

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

No, in Health Statistic Database there is the available information on the causes of population deaths by disease groups⁵⁴ and other indicators. No statistical data are indicating whether the diagnosis is related to COVID-19. Nor are there publicly available statistics on the causes of the deaths of people with disabilities. Consequently, there are no data on persons with disabilities who died during the pandemic period caused by complications connected to COVID-19.

As there is no data on people who died from complications connected to COVID-19 during the period of the pandemic and people with disabilities, whose cause of death was the same, it is not possible to determine the proportion of people who died from complications connected to COVID-19 who were people with disabilities.

⁵² Health Statistic Database. MOR10. Death causes by month. Available at: https://statistika.spkc.gov.lv/pxweb/en/Health/Health_Mirstiba/MOR10_ledzivotaju_naves_celoni_menesi.px/table/tableViewLayout2/.

⁵³ Kļava B. 'Virus takes over care homes', Journal IR, No. 3, 2021.

⁵⁴ Health Statistic Database. Cause of death. Available at: https://statistika.spkc.gov.lv/pxweb/en/Health/Health_Mirstiba/MOR10_ledzivotaju_naves_celoni_menesi.px/.

Information on the place of death of people with disabilities with a confirmed diagnosis of COVID-19 is not available. The Centre for Disease Prevention and Control collects information on the number of deaths in long-term social care centres. One hundred forty-six people have died from the beginning of the pandemic until mid-January 2021 after being infected with COVID-19 in social care centres (representing 14 % of all deaths).⁵⁵ However, there is no precise data if the leading cause of death was directly COVID-19.

There is also no publicly available information on the place of residence of persons with disabilities that have died with a confirmed diagnosis of COVID-19.

Statistical databases collect information on the number of deceased persons by different variables: age, gender, administrative territory, marital status, nationality and other.⁵⁶ Disability, as a criterion, is not specified.

⁵⁵ Kļava B. 'Virus takes over care homes', Journal IR, No. 3, 2021.

⁵⁶ Central Statistical Bureau Database. Mortality. Available at: http://data1.csb.gov.lv/pxweb/en/iedz/iedz__mirst/?tablelist=true.

4 Access to health

[Article 25 – Health](#)

4.1 Emergency measures

As indicated in section 2.1, disability is not indicated as a criterion in addressing emergencies, including receipt of healthcare services. The criteria highlighted by the law are the age: persons above 65 years of age; certain chronic disease groups - respiratory diseases, diabetes mellitus, cardiovascular system diseases, mental impairments, immuno-deficiency, for which special precautions should be taken.⁵⁷ These criteria may also apply to some persons with disabilities.

The place of residence of persons – being in a long-term social care centre has been identified as a criterion in prioritising persons' groups for carrying out vaccination. The restrictions imposed during the pandemic apply to persons with disabilities in the same way as any other person.

4.2 Access to hospital treatment for COVID-19

During the second outbreak of the COVID-19 pandemic, the statistical data in January 2021 indicate that an average of 102 patients per day are entering hospitals, including, if necessary, also hospitalised from long-term social care centres. According to National Health Service data, 1 115 COVID-19 patients were treated in hospitals on 22 January 2021: 1 015 with a moderate disease course and 100 with a severe disease course.⁵⁸ Information on persons with disability is not accumulated.

In Latvia, the State Emergency Medical Service has developed an algorithm for hospitalising patients, which considers criteria such as the severity of the disease, the development of disease and other factors.⁵⁹ The disability of a person has not been identified as a criterion. The State Operational Medical Commission⁶⁰ has approved the algorithm, but it is not publicly available.

4.3 Treatment for COVID-19 in congregate settings

According to the Ministry of Welfare, clients of the long-term social care centres are under the supervision of family doctors after being infected with COVID-19. Emergency medical practitioners decide the need for hospitals. Details of people being treated in centres or hospitalised are not publicly available. The mass media (TV stories, newspapers, the internet) reflects information on individual cases where, for example, a person is hospitalised with one disease, infected and died in connection with COVID-

⁵⁷ Cabinet Regulation No. 360 'Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection', S. 8.1, 2020. Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/en/en/id/315304-epidemiological-safety-measures-for-the-containment-of-the-spread-of-COVID-19-infection>.

⁵⁸ Ministry of Health. Information to mass media. 'If the incidence of COVID-19 resumes, "wartime medicine" will have to start in hospitals', 22 January 2021. Available at: <https://www.vm.gov.lv/lv/jaunums/ja-saslimstiba-ar-COVID-19-atsaks-pieaugt-slimnicas-bus-jasak-istenot-kara-medicina>.

⁵⁹ Phone call information by the representative of the State Emergency Medical Service.

⁶⁰ The State Operational Medical Commission's task is to co-ordinate the health sector institutions' operation in emergencies and take decisions in emergencies. It is an advisory and coordinating body, the operation of which takes place following the requirements of the Cabinet of Ministers.

19.⁶¹ However, there is no credible evidence coming from the media or NGOs regarding persons with disabilities.

4.4 Public health promotion and testing during the pandemic

Information to persons with disabilities is publicly provided in the same way as to the general public. On the official COVID-19 website,⁶² the website of the Centre for Disease Prevention and Control and the website of the Ministry of Health information can be read by increasing the font size or contrast of letters required for people with visual disability. Information is not available in easy-to-read language for people with intellectual disability,⁶³ but it is available on the website of the Ministry of Welfare⁶⁴ and website of Public broadcasting of Latvia.⁶⁵ Individual NGOs also provide information on their websites directly to their target audience, such as the Latvian Society of the Blind,⁶⁶ Latvian Association of the Deaf,⁶⁷ the Latvian Umbrella Body For Disability Organisations SUSTENTO.⁶⁸

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

Publicly available information about 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 is not available. At the end of 2020, several studies were carried out on the impact of COVID-19 on society in Latvia. The data will be publicly available after the studies have been published. However, the possibility that the impact of the COVID-19 crisis on access to health services for general or pre-existing physical or mental health conditions of persons with disabilities will be investigated is small. The Ministry of Health is analysing demand for health services by disease groups, such as demand for mental health services,⁶⁹ and not by indication of age or disability.

⁶¹ Hospitals have become COVID-19 hotbeds: placed in hospitals with another disease but die because of a virus, 25.01.2021. Public broadcasting of Latvia. Available at: <https://www.lsm.lv/raksts/zinas/latvija/slimnicas-kluvusas-par-covid-19-perekliem-stacione-ar-citu-kaiti-bet-nomirst-virusa-del.a390149/>.

⁶² The official website contains all the relevant information related to COVID-19 — about COVID-19, the symptoms, to whom and how tests are carried out, the vaccine, the safety measures, the curfew, distancing, self-isolation and quarantine, the idle time support, safe business and safe training, the 'Apturi Covid' application, e-culture offers and answers to frequently asked questions.

⁶³ The websites of the mentioned authorities shall be updated to participate in the joint platform of the State and local government authorities' websites, which shall be developed within the framework of a project led by the State Chancellery. Available at: <https://www.mk.gov.lv/lv/projekti>.

⁶⁴ Ministry of Welfare. About coronavirus. Available at: <https://www.lm.gov.lv/lv/par-koronavirusu>.

⁶⁵ LSM.LV Public broadcasting of Latvia. Coronavirus 'COVID-19'. Available at: <https://www.lsm.lv/raksts/zinas/zinas-vieglaja-valoda/informacija-vieglaja-valoda-par-COVID-19.a352224/>.

⁶⁶ Website of Latvian Society of the Blind. Section 'News'. Available at: <http://lnbiedriba.lv/lv/jaunumi/>.

⁶⁷ Website of Latvian Association of the Deaf. Section 'News'. Available at: http://www.lns.lv/lat/jaunumi/video_zinas/.

⁶⁸ The Latvian Umbrella Body for Disability Organisations SUSTENTO. Available at: <http://www.sustento.lv/?lang=lv>.

⁶⁹ Informative Report 'On the necessary measures for 2021 and every year after that to reduce the long-term negative effects on the public' mental health caused by the COVID-19 pandemic', 2021. Riga: Ministry of Health. Available at: http://tap.mk.gov.lv/doc/2021_01/VMzin_110121_inf_zin_pshves.99.docx.

During the spring 2020 COVID-19 crisis, the provision of certain scheduled healthcare⁷⁰ and outpatient services were suspended. However, several services were covered during restrictions⁷¹ such as:

- emergency medical and acute assistance (including examinations and consultations);
- family doctor counselling and assistance;
- vaccination;
- health care services for specific patient groups;⁷²
- health services at home;
- services to ensure continuity of therapy;⁷³
- assistance for patients who should continue or complete emergency hospital treatment;
- specialist advice for patients with chronic diseases (remotely if possible);
- oncological health services;
- life-saving services, as well as operations that may result in disability;
- dental services in acute and emergency cases;
- ambulatory Concilium (without the participation of a patient) and rehabilitation services for persons at acute or sub-acute stages for whom the suspension of this service could result in the risk of disability and / or loss of working capacity, including children to whom the postponement of rehabilitation services was related to a significant deterioration in functioning conditions.

The mass media (TV stories, newspapers, internet) reflected information on individual cases where people expressed their discontent that they could not receive the planned health services due to the restrictions. However, there is no credible evidence from the media or NGOs on the impact of the COVID-19 crisis on access to health services for general or pre-existing physical or mental health conditions regarding persons with disabilities.

4.6 Vaccination programmes

The Cabinet examined the Ministry of Health Plan for vaccination against COVID-19 on 1 December 2020. The Plan stipulated that vaccination in Latvia will be carried out in several phases⁷⁴ on recommendations from the European Commission. According

⁷⁰ For example, the first-time consultations of an endocrinologist, cardiologist, rheumatologist, pulmonologist, ophthalmologist and neurologist, echocardiography, ultrasonography, X-ray and other examinations.

⁷¹ Regarding the Restriction of the Provision of Health Care Services during the Emergency Situation. Order of the Minister for Health No. 59. 25.03.2020. Riga: Ministry of Health. Available at: <https://likumi.lv/ta/en/en/id/313481-regarding-the-restriction-of-the-provision-of-health-care-services-during-the-emergency-situation>.

⁷² Healthcare services were provided to pregnant women, 'Green Corridor' patients, oncological patients, HIV/AIDS patients, tuberculosis patients, psychiatric patients, and trauma-related patients.

⁷³ These services are related to chemotherapy, biological medicinal products, organ replacement therapy, radiotherapy, daily hospital services in haematology and methadone replacement therapy.

⁷⁴ The Plan covered four stages of vaccination: by vaccinating medical practitioners in the first phase – medical practitioners, medical support persons and persons having direct contact with COVID-19 patients, and employees of the Emergency Medical Service. The second phase (beginning in February and March 2021) was intended to vaccinate residents and employees of long-term social care centres. While in the third stage, persons over the age of 60 and persons with chronic diseases, and in the fourth phase, the staff of operational services (e.g. police officers, border guards) and staff of educational establishments working in general and pre-primary education

to the Plan, residents of long-term social care centres (12 257 persons) and persons over the age of 60 (523 260 persons) were identified as priority group II, while those with chronic diseases (332 000 persons) as priority group III.⁷⁵ Residents of long-term social care centres were scheduled to be vaccinated in the second phase (beginning in February and March 2021) by organising vaccinations on-site in long-term social care centres, while in the third stage, persons over the age of 60 and persons with chronic diseases for which vaccination would be possible in specially organised places (e.g. family doctors' practices).

The vaccination plan is not static. Considering the medical and epidemiological indications, the Ministry of Health updated the list of groups to be vaccinated as a priority. Clients of long-term social care centres remained in priority group II, older people aged 70 +, people with chronic diseases,⁷⁶ people living in the same household with children having chronic and immunosuppressive diseases, and those who care for severely ill people at home are identified as the group to be vaccinated with priority III, but persons aged 60-70 to be vaccinated as a priority for IV. The first group of people to be vaccinated included persons who needed serious medical manipulation, including high-cost or high-complexity surgery (e.g. oncological patients, before or during chemotherapy, patients and donors before to organ or stem cell transplantation, patients long-term in a hospital medical establishment).⁷⁷ The Cabinet approved the list on 9 February 2021.⁷⁸

Disability has not been specified as a criterion in determining the prioritization of the persons to be vaccinated. However, the specific age, chronic disease or being in a long-term social care centre may also apply to persons with disabilities.

Any person may apply for a vaccine electronically to the portal www.manavakcina.lv or by telephone to a specially created number 8989 or a family doctor. On the manavakcina.lv website, every person can find information on how to apply for vaccination, when you receive a message about vaccinations, can you be late to apply for vaccination, or if a faster application means a faster pace in the queue, and how people who do not have an internet bank or electronic signature can apply and is it possible to reconsider the decision. Information is available in Latvian and Russian languages.⁷⁹ Questions about how people with mental disabilities can apply for vaccination have not been addressed.

institutions. The general public vaccination was scheduled to be carried out at the earliest in the second quarter of 2021.

⁷⁵ COVID 19: Plan for Implementation of the Vaccination Strategy. Available at: <https://www.mk.gov.lv/lv/media/7491/download>.

⁷⁶ The specific chronic diseases include malignancies, chronic kidney diseases, Dune syndrome, dementia and similar diseases, cardiovascular diseases (cardiac ischaemic disease, cardiomyopathy), brain vascular diseases (insults), obesity (body weight index above 30 kg/m²), ischaemic disease, diabetes mellitus, asthma, cystic fibrosis, severe arterial hypertension, liver diseases (including hepatitis), pulmonary fibrosis, thalassemia, immunodeficiency (including HIV infection, medical immunodepression, oncological diseases, and other diseases).

⁷⁷ Informative report on priority groups of persons to be vaccinated, 2021. This report sets out a total of nine groups Riga: Ministry of Health. Available at: <https://www.vmnvd.gov.lv/en/node/874>.

⁷⁸ Cabinet Regulations No. 122 'Amendments to Cabinet Regulations of June 9, 2020. No. 360 'Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection, 2021. Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/id/321136-grozijumi-ministru-kabineta-2020-gada-9-junija-noteikumos-nr-360-epidemiologiskas-drosibas-pasakumi-covid-19-infekcijas>.

⁷⁹ Early application for the vaccine against COVID-19. Available at: <https://manavakcina.lv/>.

In long-term social care centres, vaccination of residents started on 10 February 2021.⁸⁰ By March 2021, 4 766 residents were vaccinated.⁸¹

⁸⁰ Vaccination against COVID-19 started for residents and employees of social care centres. 10.02.2021. LVportals.lv. Available at: <https://lvportals.lv/dienaskartiba/324743-sakusies-socialo-aprupes-centru-klientu-un-darbinieku-vakcinacija-pret-covid-19-2021>.

⁸¹ Phone call information by the representative of the Ministry of Welfare.

5 Income and access to food and essential items

Article 28 – Adequate standard of living and social protection

5.1 Emergency measures

During emergency period announced in March 2020, a lump-sum premium of EUR 150 (one-off payment) was paid to families raising a disabled child.⁸² The Minister for Welfare acknowledged that 'due to the restrictions imposed during the COVID-19 pandemic, the load has increased for all parents. However, children with disabilities sometimes need an adult's presence constantly, which is an additional financial, emotional and social burden. The EUR 150 aid approved by the government will help these families overcome the crisis.'⁸³ During the COVID-19 emergency declared in autumn 2020, persons with a child with a disability under 18 years of age are entitled to sickness benefit if the child is not allowed to attend a pre-primary education institution or if the training in the general education programme is organised remotely.

A support person for a person with a disability from the age of 18, to whom the local government has granted a day-care centre or day centre service and who, due to circumstances related to COVID-19, may not visit a day-care centre or day centre, may also receive such a sickness benefit allowance.⁸⁴ For a person with disabilities who receives the idle time benefit granted by the State Revenue Service, the State Social Insurance Agency shall pay an additional EUR 50 per month for each dependent child.⁸⁵ Persons with disabilities are entitled to sickness benefit for which the arrangements for granting have been changed concerning COVID-19. State and local governments continue to provide the payment of previously granted benefits. In the community, there has been launched a movement where volunteers deliver food and other necessary goods to the door.⁸⁶ If a disabled person's income is less than EUR 242 per month, he or she is also entitled to a package of aid from the European Fund in the event of a crisis.⁸⁷

Special measures focusing particularly on income and access to food with an exact older age dimension are not provided.

⁸² Cabinet Regulation No. 294 'Amendment to Cabinet Regulations No. 1517 of December 22, 2009 'Regulations Regarding Family State Allowance and Supplements to Family State Allowance' ("Grozījums Ministru kabineta 2009. gada 22. decembra noteikumos Nr. 1517 "Noteikumi par ģimenes valsts pabalstu un piemaksām pie ģimenes valsts pabalsta"), 2020. Rīga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/id/314711-grozijums-ministru-kabineta-2009-gada-22-decembra-noteikumos-nr-1517-noteikumi-par-ģimenes-valsts-pabalstu-un-piemaksam-pie-ģim>.

⁸³ Cabinet of Ministers. A one-time supplement to the state benefit for a child with a disability has been set at EUR 150. (Noteikta 150 eiro vienreizēja piemaksa pie valsts pabalsta par bērnu invalīdu.) 14.05.2020. Available at: <https://www.mk.gov.lv/lv/jaunums/noteikta-150-eiro-vienreizeja-piemaksa-pie-valsts-pabalsta-par-bernu-invalidu>.

⁸⁴ State Social Insurance Agency. Sickness benefit. Available at: <https://www.vsaa.gov.lv/jaunakas-zinas/informacija-slimibas-palidzibas-pabalsta-sanemejiem/>.

⁸⁵ State Social Insurance Agency. Supplement to assistance benefit for idle time for a dependent child. Available at: <https://www.vsaa.gov.lv/jaunakas-zinas/piemaksa-pie-dikstaves-atbalsta-par-apgadiba-esosu-bernu/>.

⁸⁶ Movement of volunteers 'Stay at home'. Available at: <https://paliec-majas.lv/>.

⁸⁷ Law on the Management of the Spread of COVID-19 Infection, 2020. S. 48. Rīga: Saeima. Available at: <https://likumi.lv/ta/en/en/id/315278-law-on-the-management-of-the-spread-of-COVID-19-infection>.

5.2 Impact of the COVID-19 crisis

There is no publicly available information on the impact of the COVID-19 crisis on income and poverty and access to food for people with disabilities. During the emergency, state and local governments continue to pay the benefits previously granted. Besides, support for persons with disabilities during the crisis applies in the same way as any other person.

6 Access to transportation and the public spaces

Article 9 – Accessibility

6.1 Emergency measures

No specific conditions are provided for persons with disabilities to use public transport or to gather following epidemiological requirements. As with all persons, persons with a disability must respect the 2-metre distance, the number of gatherings,⁸⁸ and use the mouth and nose covers.⁸⁹ According to Cabinet Regulations No. 360⁹⁰ mouth and nose covers need not be used by persons with obvious movement impairments or mental health disorders due to which the person lacks the capacity or skills to use mouth and nose covers.

Mass media recommended considering the need to use public transport or to visit public places. Options depend on the severity of each person's disability, the resources available and the need to use public transport or be in a public place. To some extent, information on the number of persons that become ill and who die by age implies a higher risk directly to the elderly.

6.2 Impact of the COVID-19 crisis

There is no publicly available information on the impact of the COVID-19 crisis on access to (and the accessibility of) transportation and the public realm for people with disabilities.

No studies have been carried out on the impact of the restrictions on persons with disabilities in the mass media and NGOs. In the electronic mass media appears (and quite quickly disappears) information on individual cases where persons with disabilities have disagreements with employees from security companies during shop visits. For example, when an assistant certificate is requested (although there are no

⁸⁸ In compliance with the conditions of the Cabinet Regulations No. 360 (in the version valid until 07.02.2021.) without complying with the two-metre physical distance at the same time in indoor public spaces and public outdoor spaces could gather not more than two persons, persons living in one household, a parent and his or her minor children if they do not live in one household, persons who cannot comply with the epidemiological requirements due to work or service duties, athletes, sports specialists, and sports employees serving athletes during sports trainings (sessions) and sporting events, at pre-school education institutions and sites where child supervision services are provided within the scope of one group, at camps for children within the scope of one group, actors, ballet artists, dancers, singers and orchestra musicians while performing their work duties during rehearsals, sessions, and events, during the completion of an educational programme at educational institutions within the framework of one grade, group or course where the course is not split into groups.

⁸⁹ Cabinet Regulations No. 360 required the visitors and employees to use medical or non-medical (hygienic or fabric) face masks in premises (at cultural sites and exhibition sites, at sites where the public or financial service is provided, including at trading sites, sites where public transport services are provided (such as railway stations, bus stations, airport), and sites where religious activities are performed), if a physical barrier cannot be created between the visitors and employees. Use of mouth and nose covers were obligatory for vehicle drivers who are not separated from passengers with a physical barrier and also passengers in public transport, taxi or passenger cars with which carriage of passengers for reward is performed.

⁹⁰ Cabinet Regulation No. 360 'Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection', S.6, version 07.02.2021. Available at: <https://likumi.lv/ta/id/315304-epidemiologiskas-drosibas-pasakumi-covid-19-infekcijas-izplatibas-ierobezosanai>.

such certificates in Latvia) to make sure that a person with disabilities can visit the shop with an assistant, or mandatory demands to take a shopping basket to a person wheelchair driven with one hand. Such situations more likely to indicate the level of public awareness on restrictions experienced by persons with disabilities rather than the direct effects of COVID-19.

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

According to the legal acts referred to in section 2.1, during an emergency, social services are available in person if they cannot be organised remotely, provided that a negative result of COVID-19 test or a statement by a family doctor certifying that a person has recovered from COVID-19 has been provided. In the event of an emergency, clients' reception in long-term social care centres will continue, subject to epidemiological safety conditions (tests or family doctor statement).⁹¹

The provision of care services in long-term social care institutions during an emergency is different as the visits are limited. 'Visits shall be allowed if the family has not stayed in a country published on the website of the [Centre for Disease Prevention and Control] as the country to which special precautions and restrictive measures are applicable, has not been in close contact with the COVID-19 infectious person or the person is not in the quarantine at home and has no clinical symptoms (including temperature). Not more than one person per visit, except where the visitors are several members of the same family residing in the same household.'⁹² In cases where the epidemiological situation is deteriorating, visits at long-term social care centres are temporarily suspended. Family members of the clients can transfer consignments to the Centre's clients, leaving the goods in original packages which can be disinfected. Clients of long-term social care centres can be contacted by telephone via WhatsApp, Skype, Zoom in collaboration with the staff of the centres.⁹³

7.2 Impact of the COVID-19 crisis

There is no publicly available information (including information in mass media or NGOs) about the impact of the COVID-19 crisis on the evidence of any increases or decreases in institutional living and rates of compulsory detention, treatment or restraints, or restrictions in access to family or friends for people living in institutional care.

⁹¹ Cabinet Regulation No. 360 'Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection', 2020. Chapter IV. Special Epidemiological Safety Measures for the Receipt of Social Services. Available at: <https://likumi.lv/ta/en/en/id/315304-epidemiological-safety-measures-for-the-containment-of-the-spread-of-COVID-19-infection>.

⁹² Ministry of Welfare. Information about COVID-19. Information to relatives of clients of long-term social care and social rehabilitation institutions. Available at: <https://www.lm.gov.lv/lv/informacija-par-COVID-19>.

⁹³ For example, information from the website of the state social care centre "Riga". Information for visitors on COVID-19 restrictions. Available at: <https://www.vsacriga.gov.lv/lv/jaunums/informacija-apmekletajiem-saistiba-par-COVID-19-ierobezojumem>.

8 Violence, exploitation or abuse

Article 16 – Freedom from violence, exploitation and abuse

8.1 Emergency measures

On the website of the Ministry Welfare⁹⁴ there are available Guidelines for Action in Response to the Consequences of the Emergency Situation in Work with Victims of Violence and Persons who have Committed Violence Concerning COVID-19.⁹⁵ There are no specific measures for persons with disability or seniors.

8.2 Impact of the COVID-19 crisis

There is no publicly available information on the impact of the COVID-19 crisis on evidence about domestic and institutional violence and the disability hate crime experienced by people with disabilities. Studies are needed. The lockdown period was established in Latvia during the second period of the pandemic (at the end of 2020), so there is no information or studies.

During the first COVID-19 pandemic in Spring 2020, the Minister of Interior stated that, compared to Spring 2019, 'the time spent at home due to the COVID-19 pandemic has increased, and we see also an increased number of family conflicts forcing law enforcement authorities to intervene'.⁹⁶ An increase in domestic violence was also reported by the NGO Centre 'Marta', stating that at the beginning of the 'emergency and the related household isolation there were only some calls, but in May the number increased twice. Besides, only half of the clients were able to move to remote online advice'. Unfortunately, one murder case of the victim has also been reported at this time.⁹⁷ This information refers to general cases. There are no specific data for people with disabilities.

⁹⁴ Ministry of Welfare website. Section Information about COVID-19. Available at: <https://www.lm.gov.lv/lv/informacija-par-COVID-19>.

⁹⁵ Guidelines for Action in Response to the Consequences of the Emergency Situation in Work with Victims of Violence and Persons who have Committed Violence Concerning COVID-19. 2020. Riga: Foundation 'Center Dardedze'. Available at: https://www.lm.gov.lv/sites/lm/files/data_content/vadlinijas_vardarbiba_270520201.pdf.

⁹⁶ Ministry of the Interior: Number of calls to family conflicts increases, 09.04.2020. Public broadcasting of Latvia. Available at: <https://www.lsm.lv/raksts/zinas/latvija/iekslietu-ministrija-palielinajies-izsaukumu-skaitis-uz-gimenes-konfliktiem.a355371/>.

⁹⁷ Centre 'Marta': Victim of domestic violence murdered during COVID-19 crisis, 26.05.2020. Public broadcasting of Latvia. Available at: <https://www.lsm.lv/raksts/zinas/latvija/centrs-marta-covid-19-krizes-laika-zinots-par-gimenes-vardarbibas-upura-slepkavibu.a361236/>.

9 Independent living

[Article 19 – Living independently and being included in the community](#)

9.1 Emergency measures

There are no specific emergency measures for persons with disabilities relating to independent living. The receipt of social services for supporting independent living must comply with epidemiological safety conditions in the same way as any other person.

9.2 Impact of the COVID-19 crisis

Regarding the right to an independent life in an emergency, information on the impact of COVID-19 on the lives of persons with disabilities is not available in Latvia. There are no surveys or reports from NGOs or media reports, relating to issues such as changes in the amount, quality and nature of the support persons with disabilities are getting.

To a limited extent, social services are available to persons with disabilities either remotely or personally, such as decisions on access to services are remote, and day-care centres for persons with mental disorders continue to work following epidemiological safety rules. Local governments must provide persons⁹⁸ with reusable face masks. Assistant services are paid during an emergency, based on the average number of hours used in the previous three calendar months per month.⁹⁹

⁹⁸ According to Paragraph 2.5 of Cabinet Regulations No. 380 'Regulations regarding the resources necessary for the provision of epidemiological safety for the institutions included in the list of priority institutions and needs' (Available at: <https://likumi.lv/ta/id/315391-noteikumi-par-prioritaro-instituciju-un-vajadzibu-saraksta-ieklautajam-institucijam-nepieciemamajiem-epidemiologiskas-drosibas-...>) municipalities shall provide face masks for persons who have been granted needy person`s or low-income person`s status, persons who are entitled to receive at home or services of a day-care centre, day centre or crisis centre, children and young people who acquire compulsory education, secondary education, vocational secondary education and vocational oriented education programmes, pedagogues of educational establishments (excluding higher vocational education), employees of long-term social care and social rehabilitation institution.

⁹⁹ Cabinet Regulation No. 942 Procedures for Granting and Financing an Assistant Service in Local Government, High School and College, 2012. Par. 11.¹ Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/id/253781-kartiba-kada-pieskir-un-finanse-asistenta-pakalpojumu-pasvaldiba>.

10 Access to habilitation and rehabilitation

[Article 26 – Habilitation and rehabilitation](#)

10.1 Emergency measures

Before the COVID-19 pandemic, medical and social rehabilitation services were not available to a sufficient extent for persons with disabilities.

In an emergency, no special measures for persons with disabilities are provided to receive habilitation and rehabilitation services. Services are available subject to epidemiological safety rules (for example, face masks, distancing restrictions, gathering restrictions, use of disinfectants).

During the emergency in spring 2020, ambulatory health services were limited, persons with disabilities were subject to these restrictions in the same way as others. During an emergency at the end of 2020 and the beginning of 2021, ambulatory health services are available subject to epidemiological safety rules, but the provision of ambulatory rehabilitation services to the State Social Integration Agency¹⁰⁰ has been suspended.¹⁰¹

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

There is no evidence (publicly available data, information or studies, surveys or reports from NGOs or media reports) on how the emergency has influenced persons with disabilities regarding access to habilitation and rehabilitation support and services during lockdowns and periods of physical distancing.

¹⁰⁰ Social Integration State Agency provides social (also medical rehabilitation) and vocational rehabilitation services for persons with functioning imitations.

¹⁰¹ Social Integration State Agency. Important information for recipients of outpatient services! 27.10.2020. Available at: <https://www.hotelsiva.lv/aktualitates.html>.

11 Access to justice

[Article 13 - Access to justice](#)

11.1 Emergency measures

Chapter III of the *Law on the Management of the Spread of COVID-19 Infection*,¹⁰² regarding special conditions for the operation of the judicial system, state and local government institutions and receipt of their services, provides that persons with disabilities and seniors shall be treated in the same way as other persons. Proceedings shall be conducted in the written process as far as possible. When necessary, oral procedures shall be organised, and epidemiological safety requirements (including videoconferencing) shall be complied with. Extended possibilities have been provided for the circulation of electronic documents. Special legal assistance advice shall be made available by telephone or in writing.¹⁰³ As regards the enforcement of criminal penalties, no special conditions for persons with disabilities are provided. The prisons' attendance and the rights of prisoners specified by law may be limited for some time. The State Probation Service may also replace a face-to-face meeting with a probation client with remote communication.¹⁰⁴

11.2 Impact of COVID-19 crisis

There is no evidence (including from NGOs or legal firms) about the impact of the COVID-19 crisis on access to justice for people with disabilities.

¹⁰² Law on the Management of the Spread of COVID-19 Infection, 2020. Riga: Saeima. Available at: <https://likumi.lv/ta/en/en/id/315278-law-on-the-management-of-the-spread-of-COVID-19-infection>.

¹⁰³ For example - persons who have the status of low-income or needy persons, persons who are fully dependent on the state or local government. Section 3, Paragraph two of the State Ensured Legal Aid Law (Valsts nodrošinātās juridiskās palīdzības likums), 2005. Available at: <https://likumi.lv/ta/en/en/id/104831-state-ensured-legal-aid-law>.

¹⁰⁴ Law on the Management of the Spread of COVID-19 Infection, 2020. Chapter IV Special Provisions for the Execution of Criminal Punishments. Riga: Saeima. Available at: <https://likumi.lv/ta/en/en/id/315278-law-on-the-management-of-the-spread-of-COVID-19-infection>.

12 Access to education

[Article 24 – Education](#)

12.1 Emergency measures

Persons with disability are specified in the *Law on the Management of the Spread of COVID-19 Infection* concerning Cabinet (Government) rights to issue regulations on the procedures by which the service of assistant shall be financed to educatees with a disability within the remote learning process, and the procedures for financing the service of an assistant for the students of higher education institutions and colleges.¹⁰⁵ To persons with a disability also applies section 44, part 4, which provides for the extension of the time limit of evaluation issued by the pedagogical and medical commission¹⁰⁶ and application of the issued opinion during the extended period.

In Cabinet Regulation No. 360 of 2020¹⁰⁷ the term ‘person with a disability’ is not used, but it is noted that the condition of organising training remotely does not apply to special educational institutions and to such special classes of educational institutions in which a special basic education programme is implemented for pupils with a severe mental disorder or multiple severe disabilities, and also to pupils with severe mental disorders¹⁰⁸ of special basic education programmes.¹⁰⁹ Subparagraph 27.1.4. of the Regulations states when general educational institution wholly or partially organises the process for the acquisition of education remotely, educatees who have received the service of an assistant at the educational institution have the right to receive the service of an assistant paid from the State budget for up to 40 hours per week at a general pre-school education institution¹¹⁰ or up to 25 hours per week at the general primary education, basic vocational education, vocational training, general secondary education and vocational secondary education institutions.¹¹¹

¹⁰⁵ Law on the Management of the Spread of COVID-19 Infection, 2020. S.4. Riga: Saeima. Available at: <https://likumi.lv/ta/en/en/id/315278-law-on-the-management-of-the-spread-of-COVID-19-infection>.

¹⁰⁶ State pedagogical medical commission and pedagogical medical commissions of the local governments issue statements on the necessity of special education program for children with acquired or hereditary functional disorders. General Education Law, S.49, S.50, 1999. Riga: Saeima. Available at: <https://likumi.lv/ta/en/en/id/20243-general-education-law>.

¹⁰⁷ Cabinet Regulation No. 360 ‘Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection’, 2020. Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/en/en/id/315304-epidemiological-safety-measures-for-the-containment-of-the-spread-of-COVID-19-infection>.

¹⁰⁸ Educatees who use special education programs may be with and without a disability.

¹⁰⁹ Cabinet Regulation No. 360 ‘Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection’, 2020. Par. 27.1.4 Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/en/en/id/315304-epidemiological-safety-measures-for-the-containment-of-the-spread-of-COVID-19-infection>.

¹¹⁰ Cabinet Regulation No. 360 ‘Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection’, 2020. Par. 27.1 Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/en/en/id/315304-epidemiological-safety-measures-for-the-containment-of-the-spread-of-COVID-19-infection>.

¹¹¹ Cabinet Regulation No. 360 ‘Epidemiological Safety Measures for the Containment of the Spread of COVID-19 Infection’ 2020. Par. 27.2 Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/en/en/id/315304-epidemiological-safety-measures-for-the-containment-of-the-spread-of-COVID-19-infection>.

In general, in education, emergency restrictions (for example, remote training, use of face masks, use of disinfectants, distancing) apply to persons with disabilities in the same way as other persons.

12.2 Impact of the COVID-19 crisis

During the first phase of the COVID-19 pandemic in March 2020, when the emergency was declared,¹¹² on-site training in all educational establishments was interrupted, including in special educational establishments, and training was organised remotely.¹¹³ Because of the specific nature of the implementation of special education programmes, the provision on the organisation of remote training in special education was not adopted in the second emergency (autumn/winter 2020). Studies on how emergency restrictions have affected access to education for persons with disabilities have not been carried out. There is no information from NGOs or media, thus, there is no evidence about the impact of the COVID-19 crisis on education for children and adults with disabilities.

¹¹² Cabinet Order No. 103 'Regarding Declaration of the Emergency Situation', 2020. Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/en/en/id/313191-regarding-declaration-of-the-emergency-situation>.

¹¹³ Cabinet Order No. 103 'Regarding Declaration of the Emergency Situation', 2020. Par. 4.3.1 Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/en/en/id/313191-regarding-declaration-of-the-emergency-situation>.

13 Working and employment

[Article 27 – Work and employment](#)

13.1 Emergency measures

Regarding the employment of persons with disabilities and seniors in an emergency, the same restrictions and support possibilities are imposed on all employees. If possible, work must be done remotely. It is possible for employees of the sectors to whom activity restrictions are related to receiving the idle time benefit.¹¹⁴ During the emergency, the payment of the sick-leave certificate has been amended by paying from the State budget to COVID-19 patients and those who are in quarantine the incapacity for work benefit from the first day, provided that the sick-leave certificate has been submitted between 16 November 2020, and 30 June 2021.¹¹⁵ For the unemployed, the term of the assistance allowance has been extended, new and extended employment support measures have been introduced, including increased access to temporary public employment. More flexible conditions for obtaining unemployed person's status and extended time for temporary work have been laid down temporarily.¹¹⁶

During the first outbreak of COVID-19 in spring 2020, persons who received an old-age or service pension were not entitled to an idle time benefit.¹¹⁷ Following objections from the NGO SUSTENTO,¹¹⁸ the relevant paragraph of Cabinet Regulations was amended, and from 10 April 2020, the persons who received a disability or old-age pension were entitled to an idle time benefit in the same way as other employed persons.¹¹⁹

¹¹⁴ Cabinet Regulation No. 709 'Regulations regarding aid for idle time to taxpayers for the continuation of their activity in the circumstances of the COVID-19 crisis' (Noteikumi par atbalstu par dīkstāvi nodokļu maksātājiem to darbības turpināšanai COVID-19 izraisītās krīzes apstākļos). 2020. Rīga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/id/319073-noteikumi-par-atbalstu-par-dikstavi-nodoklu-maksatajiem-to-darbibas-turpinasanai-COVID-19-izraisitas-krizes-apstaklos>.

¹¹⁵ Ministry of Welfare News. Sick-leave certificates from the State budget paid from the first day to COVID-19 patients or persons in quarantine 10.11.2020. Available at: <https://www.lm.gov.lv/lv/jaunums/COVID-19-pacientiem-vai-karantina-esosajiem-slimibas-lapas-plano-apmaksat-no-valsts-budzeta-jau-no-pirmas-dienas>.

¹¹⁶ Ministry of Welfare. Information about COVID-19. Available at: <https://www.lm.gov.lv/lv/informacija-par-COVID-19>.

¹¹⁷ Cabinet Regulation No. 152 Regulations Regarding the Allowance for Idle Time for the Employees Affected by COVID-19, 2020. P. 10.11. Available at: <https://likumi.lv/ta/en/en/id/313429-Regulations-regarding-the-allowance-for-idle-time-for-the-employees-affected-by-COVID-19>.

¹¹⁸ The Latvian Umbrella Body For Disability Organisations SUSTENTO.

¹¹⁹ Cabinet Regulation No. 205 'Amendments in Cabinet Regulations No 165 of 26.03.2020 'Regulations Regarding the Employers Affected by the Crisis Caused by COVID-19 which are Eligible for the Allowance for Idle Time and Division of the Payment for Late Tax Payments in Instalments or Deferral Thereof for up to Three Years', (Noteikumi Nr. 205 "Grozījumi Ministru kabineta 2020. gada 26. marta noteikumos Nr. 165 "Noteikumi par COVID-19 izraisītās krīzes skartiem darba devējiem, kuri kvalificējas dīkstāves pabalstam un nokavēto nodokļu maksājumu samaksas sadalei termiņos vai atlikšanai uz laiku līdz trim gadiem"), 2020. Rīga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/id/313935-grozijumi-ministru-kabineta-2020-gada-26-marta-noteikumos-nr-165-noteikumi-par-COVID-19-izraisitas-krizes-skartiem-darba-deveji>.

13.2 Impact of the COVID-19 crisis

There is not any evidence (information, statistics, research) about the impact of the COVID-19 crisis on work and employment for people with disabilities.

14 Good practices and recommendations

14.1 Examples of good practice

One example of good practice is the availability of an assistant service available to persons with a disability during the emergency without reducing the average monthly service duration (in hours). For example, to replace the time intended to go to and from work, or time intended for voluntary work or participation in events organised by an NGO, persons with disabilities may use assistant services for leisure, such as walks in the fresh air (described in section 2.1 and 9.2).

The second example is the movement of volunteers 'Stay Home' (described in section 5.1) to deliver at home the food and essential goods for persons who cannot or who are advised not to visit public places such as a shop.

The third example – state financial support for families raising a child with a disability. A lump-sum premium of EUR 150 (one-off payment) to families raising a child with a disability as a help for these families to overcome the crisis (described in section 5.1).

14.2 Recommendations

There are no international recommendations for Latvia. The European Union Agency for Fundamental Rights has reviewed the disability aspect in individual reports,¹²⁰ but no recommendations are provided.

The Latvian Ombudsman has repeatedly pointed to measures that limited the equal right of persons with disabilities to receive support or have worsened the situation of persons with disabilities and seniors in the emergency situations announced due to the COVID-19 pandemic.

In March 2020, the Ombudsman sent a letter to the Prime Minister 'On idle time benefits for workers affected by the spread of COVID-19' stating that '[...] workers who are beneficiaries of old age, service and disability pensions at the same time are placed in an unjustifiably different situation depending on the social status of these employees'.¹²¹ The letter welcomed the Cabinet's ability to eliminate discrimination against persons with disabilities by making appropriate amendments and called for

¹²⁰ Coronavirus pandemic in the EU – Fundamental Rights Implications. Country reports Latvia. May 2020. Available at: https://fra.europa.eu/sites/default/files/fra_uploads/lv_report_on_coronavirus_pandemic_may_2020.pdf; June 2020. Available at: https://fra.europa.eu/sites/default/files/fra_uploads/lv_report_on_coronavirus_pandemic_june_2020.pdf; July 2020. Available at: https://fra.europa.eu/sites/default/files/fra_uploads/lv_report_on_coronavirus_pandemic_july_2020.pdf.

¹²¹ Letter by the Ombudsman of the Republic of Latvia of March 27, 2020, No.1-8/17 'On idle time benefits for workers affected by the spread of COVID-19'. Available at: https://www.tiesibsargs.lv/uploads/content/1_8_17_1585563028.pdf.

non-discrimination against employees receiving an old-age and service pension at the same time.¹²² The Ombudsman's proposal has been taken into account.¹²³

In June 2020 the Ombudsman sent a letter to the Saeima calling for the improvement of the provisions of the *Law on Unemployment Insurance*, providing for fair conditions regarding the payment of unemployment assistance benefit also to persons with disabilities. In order to reduce the negative impact of the emergency due to the spread of COVID-19 on population welfare, new Regulations were approved by Saeima, which provided for the continued receipt of unemployment benefit of EUR 180 for a further period of four months after the end of this period, but persons with disabilities who received a disability pension were not entitled to such support.¹²⁴ The Ombudsman's proposal has not been taken into account.

In January 2020, the Ombudsman sent a letter to the Prime Minister asking to update the issue on the necessary improvements in the work of the Ministry of Welfare regarding the obligation to control the quality of social services in all long-term social care institutions, taking into account the high number of morbidity and deaths in long-term social care centres. The Ombudsman considered that the Ministry of Welfare 'has not taken all the necessary steps to prevent the mass morbidity and deaths of clients and employees from infections caused by COVID-19 in long-term social care and social rehabilitation institutions', and that due to inefficient cooperation between the Ministry of Welfare and local governments 'the rights of persons to health and life are being violated.' The Ombudsman also criticised long-term social care institutions, which did not turn to support timely and even denied its inability to provide clients with adequate care. At the same time, the Ombudsman invited the Latvian Association of Local and Regional Governments to regularly compile and provide the national government with updated information on the difficulties encountered by local governments, providing long-term care in institutions, in order to find a solution to address the critical situation in the social care sector.¹²⁵

Saeima Social and Employment Matters Committee has also viewed the situation in the state social care centres.¹²⁶ The Committee decided 'to write a letter to the Prime

¹²² The Ombudsman of the Republic of Latvia. News. Idle time benefit shall also be paid to employees who receive old-age and service pensions. 30.03.2020. Available at: <https://www.tiesibsargs.lv/news/lv/dikstaves-pabalsts-jamaksa-ari-darba-nemejiem-kas-ir-vecuma-un-izdienas-pensijas-sanemeji>.

¹²³ Cabinet Regulation No. 205 'Amendments in Cabinet Regulations No 165 of 26.03.2020 'Regulations Regarding the Employers Affected by the Crisis Caused by COVID-19 which are Eligible for the Allowance for Idle Time and Division of the Payment for Late Tax Payments in Instalments or Deferral Thereof for up to Three Years', 2020. Riga: Cabinet of Ministers. Available at: <https://likumi.lv/ta/id/313935-grozijumi-ministru-kabineta-2020-gada-26-marta-noteikumos-nr-165-noteikumi-par-COVID-19-izraisitas-krizes-skartiem-darba-deveji>.

¹²⁴ The Ombudsman of the Republic of Latvia. News. No unemployment assistance benefit to unemployed receiving disability pension. 16.06.2020. Available at: <https://www.tiesibsargs.lv/news/lv/bezdarbniekiem-invaliditates-pensiju-sanemejiem-valsts-atbalsts-bezdarbnieka-palidzibas-pabalsts-iet-secen>.

¹²⁵ The Ombudsman of the Republic of Latvia. News. Failure of the Ministry of Welfare and local governments leads to life threats for people staying at social care centres. 15.01.2021. Available at: <https://www.tiesibsargs.lv/news/lv/labklajibas-ministrijas-un-pasvaldibu-neizdariba-noved-pie-dzivibas-apdraudejuma-cilvekiem-kuri-uzturas-socialas-aprupes-centros>.

¹²⁶ 13th Saeima of the Republic of Latvia. Committees meetings. Social and Employment Matters Committee. Available at: <https://titania.saeima.lv/livs/saeimasnotikumi.nsf/0/9AE1AE4F6263ECC2C22586550036D31D?OpenDocument>.

Minister with a call to establish a study group for the evaluation of the work of the Ministry of Welfare – whether all possible efforts have been made to protect residents and employees of social care centres from falling ill with COVID-19, and in improving the current situation'.¹²⁷ On 22 January 2021, the Prime Minister calls on the State Audit Office to inspect the Ministry's action to limit COVID-19.¹²⁸

Following the first outbreak of COVID-19, within the state research programme 'COVID-19 mitigation' it was planned to implement ten projects in three thematic areas by the end of 2020. The studies' results are not publicly available at the beginning of February 2021; therefore, no recommendations are available.

14.3 Other relevant evidence

There is no other evidence relating to the impact of the COVID-19 crisis on people with disabilities.

¹²⁷ Social and Employment Matters Committee. Minutes of the meeting of 12 January 2021 No. 1 Available at: [http://titania.saeima.lv/livs/saeimasnotikumi.nsf/0/9ae1ae4f6263ecc2c22586550036d31d/\\$FILE/PR_2021_01_12_SDLK.pdf](http://titania.saeima.lv/livs/saeimasnotikumi.nsf/0/9ae1ae4f6263ecc2c22586550036d31d/$FILE/PR_2021_01_12_SDLK.pdf).

¹²⁸ TVNET.lv Prime Minister calls for the State Audit Office to inspect action by ministry managed by Minister Petraviča to limit COVID-19. 22.01.2021. Available at: <https://www.tvnet.lv/7162493/karins-aicina-valsts-kontroli-veikt-parbaudi-par-petravicas-parvalditas-ministrijas-ricibu-COVID-19-ierobezosanai>.

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