



Scientific Committee

An Overview of Disability

Employment Resources in Europe

FIPHFP - EHESP

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The FIPHFP's Scientific Committee would like to express their gratitude to Caroline Mauvignier, head of research and innovation at the FIPHFP, for her support and dedication in producing this book.

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An Overview of Disability Employment Resources in Europe

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Foreword

The French law on equal rights and opportunities, dated 11 February, 2005, explicitly mentions the participation and citizenship of people with disabilities, and was a turning point for disability policy in France. It prioritizes employment and particularly inclusion in an ordinary work environment.

President Emmanuel Macron made disability a priority focus of his five-year mandate. Through the goals announced on 20 September, 2017 during the meeting of the Interministerial Committee for Disability (CIH), the government committed to taking the individual needs of people with disabilities into account in order to find collective solutions.

The CIH led to an action plan aimed at supporting the strategy to transform today's society into a more inclusive one. It provided the opportunity to lay out the major focuses of a proactive policy. There are several goals to be reached: facilitate hiring and job retention for people with disabilities in the public and private sector; provide better support and a sense of security in the transition from education to employment; give employers a fresh perspective on the law requiring the hiring of people with disabilities and transform it into a driver for more humane, socially-responsible and efficient public administration and businesses; evaluate the supported employment facility.

The European Disability Employment Week enables France to change perspectives about disabilities in all employment fields. Since 2014, this initiative has been extended to a European scale with the DESC¹ Project for equal opportunities and career path security for young people with disabilities in Europe. It is funded by the European Commission. This project helps widen access and boost job retention for young Europeans with disabilities. It is an important date in the calendar, as it provides a comparative look at the various supported employment practices in the different European countries.

The Fund for the Integration of People with disabilities in the Civil Service (FIPHFP) and EHESP School of Public Health wanted to publish a document based on the many substantiated, in-depth comparative studies on employment practices for people with disabilities in Europe.

I welcome this initiative, which aims to highlight this research to render it accessible to all.

I have no doubt that this work will be useful to all those who work to create support solutions to improve access to work, returning to work and job retention for people with disabilities, making them more efficient. It will also enable public and private sector employers to use European examples to implement best practices and thereby foster the inclusion of people with disabilities in an ordinary environment.

*Minister of State for Disabled People,
attached to the Prime Minister*

¹ DESC: Disability Equality Security Careers

Introduction

On 1 January, 2017, the population of the European Union² was estimated at 511.8 million inhabitants by Eurostat. One European citizen out of six has a disability — that is almost 80 million people.

Whereas the Member States are each primarily responsible for taking measures concerning disability, the EU provides a framework and drives a momentum that helps each country progress further. The European Commission supports the Academic Network of European Disability (ANED³), which provides analyses of the situation, policies and data in Member States.

The last two decades have seen a vast network of research correspondents dedicated to better understanding the policies and facilities that provide assistance to people with disabilities. Several comparative studies have been conducted on the statuses, compensation subsidies and policies implemented, in particular in the field of employment.

These studies were, for the most part, presented to “expert” audiences at symposiums of a scientific standing, more precisely, as raw results of statistical surveys that were conducted simultaneously in different countries. The EHESP School of Public Health has a significant volume of reliable information as a result of these studies, and which has not been systematically processed, so that it can be made accessible to as many people concerned by the topic as possible.

The Fonds pour l’insertion des personnes handicapées dans la fonction publique⁴ and the EHESP came to this conclusion together, with the shared ambition of including the production of this general public publication in their new agreement⁵.

The purpose of this publication is to highlight the comparative research conducted on disability employment practices in Europe, and make it readable, accessible and useful to the people concerned.

It is written for public sector employers, as well as large private sector companies that have operations in several European countries. Employer organisations, unions, nonprofits and public authorities⁶ are naturally the target audience of this work, given their high level of involvement and their need to maintain a dynamic approach. More generally, students of social or political sciences will find useful material to further their knowledge and provide clarity.

The book strives to answer simple questions in a pragmatic, and sometimes operational, manner: *An Overview of Disability Employment Resources in Europe*.

The structure of the book takes an educational approach, starting with the general aspects — international recommendations and European interpretations — to the specific, such as the types of practices. Through questions of “how” and “why”, of particular interest are the mechanisms of recognizing disability and the tools provided by the public policies for people with disabilities and employers.

² EUROSTAT

³ The Academic Network of European Disability experts

⁴ Fund for the Integration of People with Disabilities in the Public Sector (France)- FIPHFP

⁵ Agreement renewed on 9 May, 2017 for the period 2017-2019

⁶ Public/private funding, perceptions of disability, employment practices, education, agreements, jurisdiction of local authorities, etc

In order to ensure it is readable, the book is restricted in terms of chronology and geography to the European area. The evolution of the various comparative statistical data covers the period from 2002 to 2016⁷. In terms of the countries studied, the core of the work concerns seven representatives of the major types of model that were identified at the European level: Germany, France, Ireland, the Netherlands, the United Kingdom, Slovakia and Sweden.

In addition, illustrative examples of practices came from other countries, including Finland and Portugal.

Based on the comparative analysis of results in terms of employment rates, the conclusion suggests further study on the developments underway and the conditions likely to foster inclusion of people with disabilities.



⁷ 2002 and 2016 Eurostat surveys, which contain the only reliable data using the same definition of disability

Terminological precision

The first statistical studies on disability employment in European countries date to 1996. Since then, researchers have tried to streamline their data collection methods. Two European instruments that refer to different definitions of disability are regularly used: the European Union Labour Force Survey (LFS⁸) and European Union Statistics on Income and Living Conditions (EU-SILC⁹ 2008 to 2016).

In both of these surveys and those carried out at state level there are different terminologies used to define the people concerned:

- persons with difficulty carrying out basic activities;
- persons restricted in terms of work;
- persons with a serious or moderate employment disability;
- persons with a moderate or severe disability;
- persons with functional limitations;
- persons with limited working capacities.

In order to produce a homogenous text that reads coherently, the generic term “person/people with disability/disabilities” has been chosen. The tables and figures will include definitions specific to each of the surveys. Readers are invited to further their grasp of these concepts in Appendix 1.

⁸ European Labour Force Survey (see. Appendix 1)

⁹ European Union Survey of Income and Living Conditions (see Appendix 1)

International ethical, political and methodological orientations¹⁰

Different international standards¹¹ converge to provide recommendations for the adoption and periodical review of a national policy for the training, professional integration and employment of people with disabilities.

It is generally accepted that the aim of these policies is to create the conditions necessary for people with disabilities to play an active role in their integration or reintegration in society.

A definition of disability, from the dual perspective of the consequences of a disability and the environment in which the person develops, and five major principles provide the basis for international institutions' recommendations. These principles are equal rights and opportunities; the concept of appropriate action and reasonable accommodation; prioritizing the use of common law services; involving intermediary social institutions and the coordination of sector-specific policies and stakeholders.

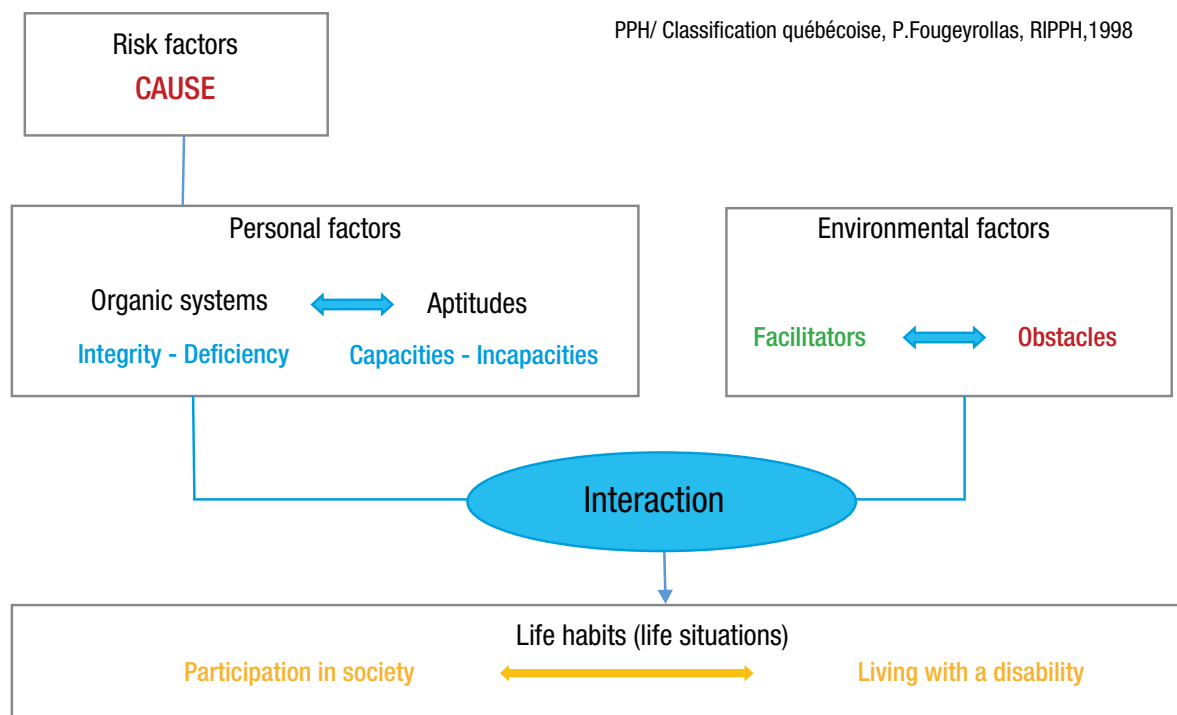
A definition of disability that includes the person concerned and their environment

At the international level, disability is defined by the interaction between people that have impairments and the behavioural and environmental barriers that prevent their full and effective participation in society based on equality with others.

People with disabilities are people that have long-term physical, mental, intellectual or sensory impairments and whose interaction with various barriers can prevent their full and effective integration in the working population.

¹⁰ This chapter incorporates and combines information from: the United Nations Convention on the Rights of Persons with Disabilities (CRPD); Convention 159; Recommendation 168 and the ILO code of practice "Managing Disability in the Workplace"; the study "*L'emploi et la formation des personnes handicapées dans les différents pays européens*" produced by ARPEJEH, a French nonprofit that helps young people and students find employment through training; and no. 122-123 of the être-Handicap review: GUIDE «EUROPE & HANDICAP»

¹¹ United Nations Convention on the Rights of Persons with Disabilities (CRPD); ILO Convention 159 and Recommendation 168



The argument for a methodological approach to the principle of equal rights and opportunities

This means recognising that, based on equality with others, people with disabilities have the right to work and especially to the possibility of earning a living while performing a job that was freely chosen or accepted in an open labour market and in a working environment that fosters inclusion and is accessible to people with disabilities.

This equal right to access to employment actually means respecting the principle of equal opportunities between workers with disabilities and workers in general. The following issues will be focused on:

- equal opportunities and treatment for people with disabilities of all categories in the public, semi-state and private sectors, and in both rural and urban areas;
- prohibition of discrimination based on disability in all areas related to employment of every kind; in particular recruitment, hiring and employment conditions;
- access, without discrimination and based on equality with others, to basic professional training, both workplace and in-service;
- accommodating positions to part-time hours and other adjustments tailored to the capacities of the various people with disabilities who cannot at present and may not ever be able to hold a full-time position;
- enabling people with disabilities to acquire recognised professional experience on the general labour market;
- possibilities of working independently, enterprising mindset, cooperative organisation and setting up a business.

Affirmative or specific measures to speed up or ensure the effective equal treatment of workers with disabilities and others are generally necessary. This raises the matter of their discriminatory aspect in relation to other workers.

The international authorities recommend that states should not consider them as such, once they are designed to compensate for the functional consequences of the disability.

Appropriate actions and reasonable accommodation: how “national standards” are written

Appropriate actions are legislative, regulatory measures and proactive action plans that aim to create possibilities for workers with disabilities to access and retain employment. They also address adaptations in the workplace, adjustment of tasks, tools and equipment and work organization.

They can also include appropriate assistance from the public authorities responsible for:

- furthering progress in the field of protected employment for people with disabilities who cannot access employment on the labour market, and prepare those who can for a job in normal conditions;
- encouraging the setting up, by people with disabilities and for them, of production workshops (small-scale industry, cooperative or other, potentially accessible to all workers) and their development;
- providing partial tax relief or exemption from any other internal charges for employers who employ people with disabilities.

“Reasonable accommodation” refers to the necessary and appropriate modifications and adjustments that do not entail a disproportionate or unfair burden, depending on the needs of a given situation, to achieve equal treatment and access to employment for people with disabilities.

It falls to the competent administrative authorities to establish the criteria that determine reasonable accommodation in accordance with the legislation and practices in the country concerned.

The recommendation to a periodically review of professional integration and employment policies for people with disabilities provides an opportunity, depending on the prevailing conditions in the economy and the business in question, to review the benchmarks for reasonable arrangements and accommodation and thereby ensure the standard progresses gradually in that country.

Towards an access to common law services

Globally speaking, the fight to prevent discrimination and “ghettoization” implies that people with disabilities should have full access to physical, social, economic and cultural facilities, health services and education, and information and communication in order to fully enjoy all of their human rights and basic freedoms.

Professionally speaking, people with disabilities should have priority, effective access to the technical and vocational guidance programmes, job placement services and vocational training and professional development that are available to the rest of the population. Existing services for workers should, wherever possible and appropriate, be used with the necessary adjustments.

During the development phase for programmes aimed at integrating or reintegrating people with disabilities into working life and society, all types of training should be taken into consideration: basic training, work/study programmes and in-service training.

The competent public authorities are encouraged to take measures to evaluate the professional guidance, vocational training, placement and job retention services and other related services that help people with disabilities obtain and retain a job.

Succeed by involving intermediary social institutions

As greater progress is made by international institutions in standard-setting and the drafting of recommendations to encourage and expand disability employment, the role of the intermediary social institutions is increasingly recognised as a positive factor for success in the policies introduced.

It is therefore advisable that the organisations representing workers and employers should be consulted on the implementation of these policies, including the measures that should be taken to promote cooperation and coordination between the public and private institutions responsible for vocational training and integration.

Representative organisations that include people with disabilities or which represent them should also be consulted.

Going beyond consultation, the employer and worker organisations, together with people with disabilities and their organisations, should be capable of contributing to the drafting of these policies, conducting research and making suggestions to facilitate the adoption of legislative texts in this field.

In all cases where this is possible and appropriate, representatives from the employers', workers' and disability organisations should have seats on councils and committees for the facilities dedicated to disability benefit allocations, qualification and employment. The positive contribution of employer organisations is evident for:

- advising their members on the services that could be provided for people with disabilities;
- cooperating with the state bodies and institutions that support the reintegration of people with disabilities in working life, for example by providing information about working conditions and the requirements pertaining to the positions that people with disabilities occupy;
- advising their members on the adjustments that could be made for people with disabilities in their key tasks or in the requirements pertaining to certain jobs;
- encouraging their members to be aware of the impact that a reorganisation of production methods may have, so that people with disability remain capable of carrying out their work.

Workers' organisations take action to:

- encourage the participation of people with disabilities in discussions on the workplace and on works councils, or any other body representing workers;
- draft guiding principles concerning vocational rehabilitation and the protection of workers who acquired a disability due to illness or injury, occupational or otherwise, and ensure these principles are included in collective agreements, regulations, arbitration judgements or other appropriate instruments;
- provide opinions on equipment adjustments and organisational changes that affect people with disabilities, including task accommodation, work organisation, training and job trials and setting labour standards;
- raise issues concerning the rehabilitation of people with disabilities to work and employment at union meetings and inform their members via publications and colloquiums of the problems and possibilities for vocational rehabilitation and employment for people with disabilities.

The need to coordinate sector-specific policies and stakeholders

To promote the adoption of professional integration and employment policies, international standards encourage the relevant public authorities to adopt and implement themselves this type of policy for their own employees and become model employers in recruiting people with disabilities, equal opportunities for public servants with disabilities and measures that support job retention and help them get back to work.

The active and constant involvement of competent public authorities in driving policy change, governance, monitoring and evaluation ensures success. They have a high level of responsibility. As such, it is recommended that they:

- ensure that the services within the various organisations that employers and people with disabilities refer to are of high quality and provided in due course and in a coordinated manner;
- encourage employers' organisations to provide advice to the employment services and other competent services and cooperate with those services, to ensure their usefulness and efficiency;
- encourage employers' organisations to take part in awareness campaigns on disability and employment, or to sponsor these campaigns;
- facilitate contact between employers' and workers' organisations, as well as contact with trade bodies, and service providers and organisations for people with disabilities, with the aim of sharing information on disability management in the workplace;
- include disability issues in the general framework of economic and social regulations, taking into account the situation in the country and nationwide practices;
- ensure, in so far as possible, that these policies and the programmes concerning professional integration are coordinated with social and economic development policies and programmes (including scientific research and cutting-edge technologies).

Lastly, making all of society aware of the situation of people with disabilities and promoting equal opportunities in employment is an essential vector of a professional integration policy. This falls to the competent public authorities, in liaison with representatives of employers, employees and people with disabilities. In the field of employment, this is done through effective public awareness campaigns that aim to:

- foster a receptive attitude with regard to the rights of people with disabilities;
- combat stereotypes and prejudice;
- further progress in how society perceives disability;
- promote the recognition, skills, merits and aptitudes of people with disabilities and their contribution in their work environment and on the job market;
- encourage the sharing of information on examples of effective and successful integration of people with disabilities into employment.

How does Europe interpret international standards?

Key legal steps in the inclusion of employment for people with disabilities

Article 27 of the Convention on the Rights of Persons with Disabilities (CRPD), adopted by the United Nations in December 2006, stipulates:

“States Parties recognize the right of persons with disabilities to work, on an equal basis with others; this includes the right to the opportunity to gain a living by work freely chosen or accepted in a labour market and work environment that is open, inclusive and accessible to persons with disabilities. They shall safeguard and promote the realization of the right to work, including for those who acquire a disability during the course of employment, by taking appropriate steps, including through legislation (...)”.

This article is the main international legal reference for the employment of people with disabilities.

The CRPD, adopted by the EU in 2007, was signed by all Member States. In 2017, it was ratified by all Member States with the exception of Ireland. Only when it has been ratified by all Member States can it become binding in the European Union, and be included in its legal systems.

Nonetheless, it is important to mention that Community action in support of employment of people with disabilities has gradually progressed as EU social policy has grown stronger. As such, the issue has been progressively incorporated in programmes, communication, resolutions, notices, recommendations, directives and treaties over the years:

- In 1974, the first European Action Plan that specifically targeted people with disabilities and their vocational rehabilitation was launched;
- Several specific and universal European programmes that placed people with disabilities as a priority group followed on from that action plan, such as HELIOS¹², HANDINET¹³, EMPLOI¹⁴, HORIZON¹⁵, ADAPT¹⁶, EQUAL¹⁷, TIDE¹⁸, LEONARDO¹⁹, and SOCRATES²⁰.

¹² HELIOS (1988-1991): Community action programme for people with disabilities

¹³ Multilingual computerised European information system for people with disabilities, made up of a database, email system and electronic journal

¹⁴ EMPLOI (1994-1999): European project for employment and human resources on behalf of disadvantaged groups on the labour market

¹⁵ Project under EMPLOI: programme to support the integration of people with disabilities

¹⁶ ADAPT (1994-1999): European initiative to support job retention for employees

¹⁷ EQUAL (2000-2006): European human resources project, designed to ensure the continuity of the EMPLOI and ADAPT initiatives

¹⁸ TIDE (1994-1998): *Telematics for the Integration of the Disabled and Elderly people*, European technology-based initiative for people with disabilities and the elderly

¹⁹ LEONARDO: programme for vocational education and training adopted in 1995, which includes people with disabilities in its objectives

²⁰ SOCRATES: education programme adopted in 1995, which fosters cooperation between educational institutions across all levels. It includes students with disabilities in its objectives

- The Communication on Equality of Opportunity for People with Disabilities was adopted on 30 July, 1996 by the Commission, which presented an analysis of the situation of citizens with disabilities in the European Union. It lays the groundwork for a new Community approach, and anticipates the inclusion of existing national policies for people with disabilities in all European policies, programmes and actions for citizens in general²¹;
- In 1997, the Amsterdam Treaty included, for the first time, a clause for non-discrimination due to disability in Article 13;
- In 2000, Council Directive 2000/78/CE introduced equal treatment and the concept of the right to compensation in employment;
- In 2009, the Lisbon Treaty established the Commission as the institution responsible for ensuring people with disability are accounted for when European policies are drafted and for monitoring the implementation of the CRPD in the European Union.

The value added from the EU

The Member States define their own employment policies in line with European guidelines. In terms of employment of people with disabilities, the most recent stem from the Europe 2020 Strategy and the European Disability Strategy 2010-2020. The first aims for smart, sustainable and inclusive growth to improve employment rates by the development of skills and new jobs.

The second provides a framework to carry out coordinated actions between the EU and the Member States with the aim of removing the obstacles facing people with disabilities. In the field of employment, key measures aim to:

- combat discrimination in the workplace;
- enable greater access to the conventional job market;
- promote lifelong learning.

The EU assists Member States through financial contributions from two sources: intra-Union aid and the structural funds. They are the financial instruments that support the drafting and coordination of European Union policies. For disability employment, the main funding comes from two financial instruments: the PROGRESS programme and the European Social Fund (ESF).

Intra-Union aid is direct aid, managed and delivered by the European Commission. Its purpose is to support European projects in specific sectors.

It functions by issuing calls for proposals. Interested bodies can apply via a contact point in each country to access the aid management agency²².

²¹ L'intégration des personnes handicapées dans les pays de l'Union européenne - Elena Gallo - juin 2000. Université Paris 8

²² Le guide des subventions en France et en Europe à jour de la programmation 2014-2020 – T.Nivière, A.De Pacaharel, Ed: EMS

For employment, this is covered by the PROGRESS²³ programme. With a fund of €561 million for the period 2014-2020, it is the main component of the Programme for Employment and Social Innovation (EaSi). It helps the EU and Member States improve their policies in three areas:

- employment, in particular combating youth unemployment;
- social protection and insertion, and the reduction and prevention of poverty;
- working conditions.

Its objectives are:

- Develop and disseminate high-quality comparative analytical knowledge;
- Facilitate effective and inclusive information-sharing, mutual learning and dialogue;
- Provide financial support to test social and labour market policy innovations;
- Provide organisations with financial support to increase their capacity to develop, promote and support the implementation of EU instruments and policies.

The PROGRESS programme is open to all public and/or private bodies, actors and institutions, and in particular:

- national, regional and local authorities;
- employment services;
- specialist bodies provided for under EU law;
- social partners;
- non-governmental organisations;
- higher education institutions and research institutes.

European structural funds are indirect aid, distributed by the Member States (ESF, ERDF, Cohesion Fund) and adjusted according to the regions in order to reduce disparities in the EU. Following their eligibility criteria, they contribute to moving towards streamlined policies across Member States.

The European Social Fund (ESF) is the main instrument for the promotion of employment and social inclusion. It co-finances the projects that increase employability of people or that adapt human resources to the labour market. It provides assistance to businesses dealing with changes in the economy and supports people who struggle to enter the job market. Between 2014 and 2020, the ESF will allocate €80 billion to the following objectives:

- train citizens and help them find employment;
- promote social inclusion;
- improve education and training;
- improve the quality of public services in Member States.

Its operational programmes run for seven years and are designed by the Member States and approved by the European Commission. Accessibility for people with disability is an important aspect when determining the projects to be financed.

It provides funding for vocational training projects and actions that support disadvantaged jobseekers, including people with disabilities.

The funding is granted to a large range of organisations, public entities, private companies and civil society who provide practical assistance to citizens to help them find a job or keep the job they have.

History of European construction and abbreviations used in the figures

Treaty of Rome (01.01.1958)

- Germany	D
- France	F
- Italy	I
- Luxembourg	L
- Belgium	B
- Netherlands	NL

Treaty of Brussels (01.01.1976)

- Ireland	IRL
- Denmark	DK
- United Kingdom	UK

Treaty of Athens (01.01.1981)

- Greece	GR
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Treaty of Lisbon (01.01.1986)

- Spain	E
- Portugal	P

Treaty of Accession (Corfu, 01.05.1995)

- Austria	A
- Finland	FIN
- Sweden	S

Treaty of Athens (01.05.2004)

- Slovakia	SK
- Cyprus	CY
- Malta	M
- Poland	PL
- Lithuania	LT
- Czech Republic	CZ
- Latvia	LV
- Hungary	H
- Estonia	EST
- Slovenia	SLO

Treaty of Luxembourg (01.01.2007)

- Bulgaria	BG
- Romania	RO

Treaty of Brussels (01.07.2013)

- Croatia	HR
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A variety of standards based on opposing principles

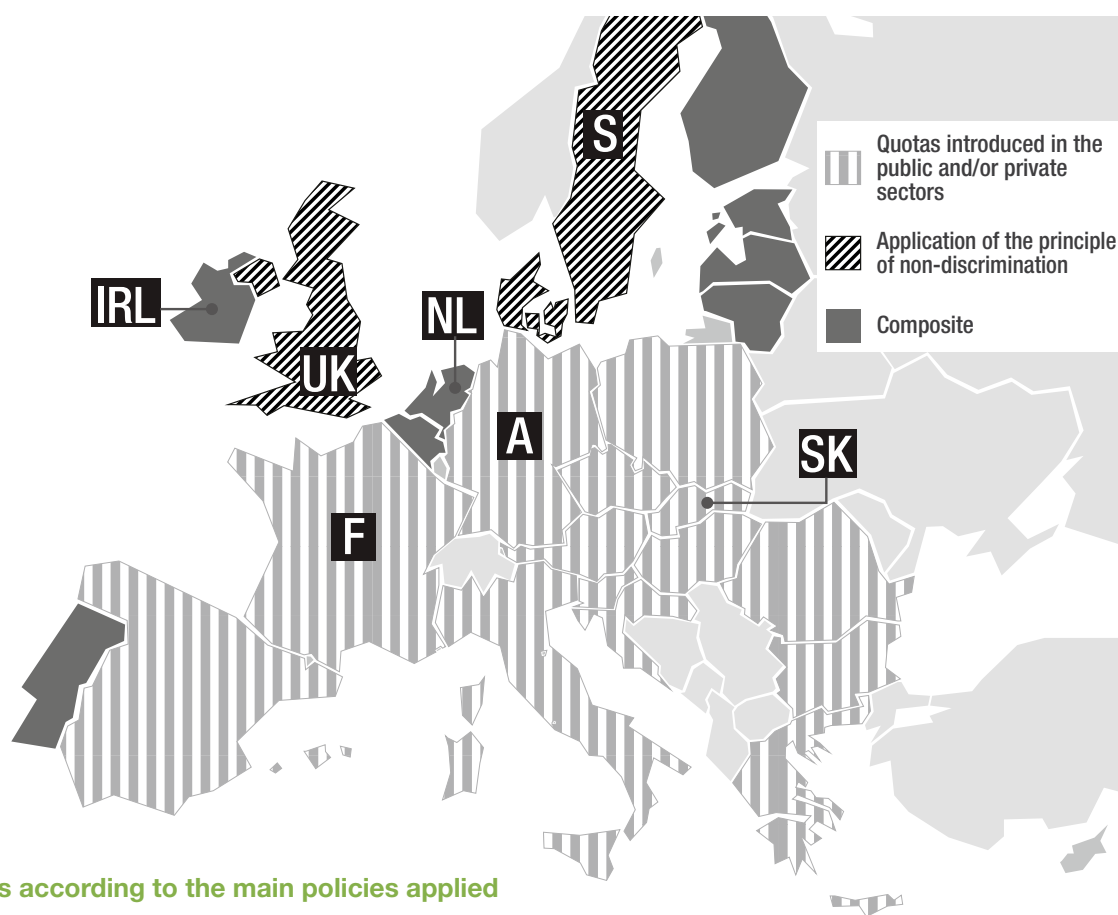
In terms of the policies in place in the Member States, the EU is not streamlined. Overall, three groups of countries make up the European typology.

The first group, the oldest and the majority group, is in favour of legislation that puts pressure on businesses. The countries establish quotas for the public and private sectors. In certain countries, the quotas appear clearly as effective tools for managing the chosen policy for disability employment.

This group contains 16 countries: Germany, France, Italy, Spain, Austria, Luxembourg, Greece, Poland, Croatia, Romania, Bulgaria, Hungary, Slovakia, Cyprus, Slovenia and Czech Republic.

The countries in the second group of three countries are against the quota system. The only obligation consists in the application of the principle of non-discrimination. This group is essentially made up of countries of Anglo-Saxon tradition. In the countries of that group, incentives are preferred to legal obligations. The employer is obliged to make reasonable adjustments to the terms of employment or workstation in order to enable people with disabilities to work in the same conditions as able-bodied people. If a person with a disability believes they are discriminated against, they can request mediation to begin and as a final resort, initiate legal proceedings. In these countries, adapted and protected employment is underdeveloped. The main countries in this group are the United Kingdom, Denmark and Sweden.

Lastly, there is a third group of eight states that enforce little or no quotas and do not officially apply the principle of non-discrimination. However, they do implement incentive measures, such as subsidies when companies hire people with disabilities or accommodate work situations. This group, described here as “composite”, includes Ireland, the Netherlands, Portugal, Belgium, Finland, Estonia, Lithuania, and Malta.



Countries according to the main policies applied

Table1: Key characteristics of the countries in the sample

	Quota policy	Level of sheltered/adapted employment	Disparity between employment rates of workers with disabilities/all workers
GERMANY	YES: Public + Private	Moderate	Low
FRANCE	YES: Public + Private	Moderate	Low
SLOVAKIA	YES: Public + Private	Moderate	Average
IRELAND	YES: Public*	Low	High
UNITED KINGDOM	None	None	Average
NETHERLANDS	None	High	Large
SWEDEN	None	High	Average

*incentivizing

Key

Level of sheltered employment: None = no sheltered/adapted employment

Low = less than 2 positions per 1000 workers

Moderate = between 2 and 4 positions per 1000 workers

High = between 4 and 9 positions per 1000 workers

Disparity in employment rate: The lower the gap, the less discrimination on the job market.

5% < Low ≤ 20%

21% < Average ≤ 30% (EU average = 21.8%)

31% < Large ≤ 55% for moderate disability

The group of seven countries chosen to further study the topic is justified by three reasons. The countries chosen were selected from each of the typology groups. They each accord a different level of importance to adapted/sheltered employment. They present contrasting results on the labour market in terms of discrimination.

Germany, because it is the most populous country in the EU and also because its model has long inspired French policy measures, which are generally further-reaching and applied more strictly. There are some continued differences with France, which are particularly interesting to study.

France, which has highly diversified employment requirements and a private network of specialised local operators together with centralised management of disability employment policy.

Slovakia represents the countries of the former East European Bloc, which remained for many years under the Soviet Union's influence and needed to adapt their policy to European Union standards. This country shows clear concern for its citizens with disabilities.

Ireland, as one of the countries that refuses to enforce obligations on private sector employers, but believes it should be enforced in the public sector. It was greatly supported by financial aid from the European Union to move away from charities dominated by religious congregations and towards the use of common law facilities, in particular in terms of training and assistance in finding employment.

The United Kingdom, because it is the complete opposite model to that in place in Germany and France. It is a form of experiment lab for the systematic implementation of non-discrimination, deinstitutionalisation, "mainstreaming"²⁴, social spending activation policies, a balance between the fight against poverty and the refusal to fall into the "benefit trap"²⁵, and more generally the United Nations Convention on the Rights of Persons with Disabilities (CRPD).

The Netherlands, due to their current attempt to adopt an employment quota, and also for the way the country conducted a U-turn away from very generous welfare²⁶ to systematic "workfare"²⁷. There is frequent use of personalised budgets. This country, where local authorities play a key role in implementing the adopted systems, often by cooperating with the social partners, has maintained nonetheless a significant sheltered employment sector.

Sweden, a much smaller country, was for a long time the "ideal model" for many people with disabilities, with an unrivalled level of accessibility, supportive and inclusive society with no tolerance from discrimination, while remaining pragmatic. One question remained: what impact did the economic crisis have on this progress?

²⁴ Inclusion in the "normal" environment, integration

²⁵ The "benefit trap" is the term used to refer to unemployment or disability benefits that are so high that there is no longer any incentive to look for employment, and the beneficiaries become impoverished and isolated

²⁶ Welfare state

²⁷ Workfare is a concept first introduced in 1968 by James Charles Evers. It refers to social welfare that was introduced in the United States in the 1970s, and where the recipients apt for work had to work in exchange for their benefit

A joint cross-sectoral service to foster employability

Case study - Finland - Anna-Liisa Lämsä

The evaluation and results of projects developed in the past to foster the employment of people with disabilities highlighted the importance of providing personalised support to jobseekers — in order to better respond to their requests and boost their confidence in themselves and in their ability to find and take on a job in the open market. The need for better service coordination also stood out as an essential factor.

Following a pilot phase launched in 2002, which trialled various models of employment support from 2004 to 2015, actors in the field gradually reorganised with the impetus of public employment policies and social policies and in 2015, proposed a cross-sectoral common service aimed at boosting the employability of supported persons. At the local authority level, the joint service brings together the public employment service, the social and health services and rehabilitation services, and if necessary, other local authority services. The local authorities then need to reorganise within the local networks that bring together all actors in order to pool resources and actions. In total, 33 networks have been developed across Finland. Within each network, the partners agree on the service content (types of services according to the needs of supported persons, distribution of funding, etc.), the sharing of human and financial resources, personal data and management of the network.

Persons (with disabilities) are supported in three key phases: first, the support needs for the person are identified; second, an action plan is established to boost the person's employability by availing of all pertinent facilities, and lastly, these facilities are followed-up on and coordinated. The phase where needs are identified and assessed is carried out jointly by representatives of the local authority, public employment service and social and health services. The action plan is regularly reassessed according to the person's needs.

There are various sorts of facilities that can be availed of as part of this support. They include an assessment of capacity to work; vocational training; sheltered employment; work/study programmes; financial aid for supported employment facilities and the adjustment of work conditions. A personalised pathway to employment on the open labour market is constructed with the person concerned.

Setting up these local networks and changes in the organisation aim to tackle different issues: equal opportunities, giving local authorities a bigger role, taking into account the conditions in a given locality and current budget constraints and proposing step-by-step support and ensuring personal data is kept confidential. The deployment of this service brought about a change in working methods of various actors by placing the focus on the supported persons and their needs.

Particularities of institutional approaches

German negotiations to make changes to the legislation

In 2001, the ninth book of the German Social Security Code²⁸, which deals with the rehabilitation and participation of persons with disabilities, replaced previous laws for disability²⁹ and rehabilitation³⁰.

On 23 December, 2016, a new law, known as the Federal Participation Act³¹, was voted on under the title “Act to strengthen the participation and self-determination of people with disabilities³².” It came into effect on 1 January, 2017.

The adoption of this text is seen as one of the most important social reforms in Germany³³. This law is expected to bring about greater possibilities and self-determination for people with disabilities. It is the people themselves who will have a leading role in the decisions concerning their futures. They will determine the services they need among the common law measures available to all. Social aid will be used as a last resort, and not, as was previously the case, as the dominant solution, and most often in specific facilities.

Germany adopted employment obligations in 1917 in support of war veterans. From 1974 to 2000, the employment quota was 6% for employers in the public and private sectors having 16 employees or more.

In 2000, during a challenge with managers’ representatives, the quota was brought down to 5% and the minimum number of employees increased to 20. The challenge concerned a reduction in the number of jobseekers with severe disabilities (SBM) by 50,000 in two years. The figure was almost reached, because 48,500 of them were no longer unemployed.

In particular, the Act provides for:

- requirements for public and private sector employers to employ people with severe disabilities and pay compensation for every obligatory position that is not occupied by a person with a severe disability;
- special protection against dismissal after six months of employment;
- the representation of people with severe disabilities’ interests within companies of more than 120 employees by a committee of people with severe disabilities;
- in relation to the compensation for disadvantages, there is a general rule of 5 days of additional paid leave for people with severe disabilities;
- dispensation from working extra hours if a person with a severe disability requests it;
- the possibility of subcontracting with sheltered employment establishments.

²⁸ *Sozialgesetzbuch IX (SGB IX)*

²⁹ *Schwerbehindertengesetz, 1974*

³⁰ *RehaAnglG*

³¹ *Bundesteilhabegesetz (BTHG)*

³² “Gesetz zur Stärkung der Teilhabe und Selbstbestimmung von Menschen mit Behinderungen”

³³ BMAS (2016). Bundesteilhabegesetz verabschiedet (Federal Participation Act adopted). Bundes Ministerium für Arbeit und Soziales (BMAS), 16 Dezember 2016

To calculate the requirements, a person with a severe disability may account for one to three units if their participation is particularly difficult.

According to Bettine Theissen (2013³⁴), the percentage reached for the whole country was 4.6%. However, this can be misleading in terms of the considerable differences. Large companies have a significantly higher proportion than 5%. Small and medium-sized businesses barely manage half of their quota. The general rule is that the smaller the business, the lower the quota. One German employer in four (roughly 37,000) has no employee with a disability.

Public administrations and companies employed more than a million people with disabilities in 2015. The legal quota of 5% was almost reached.

The amount of compensation per missing employee is proportional to the employment rate reached:

- €125 if the effective employment rate of people with severe disabilities in the company is between 3% and 5%;
- €220 if it is between 2% and 3%;
- €320 if the employment rate is less than 2%.

The average contribution paid by German companies amounts to €2,000.

The taxes are collected by the Länder's integration offices. 16% are paid into the national fund and 4% into the federal employment agency.

The French policy of centralized management of ordinary and specialised bodies

Just like in Germany, the adoption of a quota came from the need to return the many war veterans with disabilities to employment after World War I. The first law to establish a quota was passed in 1924, requiring companies of more than 10 employees to hire 10% of war veterans with disabilities.

In 1987, following the first oil crisis, and to deal with a high unemployment rate of people with disabilities and disregard for quotas — which relied on a single procedure obligation — the law of 10 July brought the quota to 6% in establishments with more than 20 employees, combined with a requirement to produce results. In the event that a company did not meet these requirements, the employers were now obliged to pay a contribution to a development fund for the employment of people with disabilities, the Agefiph, established by the same law.

In 2017, the main legislative reference was the law of 11 February, 2005 for equal rights and opportunities, participation and citizenship of persons with disabilities³⁵.

In the section that deals with employment, it:

- extends and strengthens the mechanism established by the law of 10 July, 1987;
- reaffirms the principles in force, which proved to be somewhat effective:
 - Principle of non-discrimination;
 - Employment requirements monitored annually and combined with a contribution;

³⁴ Theissen, B. (2013). *Warum die Arbeitgeber sich von der Behinderten-Quote freikaufen*. Frankfurter Allgemeine, Beruf & Chance, Donnerstag, 01, Juni 2007

³⁵ Loi n° 2005-102 du 11 février 2005

- extends the same principles to the public sector by the creation of a fund in the public service: the fund for the integration of people with disabilities in the public service³⁶, similar to the Agefiph for the private sector;
- introduces obligatory annual negotiations in businesses concerning the measures to be taken for the professional integration of people with disabilities, based on a report produced by the employer; similarly, it establishes a three-yearly negotiation requirement for the occupational fields in the following areas:
 - access to employment,
 - vocational training,
 - employment,
 - working conditions,
 - job retention³⁷.

Mandatory employment of people with disabilities (OETH³⁸) may be fulfilled as follows:

In the public sector:

- Direct recruitment of workers recognised as having a disability;
- Subcontracting with the sheltered or adapted employment sector, or with self-employed workers that are recognised beneficiaries of the employment requirement up to 50% of the OETH;
- Expenses arising from the professional integration of people with disabilities and severely people with disabilities;
- Expenses arising from adjustments made to workstations in order to retain in employment workers recognised as unfit to carry out their responsibilities;
- Payment of a contribution to the FIPHFP.

In the private sector:

- Direct recruitment of workers recognised as having a disability;
- Subcontracting with the sheltered or adapted employment sector, or with self-employed workers that are recognised beneficiaries of the employment requirement, who may be up to 50% of the OETH;
- Recruiting vocational trainees or people with disabilities for periods of professional observation and adaptation, up to a maximum of 2% of the total workforce;
- Establishing of an occupational, group, company or establishment agreement, setting out an annual or multi-year programme for workers with disabilities, approved by the State via the DIRRECTE³⁹ or the DGEFP⁴⁰;
- Payment of a contribution to the Agefiph.

³⁶ FIPHFP

³⁷ Article 25

³⁸ Mandatory employment of workers with disabilities (OETH), a legal requirement for French companies of more than 20 employees to employ 6% of people with disabilities, in full or part-time positions

³⁹ Regional directorate for businesses, competition, consumer affairs, labour and employment

⁴⁰ Directorate for employment and vocational training (countrywide jurisdiction)

Private sector establishments that must meet the employment requirements represent just 3.3% of all establishments, and 69% of private sector employees.

The amount paid to the Agefiph is proportional to the establishments' workforce and index-linked to the minimum wage⁴¹. In 2016, per missing employee this amounted to:

- €3,868 for companies of 20 to 199 employees,
- €4,835 for companies of 200 to 749 employees,
- €5,802 for companies of more than 750 employees.

If a company has a zero quota for more than three years, the sum is tripled. It then rises to €14,505.

The average contribution paid by French companies amounted to €9,700 in 2016.

The funds managed for the State are collected and redistributed by the Agefiph and the FIPHFP to boost employment for people with disabilities by financing a number of benefits and facilities connected to the various institutions in charge of employment and disability issues.

The two funds contribute greatly to the initiatives for vocational training and qualifications for people with disabilities. Furthermore, they co-finance two major specialised private networks for local areas, the Cap Emploi for job placement and the Sameth⁴² for job retention. These operators, which are unique to France, are established in each département. As of 1 January, 2018, they are grouped under an umbrella organisation: the Opérateurs de Placement Spécialisés⁴³.

Another specific initiative initiated in 2013 involves bringing together the actions of all actors involved in disability employment by the signing of a national, all-party, three-year agreement on objectives and resources for the employment of workers with disabilities⁴⁴.

The partners are encouraged to coordinate their actions focusing on five areas⁴⁵:

- Facilitate the construction and personalised implementation of integration pathways;
- Ensure vocational training resources are available;
- Boost employers' awareness, especially concerning negotiations;
- Better define and implement targeted action for job retention;
- Optimise information exchanges among actors.

⁴¹ Minimum wage: €9.67 per hour in 2016. The contribution is 400, 500 or 600 times the minimum wage, variable according to the size of the business, and 1,500 times the minimum wage if there is a long-term zero quota

⁴² Service d'appui au maintien dans l'emploi des travailleurs handicapés/ Support service for job retention among workers with disabilities

⁴³ OPS. Law no. 2016-1088 of 8 August, 2016 on labour, the modernisation of social dialogue and securing career pathways

⁴⁴ Signed on 27 November, 2013 by the Minister for Public Action and Accounts, the Minister for Labour, the Minister of State for people with disabilities attached to the Prime Minister, Pôle emploi, La Caisse Nationale de Solidarité pour l'Autonomie (CNSA), L'Union Nationale des Missions Locales (UNML), L'Association de gestion du fonds pour l'insertion professionnelle des handicapés (Agefiph), L'Assemblée des Départements de France (ADF), La Caisse Centrale de la Mutualité Sociale Agricole (CCMSA), Le Conseil national Handicap et Emploi des Organismes de placement spécialisés (CHEOPS), Le Fonds pour l'insertion professionnelle des personnes handicapées dans la fonction publique (FIPHFP), Regions of France, La Caisse Nationale d'Assurance maladie des Travailleurs salariés (CNAMTS), Le Régime social des indépendants (RSI)

⁴⁵ <http://www.handipole.org/IMG/pdf/-249.pdf>

The Convention was renewed for the period 2017-2020. Five key goals were outlined⁴⁶:

- facilitate the construction and securing of pathways to access employment and their realisation;
- improve access to vocational training for people with disabilities by making use of all vocational training courses available;
- develop coordinated action that supports job retention for all (employees, self-employed and employers);
- call on public and private sector employers to work together;
- optimise information sharing, interconnect information systems.

In 2011⁴⁷, France introduced a rights defender, whose competencies and jurisdiction were precisely set out in the law. The Defender of Rights incorporates the Ombudsman, the Ombudsman for Children, the National Security Ethics Committee and finally the former state body in charge of combating discrimination and promoting equality, the High Authority Against Discrimination and for the Promotion of Equality (HALDE). The Defender of Rights may handle appeals filed in all of these fields. It is authorised to propose legislative reforms, conduct actions promoting rights and carry out research in all of its fields of expertise. It covers all discrimination motives, direct and indirect, prohibited by state legislation and by the international conventions duly ratified by France.

Slovakia's direct application of the Convention

The legal framework is mainly based on the law outlining the actions of the public employment services and the active measures concerning the labour market⁴⁸.

Priorities for people with disabilities are defined in the National Programme for the Improvement of Living Conditions for People with Disabilities 2014-2020⁴⁹. This programme is structured according to the articles of the United Nations Convention on the Rights of Persons with Disabilities and takes inspiration from the European Disability Strategy 2010-2020.

As for employment, this programme aims to ensure that people with disabilities benefit from active labour market measures so that they can integrate the job market. This specifically means making employment services and their support more accessible and available, as well as encouraging employers to hire workers with disabilities.

With regard to the law on employment services, companies with more than 20 employees (with the exception of protection forces and civil servants working abroad) are obliged to fulfil a quota of 3.2% of people with disabilities.

This quota may be reached in different ways:

- by directly hiring people with disabilities or keeping them in employment;
- by using contract services or purchasing products or services from a sheltered company, workshop or a self-employed person with a disability;

⁴⁶ http://travail.emploi.gouv.fr/IMG/pdf/convention_multipartite2017-2020_

⁴⁷ Loi organique n° 2011-333 du 29 mars 2011

⁴⁸ Act. No.5 / 2004 on Employment Services

⁴⁹ Ondrusova, D, Repková, K & Kešelová, D (2016) *European Semester 2015/2016 country fiche on disability. Slovakia*. Academic Network of European Disability experts (ANED)

- by paying a financial contribution to the State budget, either 0.9% of the average salary for each position not filled by an employee with a disability, or in 2016, €1,045 per missing person with a disability. The contributions collected have fallen significantly since 2010. There are two possible explanations: the number of employers that are subjected to the quota dropped (from 12,506 in 2009 to 10,545 in 2014) and the percentage of employers directly recruiting people with disabilities rose (from 50% in 2009 to 64% in 2014)⁵⁰.

Employers must provide their employees with disabilities with the conditions necessary for them to carry out their work, in particular by positively encouraging skills development through training. There is additional protection for people with disabilities. An employer cannot dismiss an employee with a disability without prior authorisation of the competent local branch of the labour, social affairs and family department.

In 2015, Slovakia strengthened its protection and human rights compliance system, establishing an Ombudsman for Children and for People with Disabilities. These ombudsmen's purpose is to ensure human rights are respected with reference to the international treaties to which Slovakia is party. Advocacy is expected from these ombudsmen, to foster progress in how the public policies and services see disability, for example⁵¹.

The United Nations committee on the rights of persons with disabilities did however point out that it had concerns about the capacity of Slovak legislation to fight against discrimination in the various sectors⁵².

Management through multi-year strategies in Ireland

Catholicism has been a major influence on Ireland's culture. The "charities" played a key role in the past, in particular in the care of people with intellectual disabilities. Before joining the European Union in 1976, Ireland was a relatively poor country. For a long time, the majority of social support structures for people with disabilities — aside from those provided by the religious communities — could not have survived without the technical and financial support of European programmes⁵³.

In a way, Ireland's "forced march" to respect the principles of the European Union in time meant it shifted from institutions where people with disabilities were kept for care and protection to a society that aimed for inclusion, without a specific disability sector developing independently.

The legal framework is provided by the Disability Act of 2005⁵⁴ and the anti-discrimination laws of 1998 and 2004⁵⁵.

In 2017, an incentivising quota of 3% was introduced, but applies only to public sector employers. It is to be gradually raised to 6% by 2024.

The current measures for the employment of people with disabilities follow the National Strategy for Disability, applied between 2013 and 2015⁵⁶. There was a continued effort for the 2015-2024 period as part of an overall strategy⁵⁷ that aimed to facilitate access to employment for the very many Irish people who were affected by the economic crisis of 2008, when unemployment hit 15%.

⁵⁰ Ondrusova, D, Repková, K & Kešelová, D (2016) *European Semester 2015/2016 country fiche on disability. Slovakia*. Academic Network of European Disability experts (ANED)

⁵¹ Ondrusova, D, Repková, K & Kešelová, D (2016) *European Semester 2015/2016 country fiche on disability. Slovakia*. Academic Network of European Disability experts (ANED)

⁵² Ondrusova, D. (2013 updated 2017) *Employment of people with disabilities: Role of the public sector as an employer European perspectives - Several comments on situation in Slovakia*

⁵³ European Social Fund; HELIOS, HORIZON, EQUAL

⁵⁴ *Disability Act 2005*

⁵⁵ *Equality Acts: Employment Equality Acts, Equal Status Acts*

⁵⁶ NDSIG (2013). *National Disability Strategy Implementation Plan 2013-2015*. National Disability Strategy Implementation Group (NDSIG)

⁵⁷ Government of Ireland (2015). *Comprehensive Employment Strategy for People with Disabilities 2015-2024*. Government of Ireland, September 2015

A new comprehensive action plan⁵⁸ for 2016-2020 would be needed to evolve from the activation of unemployment in a recession to its activation during economic growth. The action plan for employment of people with disabilities for 2015-2024 is based on this approach. It sets out six priorities:

- Build skills, capacity and independence;
- Provide bridges and supports into work;
- Make work pay⁵⁹;
- Promote job retention and re-entry to work;
- Provide co-ordinated and seamless support;
- Engage employers to recruit.

Key specificities of the strategy include the following:

- Developing a supported employment programme⁶⁰ with wage subsidy and financial aid for private sector employees to assist with the cost of adaptations or assistive technology;
- Organising competitive exams with accommodations for people with disabilities seeking public sector jobs;
- When a person with a disability finds employment or re-enters employment, social subsidies will be partially maintained while gradually decreasing, and an immediate return to the previous rate if the employment contract is terminated;
- The provision of online assistance to ensure expert guidance and peer support for employers on the matter of employment of people with disabilities;
- The drafting of early intervention guides⁶¹ for job retention and the introduction of job coaches to mental health teams to provide employment support to people with mental health disabilities;
- A programme to train trade union 'disability champions' to support colleagues returning to work following onset of disability.

The United Kingdom in favour of full activation policies

Unlike the French, the German and the Spanish, who have a strong state administration, the British place greater trust in their ability to defend their own rights, assisted by a good lawyer in court.

The notion of obliging an employer to hire a person because they have a certain characteristic was raised after World War 2, with the support of unions (quota of 2%, then 3%). But it was quickly rejected, and especially since British people with disabilities found it humiliating to have to demonstrate their disabilities to access a job.

The British found the principle of non-discrimination closer to their idea of rights than quotas. From there to becoming the champions of deinstitutionalisation, after the Scandinavians, there was just a simple step, easily taken. But where we might have expected a shrinking of the specialised sector, instead it began to disappear. This movement, far from happening gradually — as is the case in France — is occurring in quite a radical fashion.

⁵⁸ *Plan for Jobs, Pathways to Work 2016-2020*

⁵⁹ Ensure that people with disabilities returning to work have higher income than that received during the period of inactivity

⁶⁰ *EmployAbility*

⁶¹ These guides for the public and private sectors facilitate compliance with the goals of state agencies in the working environment. They aim to combat prejudice and offer practical solutions

The natural solution is to use common law programmes for education, healthcare, training, transport, housing and employment. This shift is happening rapidly.

Under the “mainstreaming” principle, the different segments of British society must absorb all differences, which until now required specific treatment, and even specially dedicated places.

The Equality Act of 2006 covers all types of discrimination in a single text: disability, gender, race, religion and beliefs and sexual orientation. It replaces nine previous laws on discrimination⁶².

In 2017, the most recent version of this law, the Equality Act 2010, applies. It was designed to simplify the overall legal provisions and fulfils the principles of the CRPD.

Since then, with a series of reforms in 2008, 2012 and 2016, there is further emphasis on access to employment, insofar as is possible for people with disabilities. The allocation of disability allowances is subject to increasingly strict conditions, whereas situations which enable a person to conserve all or part of their allowance while working are encouraged, so that attempts to enter the labour market are not discouraged, even if they are working for just a few hours.

The latest labour law⁶³ of 2016 is even more restrictive with the support provided to people with disabilities. After having adopted specific programmes⁶⁴ or pilot experiments trialled in a given geographical area, the “Work” programme encompasses all employment support programmes, with greater openness towards people earning disability pensions.

British people with disabilities must now find their place in the ordinary programmes available to anyone struggling with difficulties in the labour market: unskilled young people, disqualified senior workers, single parent families, migrants etc.

The “Work” programme was terminated in 2017, and was the greatest vehicle for the application of activation policies. Throughout the period spanning May 2011 to February 2016, out of a total 93,200 people directed towards obligatory work activities, one out of three identified themselves as having a disability.

People with disabilities were also targeted by the “Work Choice” programme, specialised assistance in accessing the labour market. In the United Kingdom, private job placement operators are paid based on results. Under this programme, higher pay rates were given for placing people with disabilities considered as difficult to integrate. Nonetheless, “Work Choice” was criticised for not fulfilling its promises. The results obtained from September 2015 to March 2016 were as follows: out of 14,000 given guidance, 11,000 started a programme and around 8,000 obtained a job, half of which were in supported employment.

These two programmes were replaced in 2017 by a “Work and Health Programme”, which followed on with the theme of assisting unemployed people with obligatory activities, but placed extra focus on people with disabilities, people with health problems and the long-term unemployed. Budgetary measures were taken to provide specialised support to those suffering from mental health problems and young people with disabilities (€387 million).

According to the most recent data⁶⁵, a 32-point gap separates the employment rate of people with disabilities⁶⁶ and the rest of the working population. This is the discrimination on the labour market that the British authorities are seeking by all means to combat, either by firmly reorienting people whose disability or health status had distanced them from the labour market, or by using state agencies and private sector goodwill (employers and charities).

⁶² Hepple, B. (2010). The New Single Equality Act in Britain. *The Equal Rights Review*, Vol. Five (2010), 11-24

⁶³ *Welfare Reform and Work Act 2016*

⁶⁴ *Access to Work (AtW); New Deal for People with disabilities (NDDP); Pathway to Work, 2003)*

⁶⁵ Emmerson, C., Joyce, R., & Sturrock, D. (2017). Working-age incapacity and disability benefits. In IFS (Ed.) *IFS Green Budget 2017* (177-202), London, Institute for Fiscal Studies (IFS)

⁶⁶ Definition as per the *Equality Act 2010*

In this respect, there is a volunteer scheme that was developed by employers and representatives of people with disabilities⁶⁷, called Disability Confident Employers.

Under this scheme, thousands of employers are committed to fighting the stereotypes surrounding disabilities. They improve understanding of disability; they remove obstacles for people with disabilities or long-term illness; they ensure that people with disabilities have the opportunities to fulfil their potential and realise their goals.

The scheme has three levels:

- **Level 1: Disability Confident Committed.** The employer must agree to the Disability Confident commitments and identify at least one action to carry out that will make a difference for people with disabilities, especially by inclusive recruitment.
- **Level 2: Disability Confident Employer.** Based on a self-assessment questionnaire, the Disability Confident Employers show how they go the extra mile to make sure people with disabilities get a fair chance. They then receive a certificate, materials to promote the action for two years and information on how to become a Disability Confident Leader.
- **Level 3: Disability Confident Leader.** The employer has to act as a champion within their local and business communities. This must be validated from outside their business. The materials for three years are provided.

Decentralised activation in the Netherlands

In 2013, the Netherlands had the highest proportion of people with disabilities in the OECD, either in terms of subjective, self-assessment of disability or officially recognised for disability assistance benefits⁶⁸. The number of people receiving disability benefits is double the number of people receiving unemployment benefits. The number of people receiving disability benefits reached its maximum of around one million in 2003. Following a decade where this number decreased gradually, the number of disability benefits grew for the first time in 2014 by 2,000 recipients until reaching almost 812,000, equal to 9% of the labour force⁶⁹.

In addition, the participation rate of people with disabilities on the labour market is one of the lowest in Europe.

This fact led the government to reform previous legislation dating to the years 2003 and 2004.

On January 1, 2015, the Participation Act⁷⁰ replaced the Labour and Welfare law⁷¹, the law on sheltered employment⁷² and a large portion of the law on disability services for young people with disabilities⁷³.

Simultaneously, the Long-term Healthcare Act⁷⁴ was introduced on 1 January, 2015, replacing the General Law for Special Illness Costs⁷⁵ of 1968, revised in 2003.

⁶⁷ DWP (2017). *Disability Confident: employers that have signed up*. Department for Work and Pensions (DWP), 26 september 2017

⁶⁸ Edzes, A. J. E., Rijnks, R., & van Dijk, J. (2013). Spatial Implications of Using Firm Level Quotas to Employ Low Productive Workers. *Tijdschrift voor Economische en Sociale Geografie*, 104(5), 621-629

⁶⁹ Smits, J. (2016). *European Semester 2015/2016 country fiche on disability. The Netherlands*. Academic Network of European Disability experts (ANED)

⁷⁰ *Participatiewet*

⁷¹ *Wet Werk en Bijstand - WWB*

⁷² *Wet Sociale Werkvoorziening - WSW*

⁷³ *Wet werk en Arbeidsondersteuning Jonggehandicapten - Wajong*

⁷⁴ *Wet LangdurigeZorg - WLZ*

⁷⁵ *Algemene Wet Bijzondere Ziektekosten - AWBZ*

The new legal framework reaffirmed and accentuated the turning point at the beginning of the century taken by the Dutch public bodies. The income protection social policy shifted towards participation in employment, based on the concept that the best social protection is employment.

The main changes concerned:

- The decentralisation introduced into this Act, meaning that municipalities have the freedom to choose the methods they deem suitable for the necessary support tools to improve access to the labour market;
- A restriction applied to sheltered employment, limiting the number of places to 30,000, a third of the places available in 2014;
- The national social employment agreement signed by the government, the national association of employers, unions and the national association of municipalities, which provided for the recruitment of 100,000 people with disabilities in the private sector and 25,000 in the public sector for those whose productivity is below the minimum wage. These objectives should be achieved before 2026, following a schedule that incorporates the gradual application of the law;
- A quota of 5% for people with disabilities hired by companies with at least 25 employees, if the objectives of the agreement are not attained collectively⁷⁶;
- The creation by the municipalities and social partners of regional public companies to put people with disabilities seeking employment in contact with the companies hiring. Another effort was made by the Minister of Social Affairs and Employment to encourage the municipalities in cooperation with special schools for young people with disabilities to establish transition programmes from school to employment. These transition programmes are financed by the European Social Fund;
- Criteria for accessing services were revised and toughened, combined with a reduction in the sums allocated to both non-contributory benefits⁷⁷ and disability benefits.

The Dutch municipalities are responsible for the decentralised execution of the Participation Act. The success of the employment policy for people with disabilities therefore depends on the Netherlands' 408 municipalities.

Swedish investment in accessibility as a means of reducing compensation expenses

In Sweden, the constitutional law of 1974 stipulates that public institutions must protect the right to employment and combat discrimination on the grounds of disability (Art.2)⁷⁸.

Sweden did not apply an employment requirement or the principle of non-discrimination, although it did vote on a law on this matter, just like the other EU countries, following Directive 2000/78.

Swedish society being more community-minded than others, according to public bodies and certain researchers, Swedish policy has no need to use the courts, as is the case with its approach to non-discrimination.

After an experiment conducted in 1987, the concept of personalised support financed by the social security system enabling independent living, became the norm for people with extremely severe disabilities, introduced into two laws in 1993 (LSS and LASS).

⁷⁶ Bronsgeest Deur (2017). The Participation Act and the Job Agreement and Quota Disabled. Bronsgeest Deur, 19 Nov 2014

⁷⁷ All allocations paid as social welfare which do not stem from an insurance regime to which the recipient had previously subscribed

⁷⁸ Committee on the Rights of Persons With Disabilities (2011). Application of the Convention on the Rights of Persons with Disabilities (CRPD). Initial reports submitted by the signatory States in application of Article 35 of the Convention. Sweden. United Nations. Convention on the Rights of Persons with Disabilities, 7 February 2011

The law on support and services for persons with functional disabilities (LSS⁷⁹) solely concerns people with mental disability, autism, serious cerebral injuries, and permanent physical or intellectual disabilities that have a major impact on daily life.

The complementary law on the provision of benefits by a third party (LASS⁸⁰) provides for the State to cover the costs of support that exceeds twenty hours a week. Below this duration, the costs are covered by the municipality (law of 1982 on social welfare). The purpose of this law is to ensure that those covered by the LSS will have permanent access to personal assistance.

These two laws are the reflection of limitless generosity towards the most vulnerable, with no restriction on the volume of the assistance provided. Attributing these resources to a minority means that those with less severe disabilities are provided with a more accessible society, as opposed to benefits in kind or welfare. They should be able to integrate “like everyone else”. Highly developed accessibility in Sweden is the result of this choice. Those with the most severe disabilities, who cannot earn a living via a professional activity, are provided with benefits that allow their living conditions to approach normal. The right to this compensation is in theory considered to have no limit.

This political orientation is reflected in an application strategy 2011-2016, which clarified the positions and laid out tangible goals for the past five years. This strategy provides the following guidelines in labour market policies⁸¹:

- increase the employment rate of people with disabilities whose working capacities are reduced;
- improve the employment and capacity pairing for jobseekers with disabilities that reduce work capacity.

To reach these objectives, Sweden is equipped with plenty of measures capable of adaptation in all situations:

- People with disabilities are priority recipients of all public programmes that facilitate access to employment and job retention;
- The “special support”⁸² system provides for resources to finance any initiative that would break the unemployment cycle, which aim to compensate for reduced work capacity, guarantee productive employment and help people acquire experience and skills which facilitate the transition to unassisted employment;
- Sheltered employment is highly developed in various forms.

In Sweden, employees have legal protection from unfair dismissal, as employers are obliged to cite reasonable motives⁸³. This concerns everyone, including employees with disabilities.

Job cuts is an acceptable motive for dismissal. In this case, employees must be ranked by order of recruitment, where the policy is “last in, first out”. In this ranking, employees with reduced work capacity and who, consequently, were appointed a specific position, have a special protection status. Irrespective of the recruitment order, they have priority to keep their jobs⁸⁴.

Labour law also provides for protection, because the employer is required to negotiate with the employee's union before taking any decision concerning dismissal⁸⁵.

⁷⁹ *Lag om stöd och service till vissa funktionshindrade - 1993:387*

⁸⁰ *Lag om assistansersättning - 1993:389*

⁸¹ Gustaffson, J. (2013). *Disability policy and implementation about employment. Sweden*

⁸² Order (2000: 630: Förordning (2000:630) om särskilda insatser för personer med funktionshinder som medför nedsatt arbetsförmåga

⁸³ *Lag (1982:80) om anställningsskydd* (Law on employment protection, SFS 1982:80)

⁸⁴ Law on employment protection, SFS 1982:80

⁸⁵ *Lag (1976:580) om medbestämmande i arbetslivet*

Access to public programmes

This chapter looks at the ways in which European citizens with disabilities can become eligible for the public programmes outlined in the previous chapter.

The conditions for eligibility for additional social services with monetary compensation are not assessed; only those programmes that specifically pertain to employment will be covered here.

In all EU countries, when beneficiaries of a disability pension or work accident benefits reach or exceed certain thresholds for these services, they are generally eligible for specific programmes for access to employment and disability assistance⁸⁶.

In the sample of countries analysed, there are three distinct conditions of eligibility for accessing employment programmes: the application of a medical assessment, the evaluation of difficulties in accessing employment, and the justification of long-term limits in access to ordinary social activities.

The application of a medical assessment

This is the case in **Germany**, where the Länder-dependent healthcare services are responsible for determining whether a person has a disability based on the principles set out by the Federal Health and Social Affairs Ministry under “medical assessment criteria”. The severity of the disability is given in terms of “degree of disability” based on a scale from 10 to 100 by degrees of 10.

Most of the legal provisions for people with disabilities are aimed at individuals recognised as having a severe disability (*schwerbehinderte Menschen – sbM*).

There are two categories of people with disabilities:

- SbM have a 50% reduced work capacity;
- “Assimilated” persons have a 30% to 50% reduced work capacity.

When a person’s reduction in work capacity ranges between 30% and 50%, and their disability prevents them from finding or keeping a job, they may ask the labour office to be classed with people with a 50% reduced work capacity.

“A person is considered disabled when there is a high probability of the person’s physical ability to function, intellectual abilities, or mental health diverging from a state considered typical for the person’s age for a period of longer than six months, thereby limiting the person’s ability to participate in society.”

In **Slovakia**, a person looking to benefit from public services for a disability is subject to administrative and medical recognition of that disability.

Slovakia also conducts an assessment of loss of work capacity for people over 18 until retirement. As in Germany, there are two categories: a disability with a loss of work capacity of more than 40%, or a severe disability, with a 70% loss of work capacity. This assessment is conducted by a doctor, then the Central Office of Labour, Social Affairs and Family and its local offices determine the person’s eligibility for the various assistance programmes.

⁸⁶ Making reasonable accommodations in workplaces

Evaluating difficulties in access to employment

This approach seeks to determine how likely a person with a disability is to find a job or remain employed based on their abilities and potential in terms of the functional demands of different types of employment. The different countries discussed here draw directly on the definition and international classification described in Chapter 1⁸⁷.

In the Netherlands, the decision depends entirely on the type of work, and is taken by a multidisciplinary team of individuals from the social security administration⁸⁸ or external experts. The decision is based on two types of assessments: one by an insurance doctor (*verzekeringsarts*), and one by a workplace expert (*arbeidsdeskundig*). In practice, these two experts belong to one of the five social insurance administrations.

Disability is assessed in two stages: the insurance doctor evaluates the claimant's remaining capacity by drawing up a "capacity profile", i.e. a description of the types of tasks and activities the claimant can or cannot do; the workplace expert evaluates the degree of disability by comparing what the claimant would earn if they were not sick or able-bodied, and what they can earn given their condition, by entering the capacity profile into a computerised system that determines whether there are at least three accessible types of jobs.

In Sweden, the Social Security Insurance Agency (Försäkringskassan) assesses loss of work capacity from a medical standpoint. Individuals in need are also offered employment guidance, planning, rehabilitation and preparation services. The aim is to determine what the person is able to do and improve their ability to find employment.

There are two types of documents necessary to define disability in Sweden: one based on the functional loss that impacts everyday activities and one based on the impact of these functional losses on work capacity.

The first⁸⁹ is used to designate the disability in general, while the second⁹⁰ – which assesses the loss of work capacity – is used as a reference to understand the difficulties encountered by people with disabilities in the labour market and identify suitable assistance to address these issues.

Ireland uses several definitions depending on the context, such as to establish eligibility for specific services or prohibit discrimination on the basis of a disability. There is no definitive list of health conditions that constitute a disability. Such a list could overlook people with significant yet rare health conditions. There can also be a wide range of differences in how individuals are affected by a certain health condition, based on varying levels of difficulty, from slight to severe. People's environments, which include the benefits to which they are entitled and physical or social obstacles, influence the scale of challenges people must face in their everyday lives.

The Disability Act 2005 sets out the following definition: "*Disability*", in relation to a person, means a substantial restriction in the capacity of the person to carry out a profession, business or occupation in the State or to participate in social or cultural life in the State by reason of an enduring physical, sensory, mental health or intellectual impairment."

Non-discrimination laws use a broader definition and cover both past and present disabilities. "Disability" is defined as:

- the total or partial absence of a person's bodily or mental functions, including the absence of a part of a person's body,

⁸⁷ See page 23

⁸⁸ *Uitvoering Werknemersverzekeringen (UWV)*. This agency manages the social insurance programmes for workers for sick leave (*Ziekwet - ZW*), disability (*WAO*) and unemployment (*Werkloosheidswet - WW*) payments

⁸⁹ *Funktionsnedsättnin*

⁹⁰ *Personer med funktionshinder som medför nedsatt arbetsförmåga*

- the presence in the body of organisms causing, or likely to cause, chronic disease or illness,
- the malfunction, malformation or disfigurement of a part of a person's body,
- a condition or malfunction which results in a person learning differently from a person without the condition or malfunction, or,
- a condition, illness or disease which affects a person's thought processes, perception of reality, emotions or judgement or which results in disturbed behaviour.

To receive financial benefits related to a health problem or disability, claimants must provide medical information on their health and may be asked to undergo a medical exam by doctors from the Department of Employment Affairs and Social Protection who will assess their work capacity or degree of disability.

France's definition of disability is based on the international classification established by the World Health Organization in 2005.

A disability is defined as:

"Any activity limitation or participation restriction experienced by an individual in involvement in life situations due to a substantial long-term or definitive alteration of one or more physical, sensory, intellectual, cognitive or psychological functions, multiple disabilities or incapacitating health issue."

With regard to employment, the French labour code includes a definition of "worker with a disability", which enables access to all employment-related support and programmes.

Official recognition as a worker with a disability (*Reconnaissance de la Qualité de Travailleur Handicapé* – RQTH) is granted by the Commission for rights and autonomy of persons with disabilities (*Commission Départementale pour l'Autonomie des Personnes Handicapées* – CDAPH) based on an evaluation carried out by a multidisciplinary team.

According to the French labour code, *"A worker with a disability is any person whose ability to obtain or maintain employment is reduced following an alteration of one or more physical, sensory, intellectual or psychological functions."*

The assessment by the multidisciplinary team is based on the alteration of one or more physical, sensory, intellectual or psychological functions as well as the repercussions of this alteration on the person's ability to obtain or maintain employment.

The evaluation takes into consideration not only medical data but also employment options if the person is a jobseeker and the type of workstation if the person is employed.

Finally, if these repercussions are proven, the multidisciplinary team and the CDAPH will examine whether they result in a loss in the person's ability to obtain or maintain employment⁹².

The justification of long-term limitations on access to ordinary social activities

In the United Kingdom, disability recognition is not based on objectivised disability criteria, and several texts may be drawn on as references.

A guide published for people with disabilities seeking apprenticeships and the support to which they are entitled because of their disability⁹³ says the following: *"The legal definition of disability is very broad and*

⁹¹ Comprising: doctors, ergotherapists, social workers and experts in employment support, education and social benefit

⁹² Practical guide: *Guide pratique MDPH Partie 1 Fiche n° IV-1 CNSA - DGEFP Version 1 sept/2008*

⁹³ Disability Rights UK (2017). *Into Apprenticeships. The guide for disabled people*

includes specific learning difficulties such as dyslexia, medical conditions, visual or hearing impairments, and mental health conditions such as depression.”

The guide published by the Office for Disability Issues⁹⁴, which covers how a disability is defined according to the Equality Act 2010, does not impose any legal obligation and is not an official statement. The act requires that any adjudicating body⁹⁵ that determines for the purposes of this law that a person is disabled must take into account all aspects of this guide as deemed relevant. The definition of a disability within the framework of this law is a legal definition and only adjudicating bodies can determine whether a person has the right to claim a disability.

The Equality Act 2010 states that *“a person has a disability (...) if he or she has a physical or mental impairment and the impairment has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities.”* “Long-term effects” are defined as having lasted or likely to last at least 12 months.

People with conditions that have recurring or fluctuating effects may be recognised as disabled. Any person who has cancer, HIV infection or multiple sclerosis (MS) is automatically recognised as a person with a disability.

A work capability assessment (WCA) establishes the potential of those seeking the Employment and Support Allowance (ESA) to return to work. This assessment determines how capable the person is to perform a range of physical and cognitive activities. A point system is used to see if they reach the ESA eligibility threshold. If the person is eligible, to receive the ESA they must attend regular interviews with a jobcentre job coach, who is tasked with helping them enter or re-enter the workforce. Otherwise, they must ask for the less generous Jobseeker’s Allowance (JSA), which is also subject to eligibility requirements.

⁹⁴ Office for Disability Issues. ODI (2011). *Equality Act 2010 Guidance. Guidance on matters to be taken into account in determining questions relating to the definition of disability*. Office for Disability Issues. HM Government

⁹⁵ An adjudicating body is (a) a court; (b) a tribunal; (c) a person (other than a court or tribunal) who may decide a claim relating to a contravention of Part 6 (education).
<https://www.legislation.gov.uk/ukpga/2010/15/schedule/1/part/2/crossheading/adjudicating-bodies>

A multidisciplinary team to support civil servants in difficulty and promote well-being at work for all

Case Study – Portugal – Jeronimo Sousa

In March 2012, the municipality of Matosinhos created a multidisciplinary team (Equipa de Prevenção e de Reintegração Profissional) tasked with facilitating the return to employment and retention of civil servants in difficulty and to develop prevention actions to support the inclusion of all civil servants and promote well-being and health at work for all.

Based on the observation that civil servants in difficulty asked for support from various services such as the occupational physician, human resources or social services, this team comprises professions from these different areas whose expertise is complementary: training, workplace medicine, workplace health and safety, psychology, social services, human resources, etc. These professionals work together as a team to perform their duties. The team is coordinated by the human resources director. It may also seek out additional expertise when necessary both internally (staff representatives, unions, employee family members, etc.) and externally (e.g., specialised services).

With regards to providing support services, the team works directly with employees in difficulty. Such employees include victims of multiple workplace accidents and those facing psychological or social problems, who are frequently absent (more than 30 days per year), who are limited in their activities due to a disability or who suffer from an occupational illness.

After an initial information-gathering phase and situational analysis, the team makes suggestions to improve the situation, either by directing the employee to specialised services (healthcare), by playing a mediation role between the employee and various stakeholders such as their manager, co-workers or other municipal services, or by offering solutions to improve the employee's professional situation (skills training, reorganising tasks, reorganising working hours, changing their job position and/or department, etc.). To support the implementation of the chosen solutions, the team may use tools such as medical visits, skills assessments, ergonomic assessments, customised training, support from a manager and teams, etc. A review is carried out every three months. From 2012 to 2015, just over one hundred employees (of a total of around 2,000 employees) received support from the multidisciplinary team.

With regards to prevention, the team develops and implements various types of actions aimed at all employees: awareness workshops, physical activities, prevention campaigns, training on workplace health and safety, etc.

This initiative has been positively viewed by supported employees as well as their managers and co-workers included in the process. Absenteeism has fallen, certain conflicts have been resolved, and supported employees, their managers and their co-workers show improved workplace satisfaction and productivity.

For this approach to succeed, the initiative's promoters emphasise the importance of the commitment from the entire municipality, and especially from leaders, to ensure open dialogue between all stakeholders. The behaviour of the multidisciplinary team is also key: motivation, skills, creativity and open-mindedness with a focus on mediation and awareness raising about disabilities and psychosocial difficulties within the organisation.

The creation of this team addresses the challenges associated with taking disability and diversity into account by tackling both prevention and the issues related to returning to work and retention. At a time when Portugal's municipalities have an ageing workforce and tight budgets that limit recruitment possibilities, the creation of these types of support and prevention practices can be an interesting solution to ensure better inclusion.

In 2013, this initiative received a national award for "promising HR management practices" given by the Institute for Employment and Vocational Training (Instituto do Emprego e Formação Profissional) and the Directorate General for Administration and Public Employment.

Public policy tools available to employers and people with disabilities

This chapter does not attempt to provide an exhaustive list of the schemes, programmes and aids available in the various Member States. It simply looks at those that are specific to each country in terms of the stakeholders, programmes and aids for hiring and retention.

Convergence towards supported employment

Overall, people with disabilities are considered a priority target of general jobseeker support schemes and programmes. There are several types of specialised support depending on the institution's chosen approach and philosophy. However, the term "supported employment" is rather new for many countries.

Certain countries manage their policy using a quota system while others have opted for a non-discrimination approach. **Germany** and **France** have each formed a national agency for general employment support services, such as "offices for integration" (*Integration Ämter*) and "specialised integration services" (*Integrationsfachdienste*) in Germany or "*Cap Emploi*" in France. These offices provide support and placement services for a majority of jobseekers with disabilities (in principle, those facing the most difficulties).

Ireland, the **United Kingdom** and the **Netherlands** have opted for more experimental approaches through multi-year action plans or agreements that are regularly evaluated and updated⁹⁶. Support for people with disabilities facing severe difficulties relies on two systems: private placement agencies selected through calls for tender and supported employment programmes.

The main components of these programmes are;

- an assessment of individual needs;
- a professional assessment and career plan;
- an individual employment plan;
- job search and connectedness to employment;
- workplace support and coaching;
- advice and support for employers;
- follow-up support and guidance for both employers and employees.

The EmployAbility Service in **Ireland** is a supported employment programme with 24 local agencies across the country financed by public funds. Local EmployAbility Service agencies provide "employment assistance and access to a pool of potential employees with varying levels of skills, abilities and training; provide ongoing support for both the employer and employee throughout employment; provide a professional job matching service to help ensure successful recruitment; provide advice and information on additional employment supports⁹⁷." The national EmployAbility Service agencies also offer hiring advice for companies.

⁹⁶ *National Disability Strategy Implementation Plan 2013-2015 in Ireland; Work and Health Programme in the United Kingdom; SZW (2017). Wet banenafspraak en quotum arbeidsbeperkten in the Netherlands* (this law also introduces the possibility of a quota)

⁹⁷ Intreo (2017). EmployAbility Service. Department of Labour Affairs and Social Protection, 12 January 2017

Today, the programme operates through a range of local and community partner organisations throughout the country. It is directly funded by the Department of Labour Affairs and Social Protection⁹⁸. In 2015, 5,659 people with disabilities received EmployAbility Service assistance.

In addition to the public EmployAbility Service programme, there are many volunteer and non-profit services that offer supported employment for people with disabilities and other marginalised groups. There are also several private supported employment programmes provided by private healthcare companies⁹⁹.

In the **United Kingdom** in 2016, 30,000 people with disabilities benefited from a supported employment programme, 14,000 of whom took part in the government-led Workstep programme. The United Kingdom runs the largest supported employment programme in Europe.

At the end of 2016, 5,900 people benefited from the supported employment programme in the **Netherlands**.

In Slovakia and Sweden, local agencies of the national public employment offices are responsible for providing support.

In **Slovakia**, the Central Office of Labour, Social Affairs and Family and its regional administrative offices are responsible for implementing employment measures for people with disabilities. They allocate subsidies to employers and help people with disabilities find employment. Various reports have noted that such job search support is relatively weak and that the local offices should turn to organisations specialised in supporting jobseekers with disabilities through calls for tender. These programmes have not been put in place due to a lack of funding.

The **Swedish** Public Employment Agency is responsible for issues pertaining to disability in the labour market. It has several placement specialists and experts who work to design individually tailored support to overcome the practical consequences of a disability. The Public Employment Agency is also tasked with clarifying the way in which disability affects workers' abilities in certain specific jobs. Additionally, it has a special mission for young people with disabilities¹⁰⁰.

A supported employment pilot programme known as SIUS (*Särskilt introduktions och uppföljningsstöd*), was launched in 1993 and fully deployed in 1998 around the country. The programme offers individualised support for jobseekers with disabilities to help them prepare for starting a new job and provide support during the first six months at work, which can be renewed for another six months if necessary. The aim of SIUS is to offer support prior to starting a new job with assistance from a specialist. Support is gradually reduced based on the person's abilities and stops when the jobseeker is able to carry out the expected tasks without assistance.

Operations are carried out with government support in 32 municipalities. The programme has more than 600 employment agency coaches who assist more than 22,000 people with disabilities every year.

SIUS aims to find employment in the mainstream employment market for 60% of its beneficiaries.

In 2015, there were 6,500 supported jobs¹⁰¹ in **Germany**, where this programme has developed quickly.

⁹⁸ McAnaney, D., & Wynne, R. (2016). *International Good Practice in Vocational Rehabilitation: Lessons for Ireland*. Dublin, National Disability Authority (NDA). Another source claims that EmployAbility Service costed €8.4 million 2014 (Indecon (2016). *Evaluation of EmployAbility (Supported Employment) Service*. Submitted to Department of Social Protection by Indecon International Economic Consultants, February 2016)

⁹⁹ IASE (2017). *How supported employment works*. Irish Association of Supported Employment

¹⁰⁰ Gustafsson, J. (2013). *Disability policy and implementation about employment*. Sweden

¹⁰¹ Gühne, U., & Riedel-Heller S.G. (2015). *Die Arbeitssituation von Menschen mit schweren psychischen Erkrankungen in Deutschland*. Berlin, Gesundheitsstadt Berlin e. V, Deutschen Gesellschaft für Psychiatrie und Psychotherapie, Psychosomatik und Nervenheilkunde (DGPPN), September 2015

After running a pilot programme in 2017, **France** began rolling out its own supported employment programme in 2018¹⁰². Following a decision by the Commission for rights and autonomy of persons with disabilities (CDAPH), the programme provides medical and social support as well as assistance finding employment for people with disabilities. Employers who hire a new employee or already have an employee with a disability in place can receive support from the employee's supported employment case manager. The job is in a regular working environment, and the case manager assists the employer and employee with a disability equally, providing training if necessary, when the person is hired. Operators are private associations selected through calls for projects. In 2018, a budget of €7.5 million, co-funded by the French government, Agefiph and FIPHFP, was allocated to assist 1,500 beneficiaries.

Varied support conditions

Flat-rate premiums granted to companies for hiring people with disabilities, which certain countries restrict to certain disability categories (young people, older workers or people in the most difficulty) or to certain employment contracts (work-study or apprenticeships), are widespread in the European Union.

In addition to these premiums, “subsidised employment” is the main source of support for employers. It is undoubtedly this type of support that shows the greatest number of differences both in terms of conditions and funding methods.

Aid for hiring people with severe disabilities and loss of work capacity can be granted for several years, as is the case in **France**¹⁰³ and **Germany**¹⁰⁴, and is regularly reviewed by the administrative authorities. The aid is paid by compensation funds¹⁰⁵. It varies between €445 and €855 per month in France depending on the severity of the disability, and averages €250 per month in Germany. France offers an alternative for employers subject to mandatory quotas. They can reduce their contribution to Agefiph by the equivalent of one beneficiary unit.

The **German** “integration subsidy” (*Eingliederungszuschuss*) can amount to as much as 70% of remuneration to be taken into account¹⁰⁶. The aid is generally granted for a period of 24 months; however, this period increases to 60 months for SbMs and 96 months for workers over age 55.

For **German** employers who are not subject to employment quotas, the “company employment support subsidy” (*Zuschuss für Arbeitshilfen im Betrieb*) helps companies bring on workers with disabilities through work-study programmes with a view to offering them long-term employment. Up to 100% of the costs associated with these supported training or employment positions may be covered. This service is provided by the employment agency.

In **Slovakia**, aid accounts for between 25% and 40% of labour costs. It is calculated based on the average monthly national salary. The maximum duration of aid varies between 12 and 24 months. It is proportional to the duration of previous unemployment of the person hired. The employer must keep the person employed for at least the same amount of time for which they received aid. This type of aid is national and is funded by the national budget and the European Social Fund¹⁰⁷.

¹⁰² French law no. 2016-1088 of 8 August 2016 regarding labour, modernising labour relations and securing career tracks

¹⁰³ Employment aid for workers with disabilities (*Aide à l'Emploi des Travailleurs Handicapés* – AETH)

¹⁰⁴ Job4000 labour market programme

¹⁰⁵ Agefiph, FIPHFP, Ausgleichfond

¹⁰⁶ Including the employer's general social security contribution

¹⁰⁷ Committee on the Rights of Persons with Disabilities. Consideration of reports submitted by States parties under article 35 of the Convention. Slovakia. Date received: 26 June 2012

In **Ireland**, the Wage Subsidy Scheme (WSS) offers financial assistance to private employers only. The general rate is €5.30 an hour. The employee must work at least 21 hours a week and no more than 39 hours. They must have at least 20% reduced productivity compared to employees with no disability.

In the **Netherlands**, wage subsidies (*Loonkostensubsidie*) are provided by municipalities and UWVs¹⁰⁸ to hire people who cannot reach the minimum legal salary (WML) and can be completed with insurance premium reductions (*premiëkorting*) or “service for low salaries” (*lage-inkomensvoordeel – LIM*), a programme that has been in place since 1 January 2017 that allows an employer to continue to pay an employee with a disability 100% to 125% of the minimum legal salary if they work at least 1,248 hours, up to €2,000 per year and per employee.

Another innovative solution is the “trial placement” (*proefplaatsing*), where an employer does not pay a salary for two to six months, and instead the employee receives unemployment benefits or social aid.

The “wage relief” (*loondispensatie*) for the first six months is another option used by the UWV to encourage employers to hire young people with disabilities. This aid can only be received by a single employer once every five years.

In **Sweden**, subsidised employment (*Lönebidrag*, literally “wage benefits”) takes the form of benefits paid over a short or long period (maximum of four years). The amount of the subsidy depends on two factors: employee wage costs and their work capacity.

Theoretically, subsidised employment can, at most and in the case of an employee with a severely reduced work capacity, completely replace their wages for the first year, 75% the second year, then 50% and 25% until it reaches 0% in the fifth year.

Employers can deduct two times the amount of their social security contributions if they hire someone who was on long-term maternity leave or receiving disability benefits. Furthermore, for an employee receiving disability benefits, the health insurance-related social charges are waived.

In 2017, the “wage subsidy benefits” (*lönebidrag*) totalled €1,761 per month for full-time employees.

Among the types of wage subsidy programmes, one original solution is “development employment”. This is where a tailored position with a public or private employer is created for a person with a disability who needs to develop their work capacity. The workstation must be equipped for re-adaptation, assistance for adaptation, work on a trial basis and orientation. Assistance is provided for 12 months and can be extended in certain circumstances¹⁰⁹.

A new duty: building your own path to employment

In line with societies’ efforts to move towards making citizens more involved in managing their life plans, a specific measure to grant a “personal budget” to people with disabilities has recently been announced in Germany and the Netherlands.

In **Germany**, as part of the “*Jobbudget*”, people with disabilities must obtain a sum that meets all of their needs to participate in social life and that they may use according to their own choices. These budgets must cover all of their needs. The legal foundations for these measures and their implementation is still quite vague and pilot programmes are in the works. Associations for people with disabilities fear that the personal budget may be used to reduce benefits. However, they do see it as a chance to cover the new needs expressed while these budgets were being drawn up in the offered services, especially with regards to outpatient treatment. The personal budget can also be used for professional needs, as well as for rehabilitation medicine.

¹⁰⁸ A *Uitvoeringsinstituut Werknemersverzekeringen* (UWV) is an autonomous administrative authority attached to the Ministry of Social Affairs and Labour (SZW). It is tasked with granting employee social contributions (WW, WAO, WIA, ZW) and other social services (*Toeslagenwet – TW*, *Wajong*, *WAZ*)

¹⁰⁹ Gustafsson, J. (2013). *Disability policy and implementation about employment. Sweden*

The “personalised reintegration budget” (*Persoonsgebonden reïntegratiebudget* – PRB) can be granted directly by municipalities in the **Netherlands** as part of the law on youth¹¹⁰ and the law on social support from 2015¹¹¹. It is granted, for a maximum period of one year, to people with disabilities to allow them to take the initiative of seeking the training, advice, placement or support services they need. In other words, they must pay for services themselves that will help them return to the labour market and find a job. Municipalities are free to set the amount of the personalised budget. Accordingly, this can be a key tool to allow them to meet their obligations in terms of disability support¹¹². However, a maximum of €5,000 has been established¹¹³. People with severe health issues are entitled to a supplement of up to €4,000¹¹⁴.

The results in terms of employment are between 30% and 50% better than with ordinary pathways. However, they are largely a result of how motivated the individuals are¹¹⁵.

The skills to stay in a job

This section is not intended to discuss all of the financial measures taken by Member States to facilitate reclassification, job retraining or additional benefits when going back to work does not allow an individual to receive the same salary as before. They are generally part of a passive expenditure process to pay out disability benefits. There are numerous alternatives to remaining unemployed and in most cases they do not allow for special contract conditions such as those in the “contract for professional rehabilitation in a company” (CRPE) available in France¹¹⁶.

In all countries, with a view to “making reasonable accommodations”, aid is provided to fund the necessary benefits to allow the disabled employee to fulfil their job’s duties in the best possible conditions. Generally speaking, most of this type of aid is aimed at employment access and retention.

This section deals with the skills employers can draw on to prevent their employees with disabilities from having to leave their jobs.

Germany and **France** are very similar in terms of local specialised networks: “specialised integration services” (IFD) in Germany and “retention support services for employees with disabilities” (Sameth) in France.

Sweden has also reinforced its network of professional rehabilitation stakeholders by adding a more important mission to occupational health services (*företagshälsövården*). The government has signed a framework agreement with communes and regional councils to set out the responsibilities of this new role¹¹⁷. The occupational health services are also the main point of contact for treatment and responsible for determining employees’ work capacities. It is financed by the State, municipalities and employers. It works closely with the Social Insurance Agency (*Försäkringskassan*), which plays a key coordinating role in preventing professional

¹¹⁰ *Jeugdwet*

¹¹¹ *WMO-2015: Wet Maatschappelijke Ondersteuning 2015*, (originally from 1 January 2007), enacted on 4 July 2014, entered into force on 1 August 2016

¹¹² Gemeente Eindhoven (2014). *Uitgangspunten Persoonsgebonden budget 2015. Op naar een positief Pgb beleid*. Gemeente Eindhoven, November 2014

¹¹³ Gemeente Zoetermeer (2017). *Beleidsregels re-integratie Participatiewet gemeente Zoetermeer*. *Gemeentebld*, Nr 107740, 29 Juni 2017

¹¹⁴ Gemeente Eindhoven (2014). *Uitgangspunten Persoonsgebonden budget 2015. Op naar een positief Pgb beleid*. Gemeente Eindhoven, November 2014

¹¹⁵ Divosa (2010). *In eigen hand. Persoonsgebonden budgetten bij reïntegratie*. Divosa en Zoetermeer, Meccano en Astri publicatie, Januari 2010

¹¹⁶ The CRPE allows an employee recognised as a disabled worker who has lost the ability to perform their initial position following an illness or accident to return to work. Part of their salary is covered by the French state health insurance (Assurance Maladie, or Mutualité Sociale Agricole for farmers). The contract is a fixed-term contract, renewable once, for a period of six to 18 months

¹¹⁷ Division of tasks and measures, requirements asked of the occupational health services, etc

exclusion because it supervises all of the relevant sectors. It works with employers, which must provide all necessary information to determine employees' needs and possibilities for professional reintegration. It also holds follow-up meetings with employers, occupational physician and employees.

In **France**, Sameth advisors in each administrative *département* work closely with health services, the retirement and occupational health fund, health insurance scheme for agricultural workers, and career guidance and training organisations.

Sameth advisors provide assistance and advice¹¹⁸ to employers and employees throughout the process, depending on their needs:

- Information and advice on the legal framework and the retention process for employees with disabilities;
- Situational analysis and assistance in identifying and creating appropriate solutions;
- Mobilisation of aid and technical, human and financial services to implement the retention solution;
- Follow-up for six months;
- If the employee is not able to stay in their previous position, and if they are a salaried employee in a private company, they can receive support for professional retraining.

The Sameth network is financed by Agefiph and FIPHFP on a pro-rated basis according to total salaried employees from the private and public sectors. The merging of this network with Cap Emploi placement support on 1 January 2018 will make it easier for employers to identify the stakeholders and create synergies and operational opportunities. In this way, the French network of local services resembles that of the German IFD model, which is also responsible for these two activities.

French employers from the private sector can receive specific emergency aid for employee retention that includes:

- a flat-rate subsidy of €2,000 that can be quickly used in situations where the employee with a disability is at risk of not being able to perform their job following the occurrence or worsening of a disability and when no other solutions are available to help them remain in their position;
- an additional payment of €3,000 maximum may be granted, based on the needs to pursue efforts to find a solution or implement an identified solution.

Employees who, following a hospitalisation, must undergo a period of rehabilitation in specialised care centres can turn to the Comète France network. This network brings together 350 professionals (physical therapists, ergonomists, occupational therapists, occupational psychologists and social workers) in 50 centres around the country to proactively plan for helping people go back to work while they are undergoing their rehabilitation. Early intervention helps prevent long periods of time out of the workforce due to health issues and reduces the time between being released from hospital and going back to work.

In 2016, more than 9,500 patients were assisted by the Comète France network; 86% of patients are still employed two years after finalising their professional plans.

The **Netherlands** has developed what is known internationally as “disability management”. The aim is to do everything possible to prevent chronically ill workers or workers with disabilities from missing work and helping them to maintain a good relationship with their employers. The key principle is for professional reintegration activities to take place as soon as possible.

In the Netherlands, the employer and employee share responsibility for developing and implementing a plan for rehabilitation and returning to work. The employee must play an active role in their resettlement process.

¹¹⁸ Sameth services available at www.agefiph.aso.fr

They can be supported by a certified reintegration organisation and/or an occupational physician. During the two years of illness, the employer must cover the wage replacement costs, which are subject to the law on eligibility for permanent invalidity benefit¹¹⁹. If the employer cannot find a solution with regard to available positions, including by making accommodations in terms of the working environment and tasks, they must opt for an external reclassification (a sort of outplacement)¹²⁰.

In the **United Kingdom**, the initiatives launched in 2016 focus on keeping employees in their jobs. This is the case of the Green Paper¹²¹ in 2016. According to the Equality Act 2010, employers are required to make reasonable accommodations for their employees with disabilities to ensure equality in workstations by removing physical and non-physical obstacles or providing additional support. This is the key component to retaining employees with disabilities¹²².

From autumn 2017, the Work Programme and Work Choice Programme were set to be replaced by a new support programme entitled the “Work and Health Programme”¹²³. According to Mirza-Davies and Brown, this new programme, due mainly to budget cuts of 14% in the Ministry responsible for the employment policy on people with disabilities (Department for Work and Pensions – DWP), appears to focus more on keeping people employed and helping them return to work, rather than on access to employment for people who already have a disability.

In **Ireland**, the fourth priority of the new Comprehensive Employment Strategy for People with Disabilities 2015-2024 promises job retention and re-entry to work. The aim is to “develop guidelines to promote intervention in early stages of absence from work, pilot new approaches to integrating work into the recovery model of mental health integration, including job coaches in mental health teams [and] a continued programme to train trade union ‘disability champions’ to support colleagues returning to work following onset of disability”.

Irish employers can receive an “employee retention grant”¹²⁴, which provides funding to identify adaptations and/or training to help an employee remain in their job or retrain for a new position in the company. The grant amounts to 90% of the cost and up to €2,500 to keep the employee in their position and up to a maximum of €12,500 in the event the employee changes positions¹²⁵.

Slovakia offers this type of “subsidy to retain an employee with a disability”¹²⁶ to employers who have at least 25% employees with disabilities. It is part of employers’ social contributions. This subsidy is granted by the Committee on Employment Issues at the Local Office of Labour, Social Affairs and Family. In 2014, 31 people benefited from this programme for a total of €5,500¹²⁷.

¹¹⁹ *Wet Verbetering Poortwachter (WVP)* (known in English as the “Gatekeeper Act”) was enacted on 1 April 2002. It entered into force in January 2003 and stipulated that if an employee could not be placed in another position in their company that the employer must offer them reintegration in another company

¹²⁰ Beemster, T.T., van Velzen, J.M., van Bennekorn, C.A.M., Frings-Dresen, M.H.W., & Reneman, M.F. (2015). Cost-effectiveness of 40-hour versus 100-hour vocational rehabilitation on work participation for workers on sick leave due to subacute or chronic musculoskeletal pain: study protocol for a randomized controlled trial. *Trials*, 2015; 16; 317, 2015 July 28

¹²¹ Commitment to an inclusive society: “Improving Lives: The Work, Health and Disability Green Paper”. After observing that in Great Britain people with disabilities or health issues could not access the social statuses they were entitled to if they had not already, the government proposed a series of measures with a view to improving the situation

¹²² Selvanera, G., & Whippy, K. (2015). *What helps and what gets in the way of employers retaining and developing their employees with disabilities and long-term health conditions?* Business Disability Forum, June 2015

¹²³ Mirza-Davies, J., & Brown, J. (2016). Key statistics on people with disabilities in employment. *Briefing Paper*, Number 7540, House of Commons, 14 December 2016

¹²⁴ *Employee Retention Grant Scheme – ERGr*

¹²⁵ Intreo (2016). Employee Retention Grant. Department of Labour Affairs and Social Protection, 23 February 2016

¹²⁶ *Príspevok na udržanie osoby so zdravotným postihnutím v zamestnaní* – art. 56a

¹²⁷ Committee on the rights of persons with disabilities. List of issues in relation to the initial report of Slovakia – Replies of Slovakia. Received 27 November 2015

Moving towards a work-school transition model for young people with intellectual disabilities

Case Study – Portugal – Jeronimo Sousa

In March 2012, the municipality of Matosinhos created a multidisciplinary team (Equipa de Prevenção e de Reintegração Profissional) tasked with facilitating the return to employment and retention of city employees in difficulty and to develop prevention actions to support the inclusion of all city employees and promote well-being and health at work for all.

Based on the observation that city employees in difficulty asked for support from various services such as the occupational physician, human resources or social services, this team comprises professions from these different areas whose expertise is complementary: training, workplace medicine, workplace health and safety, psychology, social services, human resources, etc. These professionals work together as a team to perform their duties. The team is coordinated by the human resources director. It may also seek out additional expertise when necessary both internally (staff representatives, unions, employee family members, etc.) and externally (e.g., specialised services).

With regards to providing support services, the team works directly with employees in difficulty. Such employees include victims of multiple workplace accidents and those facing psychological or social problems, who are frequently absent (more than 30 days per year), who are limited in their activities due to a disability or who suffer from an occupational illness.

After an initial information-gathering phase and situational analysis, the team makes suggestions to improve the situation, either by directing the employee to specialised services (healthcare), by playing a mediation role between the employee and various stakeholders such as their manager, co-workers or other municipal services, or by offering solutions to improve the employee's professional situation (skills training, reorganising tasks, reorganising working hours, changing their job position and/or department, etc.). To support the implementation of the chosen solutions, the team may use tools such as medical visits, skills assessments, ergonomic assessments, customised training, support from a manager and teams, etc. A review is carried out every three months. From 2012 to 2015, just over one hundred employees (of a total of around 2,000 employees) received support from the multidisciplinary team.

With regards to prevention, the team develops and implements various types of actions aimed at all employees: awareness workshops, physical activities, prevention campaigns, training on workplace health and safety, etc.

This initiative has been positively viewed by supported employees as well as their managers and co-workers included in the process. Absenteeism has fallen, certain conflicts have been resolved, and supported employees, their managers and their co-workers show improved workplace satisfaction and productivity.

For this approach to succeed, the initiative's promoters emphasise the importance of the commitment from the entire municipality, and especially from leaders, to ensure open dialogue between all stakeholders. The behaviour of the multidisciplinary team is also key: motivation, skills, creativity and open-mindedness with a focus on mediation and awareness raising about disabilities and psychosocial difficulties within the organisation.

The creation of this team addresses the challenges associated with taking disability and diversity into account by tackling both prevention and the issues related to returning to work and retention. At a time when Portugal's municipalities have an ageing workforce and tight budgets that limit recruitment possibilities, the creation of these types of support and prevention practices can be an interesting solution to ensure better inclusion.

In 2013, this initiative received a national award for "promising HR management practices" given by the Institute for Employment and Vocational Training (Instituto do Emprego e Formação Profissional) and the Directorate General for Administration and Public Employment.

Sheltered employment in Europe

As discussed in the first two chapters, international standards, and especially the CRPD, fight against the segregated nature of separate specialised services, particularly those in residential establishments. The focus is placed on the individual's impairment rather than on changing society and the environment to provide accessible, inclusive services and assistance on a local level.

With regard to employment, sheltered/adapted employment is broadly impacted by these choices. It is at the heart of the debate between the two models that limit disability policies in Europe. First is the social protection model, put in place in Germany in which disability is determined based on individual incapacities according to medical criteria. This model started with the creation of separate organisations tasked with providing people with disabilities with the best services, protecting them from any infringement of their rights, stigmatisation or discrimination, and ensuring their safety among their peers. The social protection model developed with the support of parents and other stakeholders who were directly concerned through associations.

The disability rights model, which began in the United States in the 1980s, driven by efforts of people with disabilities themselves, started from criticism of the social protection model. The argument was that it was limitations in the environments and social structures that were the main factor of exclusion of people with disabilities. The environment includes all physical, social and societal elements of the situations in which people with disabilities live. In terms of social structures, total access to shared services was the main desired objective. In this model, quota policies and sheltered/adapted employment establishments were considered discriminatory. The main instrument for this model's implementation was legal: civil lawsuits. "The goal here is that by multiplying contacts between the majority without disabilities and people with disabilities, whether through more inclusive schools, neighbourhoods or workplaces, discriminatory attitudes and fears about the unknown and 'other' will gradually disappear, preconceived ideas will diminish and legal intervention will be increasingly unnecessary."¹²⁸

The role of adapted employment in the various countries is a direct result of policies, which tend to draw on a mix of principles from the rights-based and social protection models.

Given the difficulty in ensuring that certain people who are injured or chronically ill, wounded war veterans, or victims of workplace injuries or other accidents have normal access to the labour market, most European countries have opted to group these populations judged to be less productive together in special workshops, at times by mixing them with other individuals excluded due to social adaptation issues. At first glance, this solution appears to be universally accepted. But upon closer inspection, this is not the case.

In societies that lack awareness about the integration of people with disabilities in the labour market, sheltered employment (in a variety of forms) has provided secure employment for anyone able to work, regardless of the severity of their physical or functional disabilities¹²⁹.

¹²⁸ Katharina Heyer et al., "Rights and Quotas: The Americans with Disabilities Act (ADA) comme modèle des droits des personnes handicapées", *Terrains & travaux* 2013/2. Translated from the French

¹²⁹ Velche, D. (2009). Comparative sociology of disabled persons' employment: the example of policies followed in three countries of the European Union. In A. Boujeka (Ed.), *Les politiques de protection des personnes handicapées en Europe et dans le monde. Actes du colloque organisé le 15 mars 2007 à Paris par l'Association Travail et Handicap dans la Recherche publique (ATHAREP) avec le concours du CNRS et de la Ville de Paris* (233-266). Bruxelles: Bruylant & Nemesis, p. 265

Visier, in his research for the International Labour Organization¹³⁰, discusses a typology of four models based on the status of workers with disabilities in these sheltered employment structures: a therapeutic model, which is removed from the general labour market rules; an intermediate model, which enjoys exceptions but does pay wages; a mixed model where two statuses (ordinary and exceptions) coexist, sometimes even within the same establishment; and the wage employment model in force in the country.

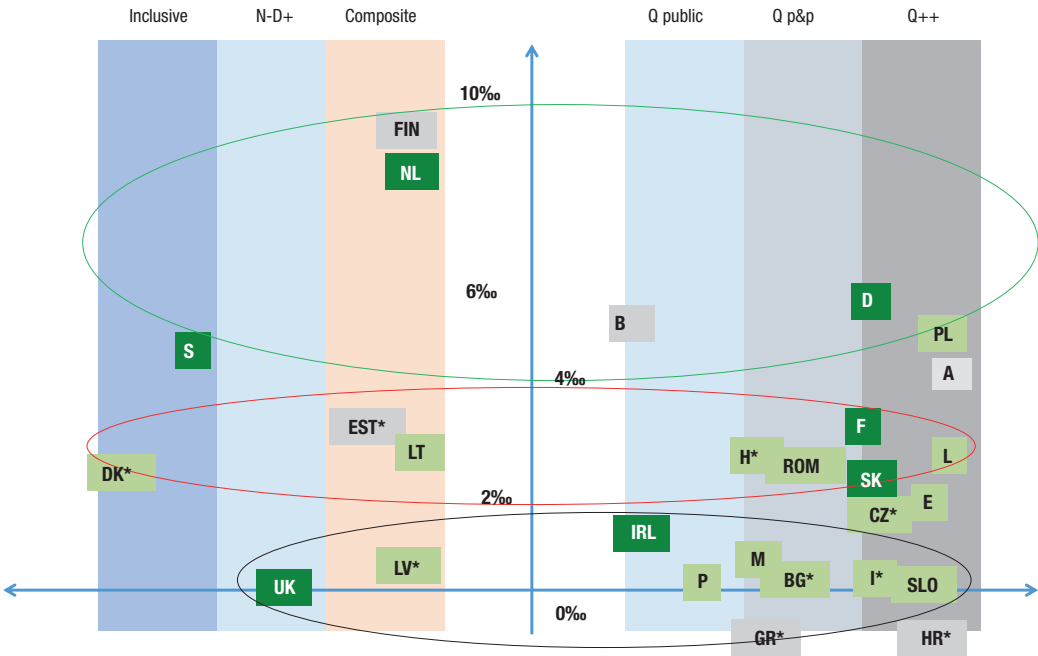
These various possibilities, in addition to considerations regarding the establishment size, managing authorities (private/public, for- or non-profit, state or local authorities, etc.), socio-economic environment (rural or urban), etc. can receive substantial public funding depending on the underlying philosophy governing the disability employment policy.

Governments therefore have a wide range of available options. Of course, history will help considerably in the development, maintaining or avoidance of a particular solution. The longstanding protective approaches of Germany, France, the Netherlands and Sweden, for example, stand in contrast with the modest developments in this sector in southern European countries such as Spain, Portugal and Greece where the necessary resources were not initially available. The mainstreaming ideology is predominant in the United Kingdom and Austria.

In their approach to sheltered employment in Europe, Erik Samoy and Lina Waterplas¹³¹ paid particular attention to the composition of those participating in these programmes. However, without a single European typology that could be used to describe the characteristics of the individuals (impairment? incapacity? level of productiveness?), it is impossible to compare the situations in the different countries.

We have chosen one indicator of socio-political classification: the relative share, in terms of workers, of sheltered employment in each country. The first indication of the role played by sheltered employment in the national disability employment policy is the number of sheltered jobs compared to the number of workers.

Table 2: Sheltered jobs (or social enterprises) per 1,000 workers



¹³⁰ Visier, L. (1998). Op. cit

¹³¹ Samoy, E (in collaboration with Lina Waterplas) (1992). *Sheltered Employment in the European Community*. Leuven: Hoger Instituut voor de Arbeid, KU Leuven.; Samoy, E., & Waterplas, L. (1997). *Sheltered employment in five Member States of the Council of Europe: Austria, Finland, Norway, Sweden and Switzerland*. Strasbourg: Council of Europe Publishing

Interpretation of the figure

The 28 EU countries are shown here on the graph in two major groups depending on the degree of policy application:

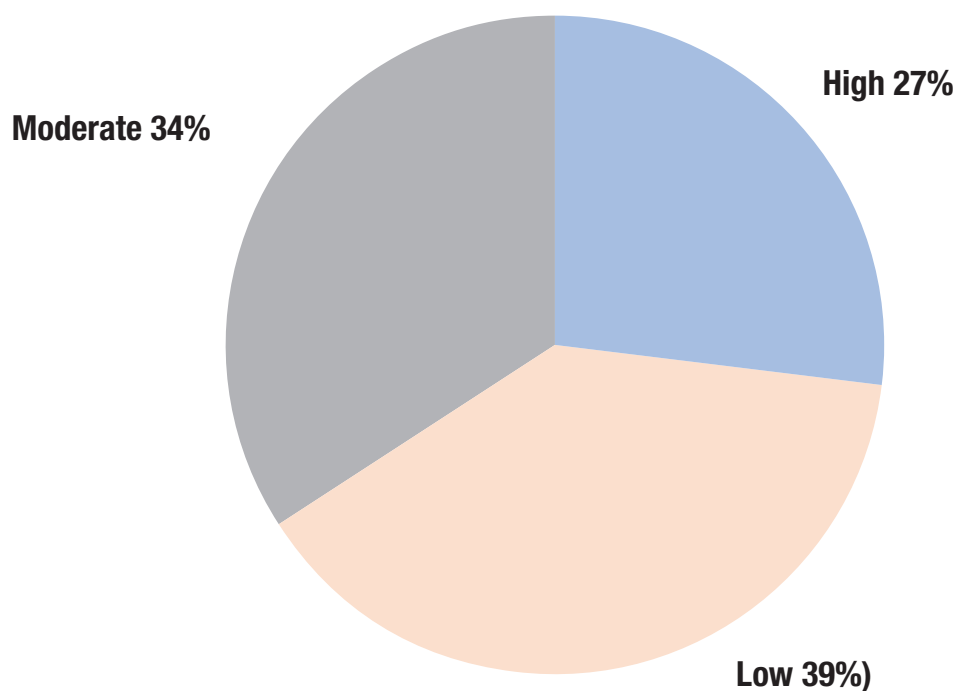
- (1) The countries that use employment quotas (right), according to three types (columns): those that apply this measure in their disability employment policy (column Q++); those that have adopted quotas in their legislation for the public and private sectors, but without allocating the means for enforcement (Qp&p); and those that only use this target for public employers (Q public).
- (2) The countries that use other methods are also shown in three columns: a shift towards an inclusive society through enhanced accessibility (Inclusive); those that focus their policy on non-discrimination (ND+); and those that use a range of measures that cannot be combined into a coherent model (Composite).

In the circles, the same countries are positioned according to the share of sheltered jobs compared to the working population.

From these rankings, three country profiles emerge with regard to their use of sheltered employment:

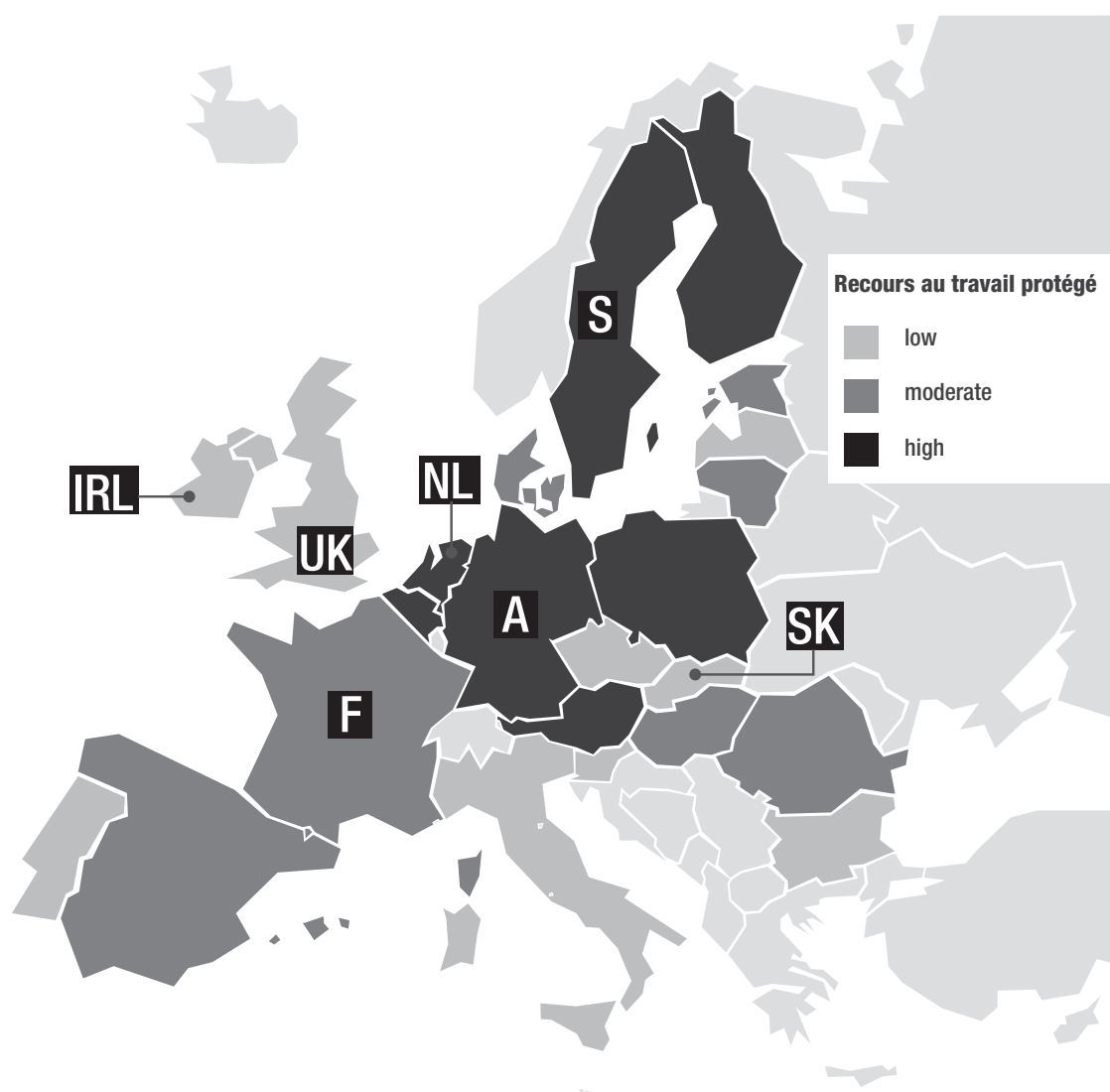
- Low: fewer than two jobs per 1,000 workers
- Moderate: between two and four jobs per 1,000 workers
- High: more than four jobs per 1,000 workers

Distribution of European countries based on the importance of sheltered employment



In 2017, the profiles were fairly balanced, although there was a slight majority of countries with low rates of sheltered employment. This proportion should shift in the coming years towards a model of less reliance on sheltered employment given the recent changes observed in certain countries.

A lack of or very little use of sheltered employment in countries where social spending is governed by contraction and activation policies



There are many small EU countries with little resources and recent disability employment policies in this category. Moreover, countries that have adopted a strong policy of contraction and activation of social spending such as the United Kingdom, Ireland, Italy and Portugal have considerably reduced the number of sheltered jobs.

The **United Kingdom** is something of a laboratory for the systematic application of non-discrimination principles, deinstitutionalisation, mainstreaming, activation and savings achieved through social spending cuts. The deinstitutionalisation of sheltered workplaces was fast and radical, and the United Kingdom has

effectively ended sheltered employment. The last “Remploy¹³²” units have closed since 2011. As discussed in Chapter 5, a very ambitious work support programme took its place.

In Ireland, sheltered employment remains under the responsibility of the Department of Health¹³³. It gives people with disabilities the opportunity to take part in daily work in a sheltered environment where they receive services from support staff. These trainees must produce goods with a commercial value.

The Department finances the following types of sheltered employment¹³⁴:

- Sheltered Work – Commercial, which covers activities remunerated via the sales of goods or services produced; service users may or may not receive allowances or discretionary top-up payments.
- Sheltered Work – ‘Like Work’, where the therapeutic aspect of the work carried out takes priority. The activity takes place in the public sector or in service provider organisations such as catering, maintenance work, landscaping, administration, post room, hospital shops, etc. The service users in this category receive a discretionary top-up payment for their work.
- Sheltered External Work – ‘Like Work’, where employees earn less than minimum wage, takes place in an open employment setting through placement with a specialised operator. Minimum wage or Disability Allowance rules do not apply but the employer normally makes a discretionary top-up payment, either directly to the individual or to the service provider to allocate at its discretion. Examples include specialised operator users working in supermarkets, fast food chains, and so on.

The number of people involved in these three types of work situations ideally should not exceed 4,200 people.

Sheltered employment has been sharply criticised in Ireland as being exploitative. In 2007, certain workers received around €5 a week for full-time work. At that time, there were more than 4,000 people with intellectual disabilities packing products in sheltered workshops. These workers did not enjoy general employment rights. In response, the Irish Congress of Trade Unions argued that workers in sheltered workshops should enjoy employment rights as well¹³⁵.

Moderate usage of quota policies

Among the countries with moderate use of sheltered employment, those who have adopted quota policies are France, Spain, Hungary, Romania and Slovakia.

The use of sheltered employment is one modality offered to employers to partially meet their quota targets. These countries have adopted hybrid solutions using principles from the rights-based and social protection models. Being part of the workforce is considered to be highly important to social integration. It is critical

¹³² Remploy was created by the Disabled Persons (Employment) Act of 1944, which also created an obligation to work. Its aim was to offer training and a job to people registered as severely disabled as part of this law. It would become the main managing organisation of sheltered employment. The sheltered workshops managed by Remploy employed people with a variety of disabilities, mostly physical. Local authorities were also granted the right in 1948 to create sheltered workshops. This right was then extended to NGOs. The number of workshops and employees with disabilities increased until the 1980s. Samoy (1992) reported that in the early 1990s, Remploy had 93 branches employing 8,700 employees. An additional 129 workshops were managed by local authorities and volunteer associations, with 4,267 and 1,200 employees, respectively. Alongside these sheltered workshops, the United Kingdom also had around fifty social cooperatives

¹³³ Health Service Executive (HSE)

¹³⁴ Health Service Executive (2012). *New Directions. Review of HSE Day Services and Implementation Plan 2012-2016. Personal Support Services for Adults with Disabilities*. Working Group Report, Health Service Executive, February 2012. (p124 and +; p142 and +)

¹³⁵ Irish Times (2007). *Sheltered workshops at the centre of exploitation claims*. Monday, 27 August 2007

to be able to meet the needs of people with disabilities who are most removed from the labour market by ensuring they have the possibility to access secure, long-term employment in the sheltered sector. However, pressure on employers must be maintained so that sheltered employment does not become an easy way around their obligations. Accordingly, maintaining a moderate rate of sheltered employment is part of a desire for balance between the ambitions of people with disabilities and those of employers.

France, with a rate of just over three jobs per 1,000 workers, has struck this balance. It participates in mixed systems with two types of sheltered employment: work assistance establishments and departments (établissements ou services d'aide par le travail – ESAT) and adapted businesses (entreprises adaptées – EA) and home work-distribution centres (centres de distribution de travail à domicile – CDTD). Employers who are subject to the employment quota can fulfil up to 50% of their obligation by contracting out to these establishments.

ESATs are medical-social establishments governed by the provisions set out in the social action and family code. They allow people with disabilities to participate in a range of professional activities and provide social, medical and educational support to aid their personal and social development. Any ESAT worker with a disability has the right to receive guaranteed remuneration paid by the establishment, which tracks the part-or full time nature of their work¹³⁶. In 2016, 1,279 ESATs hosted 119,000 disabled workers¹³⁷.

An adapted business or home work-distribution centre is an ordinary company that is subject to the provisions of the labour code, which specifically requires employing at least 80% disabled workers. They may perform a professional activity in conditions that are adapted to their abilities. The specific support proposed by the adapted business or home work-distribution centre encourages disabled workers to achieve their professional plans, allows them to put their skills to use, be promoted and enjoy mobility within the business or in other companies. An adapted business can be a stepping stone to employment in an ordinary company. These type of businesses receive state subsidies¹³⁸.

In 2016, 34,000 workers with disabilities were salaried employees in EAs and CDTDs¹³⁹.

In all, some 153,000 people with disabilities work in sheltered employment in France. The sector is experiencing steady growth, with an average increase of 0.7% to 0.8% per year over the past five years.

In comparison, the number of people with disabilities working in the sheltered sector make up 25% of the 632,000 people with disabilities in private and public companies and organisations subject to employment quotas¹⁴⁰.

In Slovakia, sheltered workshops and workplaces¹⁴¹ are either:

- Workplaces established by legal persons or natural persons, 50% of whose employees are individuals with disabilities who are unable to find employment in the open labour market;
- Workplaces where citizens with disabilities undergo training, and where the conditions of work including the requirements for work performance have been adapted to the state of health of citizens with disabilities.

¹³⁶ <http://travail-emploi.gouv.fr/droit-du-travail/contrats-et-carriere/travailleurs-en-situation-d-handicap/article/les-etablissements-ou-services-d-aide-par-le-travail>

¹³⁷ Source: ASP

¹³⁸ <http://travail-emploi.gouv.fr/emploi/insertion-dans-l-emploi/recrutement-et-handicap/article/handicap-et-emploi-les-entreprises-adaptees-les-centres-de-distribution-de>

¹³⁹ Source: ASP

¹⁴⁰ Chiffres clés Agefiph/FIPHFP 2016 – septembre 2017. <http://Agefiph.asso.fr>

¹⁴¹ A sheltered workplace is a separate entity, a workshop is within a company

The Labour Office recognises the status of sheltered workshops and sheltered workplaces on the basis of a favourable opinion issued by the health protection authority¹⁴².

Following the recommendations of the UN Committee on the Rights of Persons with Disabilities, as part of the Convention on the Rights of Persons with Disabilities (CPRD), Slovakia is currently working to draw up an action plan to modify these sheltered organisations to move towards a more inclusive labour market.

A high rate when the State plays a decisive role in employment and social protection

Whether Germany, the Netherlands, Sweden or Belgium, which are wealthy European countries, or to a lesser extent Poland and Finland, these central European states have strongly pushed, and in certain cases directly managed, employment and social protection policies. This is all the more true when these obligations are laid out in their respective constitutions.

This is the case for **Germany**, with its Bismarck Model¹⁴³, which had, in 2016, 308,000 people with disabilities in sheltered employment, divided into three sectors:

- 30,000 people in the professional training sector;
- 261,700 in the employment sector;
- 17,100 in the occupational sector funded by social security;
- in more than 2,700 establishments.

There are also three workshops for blind people (Blindenwerkstätten) employing 6,500 people with disabilities.

The status of workers with disabilities differs from labour law: they do not receive true wages, but rather often low remuneration for work. To prepare people to work in the production section, the establishments offer adaptation measures that can last up to three months and training measures in the professional training section for a maximum of two years; these training courses are most often financed by the Federal Employment Agency.

It should be noted that contrary to the situation in France, sheltered establishments receive financing from compensation funds (*Ausgleichsfonds*) or penalties collected from companies that have not met their employment quotas.

As discussed in Chapter 3, since 2015, the Netherlands has opted for decentralised activation of social spending. Accordingly, plans are in place to drastically reduce sheltered employment by capping the number of jobs at 30,000, i.e., one third as many as in 2014.

¹⁴² UN Committee on the Rights of Persons with Disabilities (CPRD). Consideration of reports submitted by States parties under article 35 of the Convention. Slovakia. Date received: 26 June 2012

¹⁴³ The German chancellor Otto von Bismarck (1815-1898) became an emblematic figure of social protection by implementing a social protection system for illness (1883), workplace accidents (1884), old age and disability (1889)

Several principles underpin this model:

- protection founded only on work and the capacity of individuals to have rights through their professional activity (insurance system);
- mandatory protection;
- protection based on financial contribution from workers and employers in the form of social contributions;
- contributions which are not proportional to risks – as in a purely insurance-based logic – but rather to wages. This is called “risk socialisation”;
- protection managed by employees and employers.

<http://www.vie-publique.fr>

Achieving this ambitious objective will certainly take a considerable amount of time as a recent report¹⁴⁴ showed that as of 2016 there were still 91,432 people with disabilities in sheltered employment.

Dutch municipalities implement the Wet Sociale Werkvoorziening (WSW), a law regulating social and sheltered workshops for people unable to find an ordinary job due to their physical, psychological and/or mental limitations. Those benefiting from the WSW receive wages that are partly paid with national subsidies and production revenue.

Their activities are diversified: 18% are individual external placements, 20% are group external placements and 62% work within the establishments.

However, it should be noted that the number of employees has fallen considerably (generally below 102,000 beneficiaries from 2008 to 2014, versus 91,432 in 2016).

In **Sweden**, sheltered employment is well developed and takes several forms:

- a network of adapted production workshops managed at the national level by a sort of limited liability company called Samhall-AB, whose sole shareholder is the State;
- sheltered workshops or jobs managed by public organisations, mainly municipalities, for people in difficulty;
- social enterprises open to people experiencing difficulties finding employment, including certain people with disabilities.

Samhall AB is a company owned by the Swedish State. Samhall's efforts focus on people with disabilities whose work capacity is reduced to such a degree that they cannot get another job and whose needs cannot be met through other measures¹⁴⁵, and especially people with intellectual disabilities. However, the 23,000 workers with disabilities¹⁴⁶ employed in approximately 200 locations around the country benefit from common labour law status.

While the figures are not as high as compared to those in countries such as Germany or France, it is surprising that a country with as inclusive a policy as Sweden has such a large proportion of sheltered jobs. A review of the socio-geographical composition of the country points to why this is: in certain areas of the country, unless people work in the fishing or forestry industries, it is difficult to find a job. Samhall supports adapted production work opportunities when other solutions are unavailable.

Only the Public Employment Agency can assign people with disabilities to these sheltered jobs. The relationship between Samhall and the government are ruled by a convention.

Between 2014 and 2015, 1,122 people transitioned from Samhall to other employers in the ordinary labour market, in line with its objective of 5%. This has been possible thanks to subsidised wages. Most of the available jobs are in small private companies. Employees have a one-month probationary period and maintain the right to go back to Samhall for one year.

Sheltered employment in the public sector (Offentligt Skyddat Arbete – OSA) aims to give people with disabilities (around 5,400 people¹⁴⁷) an opportunity to have a job combined with rehabilitation. In the long term, this job should lead them to the ordinary labour market. Priority is given to three groups: people with psychiatric disabilities, people with intellectual or neurological disabilities, and people with multiple disabilities.

¹⁴⁴ Hartevelde, I., Kindt, M., & Flapper, E. (2017). *Wsw-statistiek 2016 Jaarrapport*. Panteia, Zoetermeer, 10 jul 2017

¹⁴⁵ Gustafsson, J. (2013). *Disability policy and implementation about employment. Sweden*

¹⁴⁶ Malmberg, T., & Elmefur, H. (2017). *En analys av processen och förutsättningarna för anställningar hos Samhall AB*. Statskontoret, 2017: 7

¹⁴⁷ Velche, D. (2010). La diversité du travail protégé en Europe et son avenir. *Les Cahiers de l'Actif*, N°404-405, 197-231

Public sheltered employment can be offered by local governments or other public employers, but is unlike competing activities. The target group includes unemployed people with social and medical disabilities or people who, due to long-term and severe mental illness, have never worked or who have long been out of work. Those eligible for this type of employment are covered by an individual contract¹⁴⁸.

Social businesses (a business that aims to support labour market integration) play an important role by offering opportunities for employment, including for people with disabilities with reduced work capacity who have been unable to set up their own business or who have been removed from the labour market. They provide rehabilitation and other support services to people with intellectual disabilities.

The number of social businesses and jobs within them have grown substantially. According to the most recent survey available, which dates to late 2009, there were just over 200, compared to 150 in 2007, employing around 7,000 people (versus 4,000 in 2007).

¹⁴⁸ Gustafsson, J. (2013). *Disability policy and implementation about employment. Sweden*

Conclusion

Following this review of seven countries that are representative of the various disability policies implemented in Europe, and based on the policy frameworks discussed, we have tried to shed light on stakeholders' action to answer the questions of who does what, how, and why.

Policies come in a range of forms and are constantly being updated. This study should be considered as a snapshot at a given moment in time (2017) of a history of ideas and practices that are continually moving forward. Furthermore, as we discussed in Chapter 2, the European Commission is spurring efforts for Member States to align policies, make them more consistent and reduce discrepancies to ensure equal rights and opportunities to the EU's 80 million citizens with disabilities.

Rather than conclude by confirming certainties, we suggest three areas to consider in further detail: a summary of cultural tendencies; an analysis supported by figures of the compared results; and hypotheses about the most favourable situations.

In summary

Can the policies adopted by these seven countries be compared and can a determination be made about which are most favourable to people with disabilities? Can measures be harmonised across the European Union, or can systems at least be brought closer in line to ensure the best possible movement between countries of citizens, who are currently prevented from enjoying this freedom granted to other Europeans due to the disparity in aid and allocation procedures?

The study does not conclude with a strict representative value, but it does show that there are no easy answers to these questions. First, the definitions of people with disabilities are not at all identical from one country to another: sometimes they refer to impacts on daily life, and sometimes to work capacity; some are subject to an administrative procedure (Germany, France), while others need only self-declare and provide a medical certificate (United Kingdom). Meanwhile, it seems that employment does not cover the same reality, and this is obvious in the degree to which part-time work factors in: it is frequent in the United Kingdom and the Netherlands, and not common in France or Germany.

One very important difference is the role the State plays. In countries such as France, Germany and, to a lesser extent, Sweden, citizens are first and foremost "managed by the State", a situation considered unacceptable by the British, Irish and Dutch. As a result, the adoption and application of the law is not carried out in the same way. This also varies based on the level of decentralisation in the country. Moreover, the involvement and efficiency of social partners varies considerably.

Cultural differences are one aspect that is key but more difficult to understand. These differences can be considered a shared philosophy of life that is acquired over the history of a country's people, leading to deeply held values that will not be changed overnight. For example, the British, for whom freedom of action is very dear, are mistrustful of excessive support from the authorities and trust the courts to ensure that laws are upheld, whereas the French and Germans tend to prefer involvement from the State. The Germans are known to respect the rules that are laid out for them, which is not always the case in France.

As a result, these countries have developed different ways to deal with disability issues.

The United Kingdom ensures full compliance with the United Nations Convention on the Rights of Persons with Disabilities, which it considers to be the paragon of systems to adopt to improve the life of its citizens. Based on this criterion, it is the head of the class in the EU; however, this is not the case with regards to results, whether in terms of employment or poverty.

With their employment quotas, Germany and France have better employment rates than the United Kingdom, but they are very behind in terms of rights if we look at accessibility and possibilities for living independently.

This is where the Swedish come out ahead. Sweden has a much higher employment level of people with severe disabilities, while, it should be noted, also dealing with challenges to these advances within a context of a sharp decline in the welfare state.

The Netherlands and Ireland both face difficulties in terms of employment. It could be because both have not yet decided which approach to adopt. However, these two countries often offer original solutions.

Slovakia appears to be modelling its system on those in France and Germany, while increasingly drawing from the CRPD and has obtained significant results in terms of employment.

In figures

We must now look at the results of these policies and the options they imply. The CRPD and Council Directive 2000/78/EC promote inclusion and non-discrimination in all activities and situations to ensure equal rights for all, but discrimination also applies to the collective level, and especially to the access of people with disabilities to the labour market. Despite difficulties related to defining disability from one country to another, Eurostat surveys have made it possible to make a broad comparison of employment rates¹⁴⁹ in each country based on the European average. However, the most accurate indicator is that which compares the employment rates of people with disabilities to that of the population without disabilities. Additionally, this relative indicator tends to eliminate the differences in economic and labour market performance. The following tables show the positioning of different countries in this respect based on the populations declaring a moderate or severe disability¹⁵⁰.

In these figures, the European average is shown on the horizontal axes.

¹⁴⁹ The employment rate is the proportion of people with a job among those of working age (15 to 64 years). The employment rate reflects the capacity of an economy to use its labour resources.

The employment rate of a class of individuals is calculated by dividing the number of individuals of the class with a job by the total number of individuals in the class

¹⁵⁰ See Appendix 1

Table 3: Gross employment rate of people with disabilities: Moderate disability

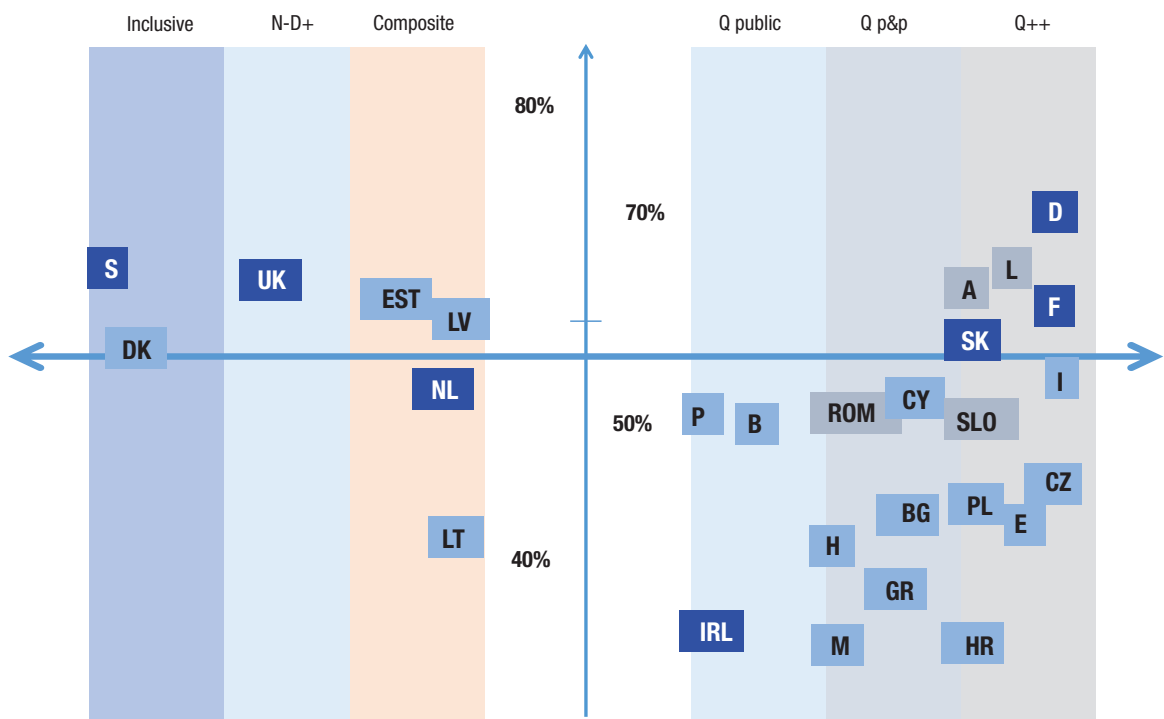


Table 4: Gross employment rate of people with disabilities: Severe disability

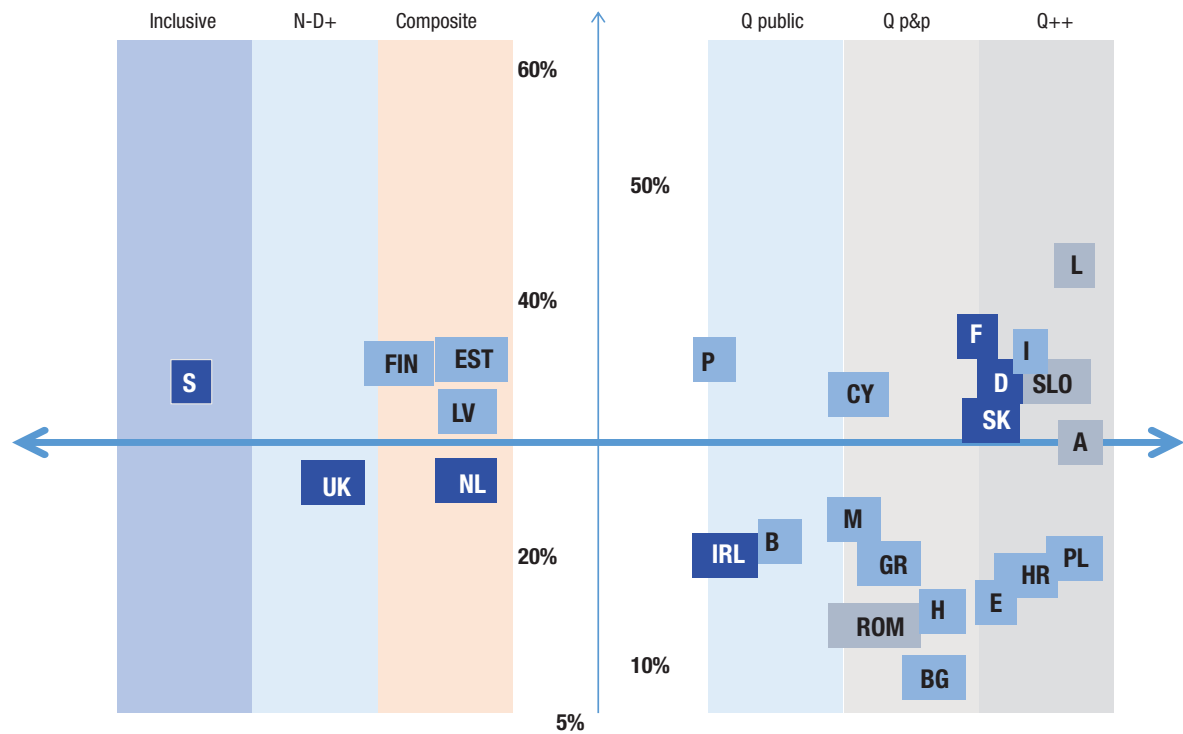


Table 5: Employment rate, relative discrepancy: Moderate disability/non-disabled

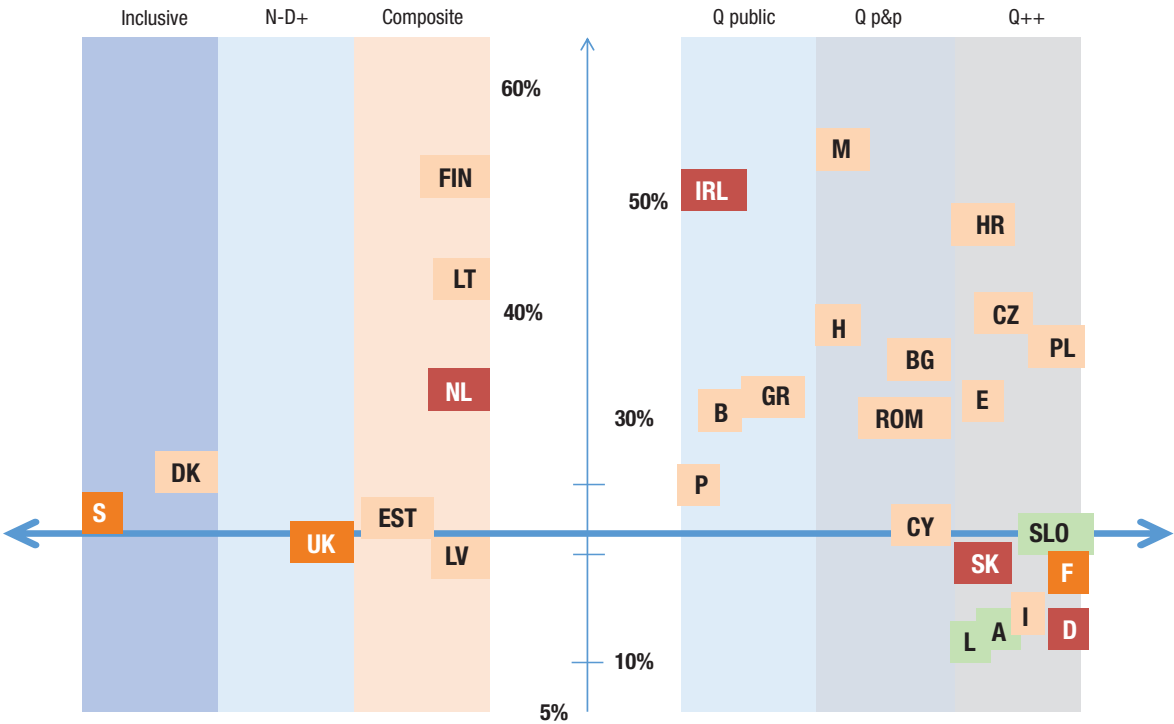
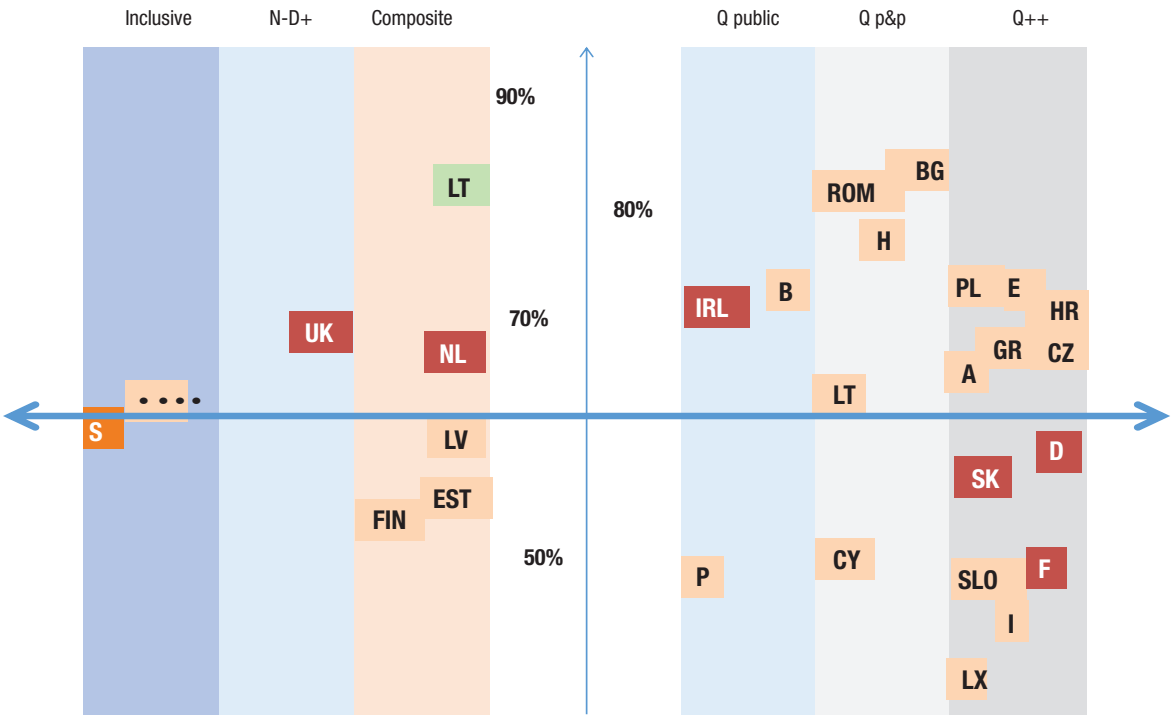
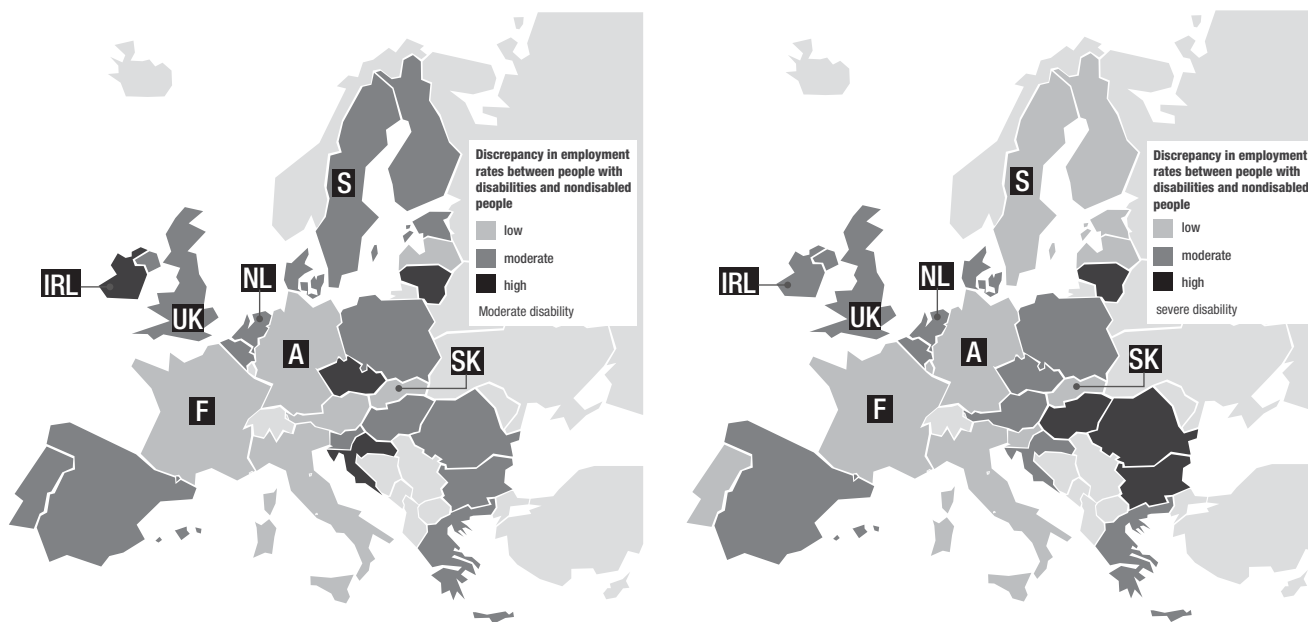


Table 6: Employment rate, relative discrepancy: Severe disability/non-disabled





The graphs in Appendix 2 show the comparative changes in employment rates, by gender, for the 2008-2014 period, between people with disabilities and those without disabilities for the seven countries studied.

An analysis of these data showed that for people with moderate disabilities, only the Netherlands and Ireland are below the European average. For individuals with severe disabilities, the United Kingdom is also below the average, with just under three out of ten people in this category employed. In Germany and Sweden, this figure is closer to 3.5, while it is nearly four in France. These small discrepancies with regard to people with severe disabilities suggest that a high rate of sheltered employment would not be enough to significantly improve the employment rate of people with disabilities¹⁵¹.

We calculate the employment rate (number of workers with a job divided by the number of workers) of two different populations: people with disabilities and people without disabilities. If the employment rate is identical for these two populations, the ratio of the employment rates is 1:1. This would mean that there is no discrimination with regard to people with disabilities. The ratio of the two employment rates is an indicator of discrimination with regard to people with disabilities. According to this indicator, Germany, Slovakia and France, along with Austria, Italy, Luxembourg and Slovenia, are the group of countries where discrimination is lowest in terms of employment. It is even more notable for France, Italy, Portugal, Luxembourg, Slovenia and Cyprus for people with severe disabilities.

The graphs¹⁵² comparing the changes in the employment rates between 2008 and 2014 show a certain stability. The discrepancies remain constant over the years, except for the Netherlands, where they have diverged in the past two years.

People with disabilities in Ireland, the United Kingdom and the Netherlands seem to face the most discrimination in the labour market among the countries from our sample, with discrepancies of 30 to 40 points between compared employment rates.

¹⁵¹ Velche, D. (2010). La diversité du travail protégé et assisté en Europe et son avenir. *Les Cahiers de l'Actif* n° 404/405, janvier-février 2010

¹⁵² See Appendix 2

Hypotheses

Despite the efforts of various EU bodies to ensure equal employment opportunities for its citizens with disabilities for the past 30 years, an Irish person with a disability appears still today to be two to 2.5 times less likely than a German, Swedish, Slovakian or French citizen to find employment.

Are there common or specific factors in the culture, policies or practices of these four countries that explain their results in fighting discrimination in the labour market?

While those with the best results are among the countries where quotas are a key component of the employment policy, the dispersal across the EU does not make it possible to confirm that the countries applying quotas obtain better results than those belonging to the “composite” and “non-discrimination” categories¹⁵³.

Whether policies are applied in a centralised or decentralised way is not a decisive factor either.

Three possible hypotheses can be explored, with their different combinations amplifying the results to a greater or lesser degree:

- A balance of a rights-based model and the social protection model in accordance with the country’s social culture and the expectations of both people with disabilities and the business world;
- Considerable involvement from social partners and social dialogue;
- Specialised local public or semi-public placement and retention services applying proven expertise.

Throughout this study, we saw few policies that adhered strictly to one model or another; most public measures include a combination of practices.

“As the rights-based model has spread to Europe, it has helped people with disabilities gain and exercise new rights. But it has also come up against social protection models that are not all merely benefits-driven, and even when they are, are not necessarily paternalistic. Combining different models to drive public action on people with disabilities leads to broader consideration of the way in which benefits are allocated and how these layered systems can work together¹⁵⁴.”

After decades of adjustments, creating an effective layered system that produces results in accordance with the social culture and expectations of the civil society in question is undoubtedly the complex balance that Germany and France have attempted to strike with recent legislation¹⁵⁵. They combine a structural quota, a significant share of sheltered employment, specialised local services, strong involvement from social partners and associations, and genuinely effective social dialogue.

Sweden, which was a pioneer in Europe, has also taken the non-discrimination model and modified it by providing considerable assistance to people with the most severe disabilities to align with the Swedish culture, which places a premium on strong solidarity. Here again, there is a large share of sheltered employment while salaried employees enjoy a common law status. Additionally, the Public Employment Agency has a number of coaches and specialised employees in its local branches to support people with disabilities looking for employment.

In Ireland, disability support was long handled by charities, mostly Catholic. The country then received funding for specialised institutions through the European Social Fund. While unemployment was a problem, unemployment among people with disabilities was not a priority. Ireland then began drawing from English and American trends toward non-discrimination, finally opting to not adopt quotas (with a target for the

¹⁵³ See Chapter 2

¹⁵⁴ LE VOYAGE DES DROITS Introduction to the French translation of Rights or quotas ? Pierre-Yves Baudot, Céline Borelle, Anne Revillard ENS Cachan | « Terrains & travaux » 2013/2 N° 23 | pages 113 à 125

¹⁵⁵ See Chapter 3

public sector only). This means that the country does not have a tradition of a state-governed employment policy specifically for people with significantly reduced work capacity compared to the majority of workers. Efforts have been made, however, to improve the employability of those who are not too far removed from the criteria of the labour market. The rapid transition to a non-discrimination policy led to overlooking the development of specialised expertise on employment for people with disabilities.

However, countries such as Germany, France, Sweden and Slovakia have for decades developed real expertise that we might expect to be rather effective. For example, the way the Germans progressively and consistently applied the employment quotas have today achieved results, proving the effects of these patient efforts.

At the European Union level, legislation has tended to move progressively towards adopting a combination of the two main models: employment quotas and non-discrimination, adapted to each country's culture and specific priorities.

Sheltered employment has stagnated or regressed in favour of supported employment.

The points of convergence now underway are in regard to:

- Within general social spending activation measures, incentives for employers and people with disabilities that are more widespread and relatively similar – at least in principle – in most countries (subsidised wages, compensation for loss of productivity, assistance, training funding, workstation accommodations);
- Access to professional rehabilitation and training, recognised as an urgent priority;
- The growing involvement of social partners and people with disabilities, or associations that represent them, in the creation, implementation, monitoring and assessment of policies.

To date, in all countries with employment quotas, and in certain countries for several decades, the target employment rate has never been reached. But most often, employment quotas generate financial resources from taxes and social contributions that are used to develop new measures for employment of people with disabilities.

No matter where these resources come from, our belief is that, within an economic context where social spending is controlled, the development of social dialogue within workplaces, the increased involvement of social partners and associations in managing the funding of employment for people with disabilities are real factors of progress. Germany and France are both examples of the positive changes that can be achieved.

How to define people with disabilities to produce statistical data

There are two possible approaches:

1. The compilation of administrative statistical data of people recognised with a disability. In all countries with a strong central government, such data are relatively available. The problem is that official recognition criteria are different within each country (for example, AAH, RAT-MP and disability benefits in France) and among countries¹⁵⁶. This makes it impossible to compare beyond strictly comparable measures (which is rare, including within the same country when there is a federal structure, such as in Italy or Spain).
2. The alternative is to use population surveys with identical methodologies and an identical way to define the relevant population. This is the choice made by Eurostat using increasingly standardised surveys of the working population. A method to determine how to identify people with disabilities that is acceptable for all Member States remains to be developed.

How results were compared with such varied national programmes

The first approach was to use (as Eurostat did) an identical module (translated into different languages) to identify people with disabilities or long-term illnesses of working age in the surveys of the working population (Labour Force Survey – LFS) from 2002 (with very different samples from one country to another).

In a second phase, Eurostat negotiated with national statistical organisations and disability experts from all EU Member Countries to develop a specific module to identify people with disabilities from a series of questions.

This model was applied by all Member States in the working population surveys carried out in 2011. This made it possible to identify, in the same way (with certain cultural differences):

- People self-declaring as having difficulties with at least one basic activity (seeing, hearing, walking, communicating)
- People self-declaring as being limited at work due to long-term health issues and/or difficulty with one basic activity
- Or two frequent definition types (one based on everyday activities, the other with regard to work capacity).

What differences are there between the two definitions of disability obtained this way?

One might think that the definition based on difficulties with basic activities would be broader than that based on limited work capacity due to long-term health issues and/or difficulty with one basic activity. This is reflected, for example, in the difference in prevalence for the entire EU: 14% versus 11%.

However, the situation is more complex. While the “basic activities” version is higher in 18 countries, and especially in France, limited work capacity was higher in 10 countries.

Another type of survey is often used today: Statistics on Income and Living Conditions (SILC).

¹⁵⁶ In a comparative study, ANED found that the number of different disability benefits varies from nine in Finland to 26 in Denmark

The SILC is a cross-sectional and longitudinal survey that has been coordinated by Eurostat since 2004 in Member States, with:

- Cross-sectional data on 130,000 households and 270,000 individuals aged 16 and older relating to fixed periods on variables for income, poverty, social exclusion and living conditions;
- Longitudinal data on 100,000 households and 200,000 individuals relating to changes at the individual level observed every four years.

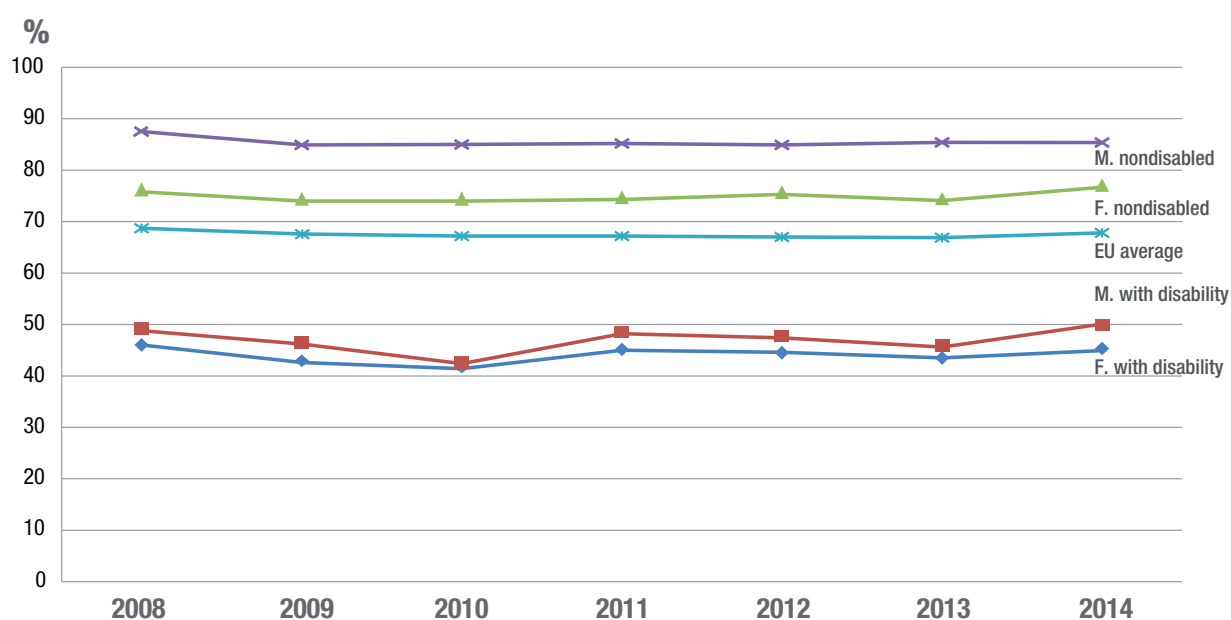
This annual production of both cross-sectional and longitudinal statistics on income, poverty and social exclusion, established at both the household and individual levels, is based on harmonised methods and definitions to allow a comparison among European countries.

Appendix 2

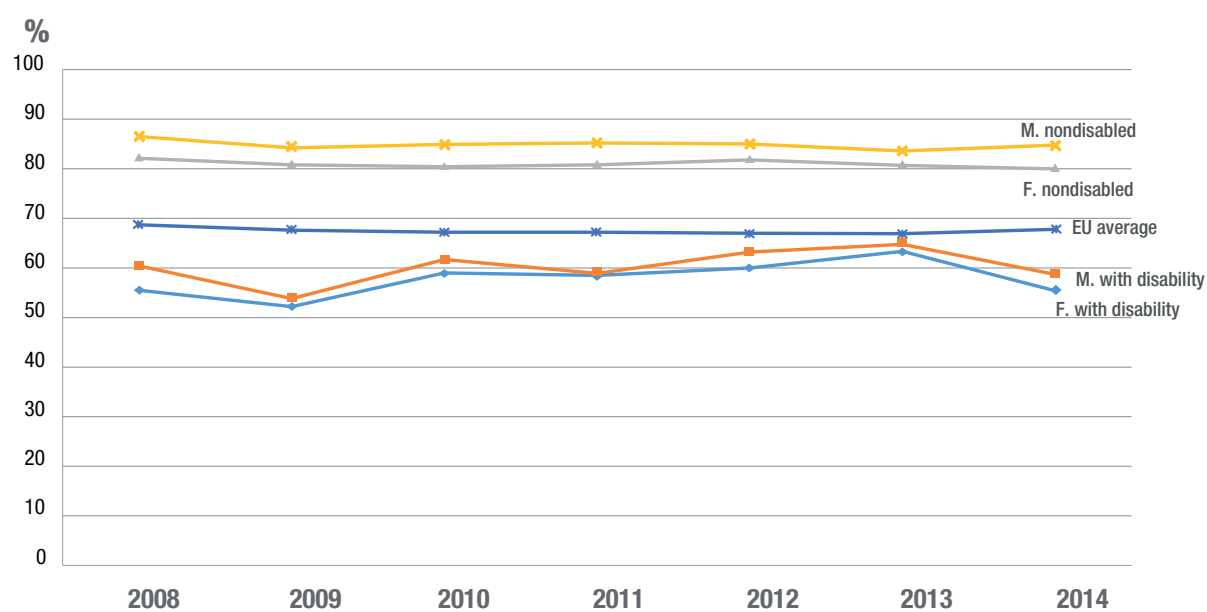
Comparison of the change in employment rates, by gender, for the 2008-2014 period between people with disabilities and all workers for the seven countries studied

(Source: EUSILC UDB 2014 – version 2. August 2016)

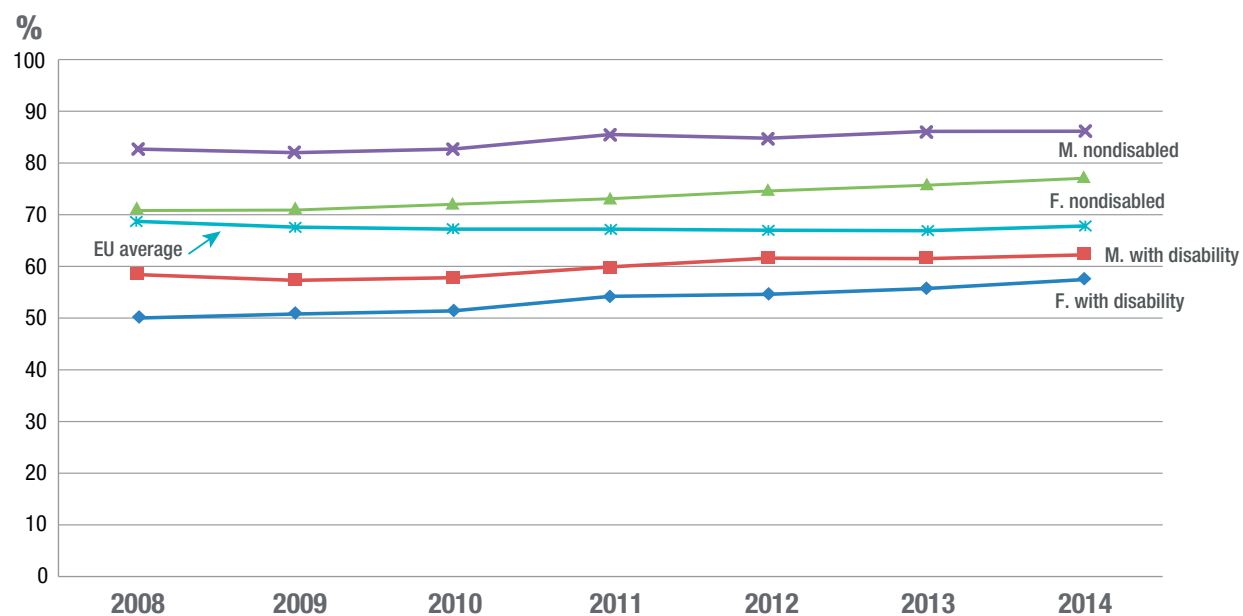
Change in employment rates of people with and without disabilities in the United Kingdom



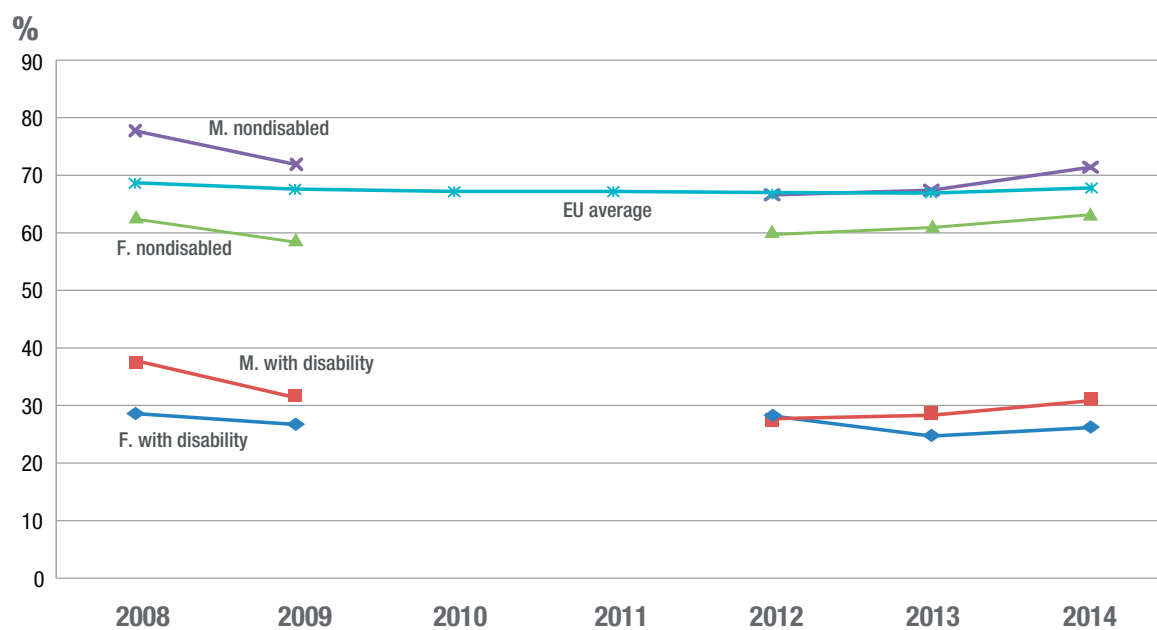
Change in employment rates of people with and without disabilities in Sweden



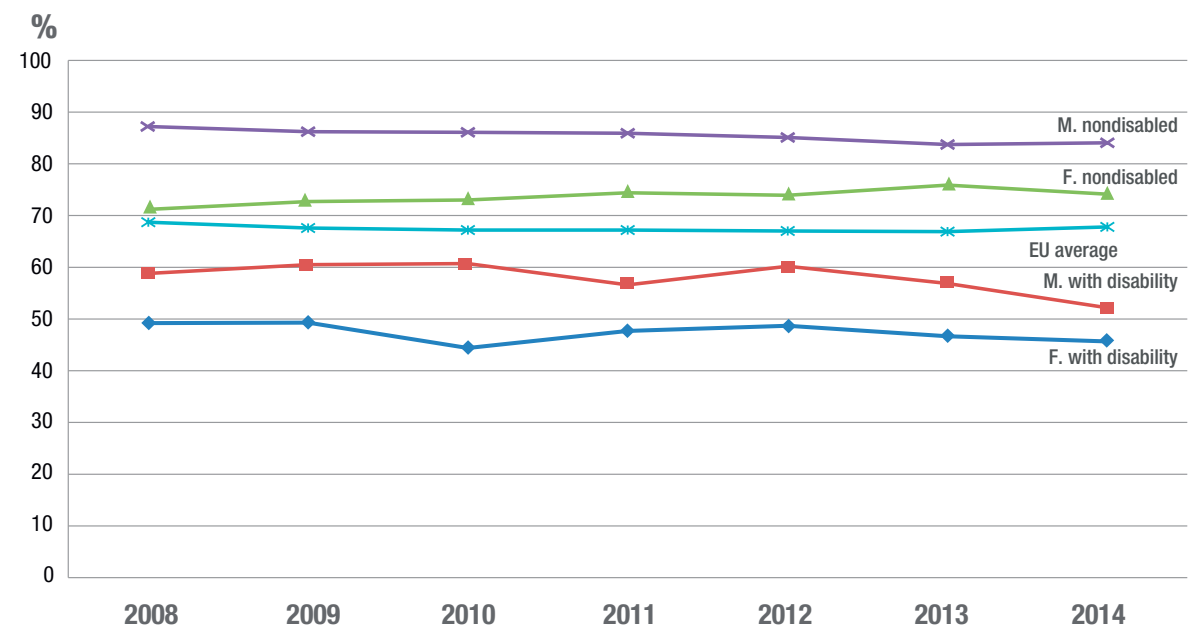
Change in employment rates of people with and without disabilities in Germany



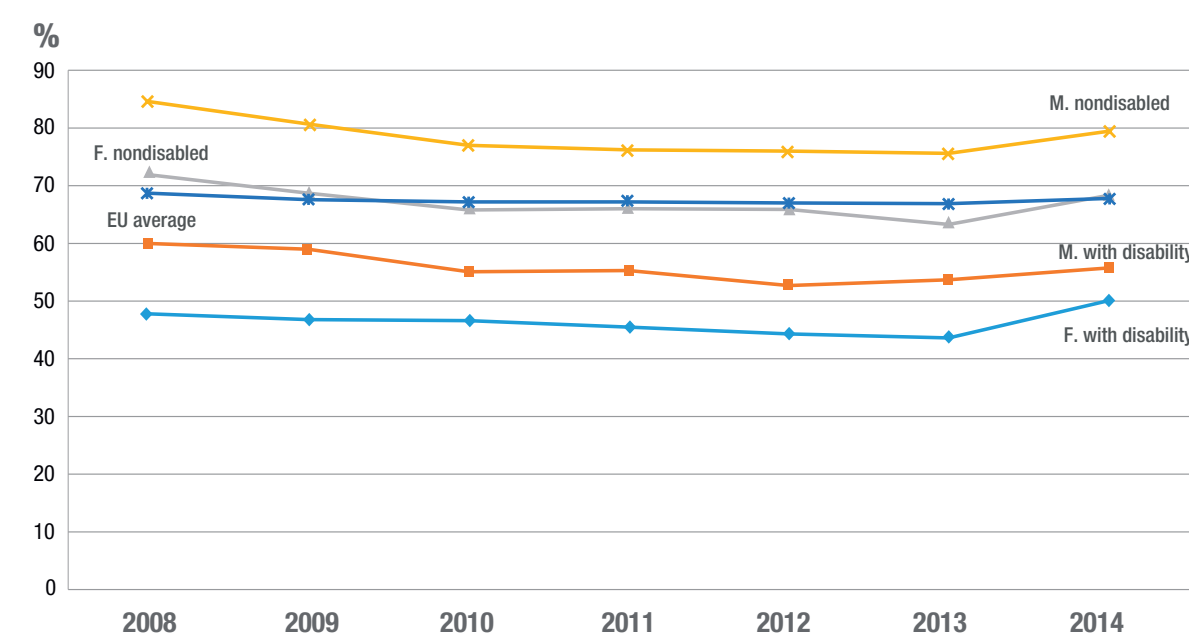
Change in employment rates of people with and without disabilities in Ireland



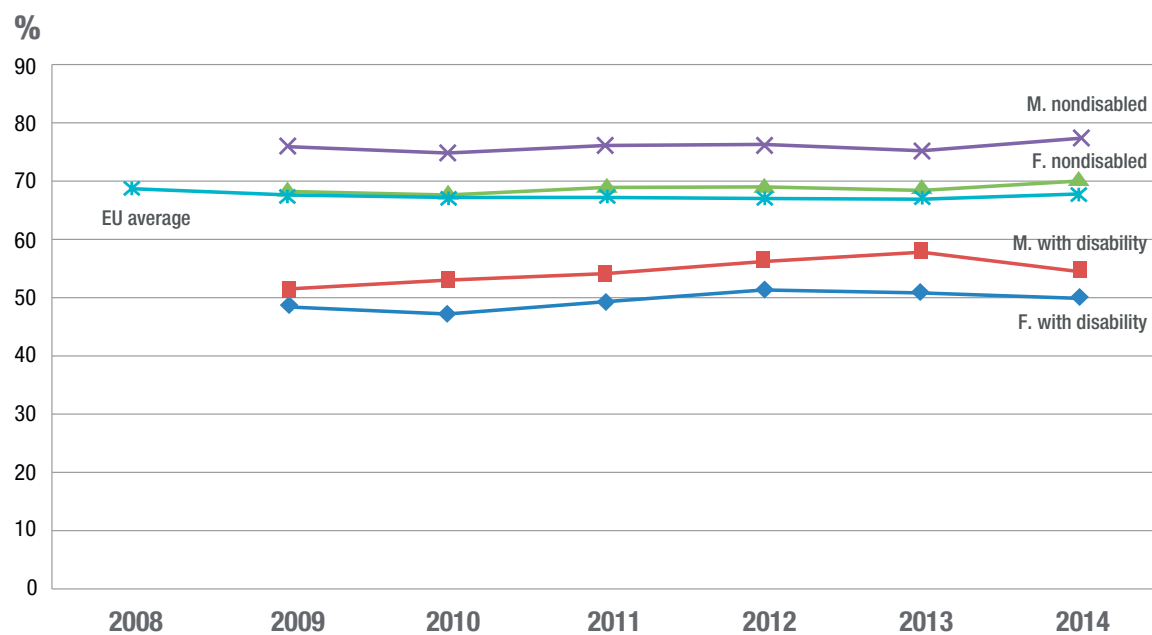
Change in employment rates of people with and without disabilities in the Netherlands



Change in employment rates of people with and without disabilities in Slovakia



Change in employment rates of people with and without disabilities in France



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Note

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