MAINSTREAMING DISABILITY
WITHIN EU EMPLOYMENT AND SOCIAL POLICY

A DG V services working paper
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EXECUTIVE SUMMARY

The purpose of the paper
In light of the current Social Action programme for 1998-2000, this document provides an overview of how the Commission intends to further mainstream and develop its disability strategy within the arena of EU employment and social policy.

The disability challenge
According to Eurostat estimates based on national surveys carried out in 1991-92, strong similarities exist throughout the Union in relation to the proportion of the population with a disability (at around 12% in the ten Member States covered); only in Spain is the figure much higher (15%), whilst in France, Greece and Portugal it is lower (10%).
Disability affects older people disproportionately. In all countries between 35% and 45% of disabled people are 65 years old or over - except in Germany (45%) and Spain (55%). Since less than 3% are under 20, between 45% and 65% of disabled people in the Union are of working age according to these estimates and they make up 6 to 8% of the population aged 15 to 64.

The new approach to disability
In its Communication of 30 July 1996 setting out a new Community Disability Strategy, the Commission endorsed the international move towards a rights based approach in the disability policy field. This new approach is based on the notion of right rather than charity and an accommodation for difference rather than a compulsory adjustment to an artificial norm. It therefore advocates a full notion of citizenship and inclusion rather than segregation and exclusion.

The adoption of the Amsterdam Treaty and Agenda 2000 has provided both a platform and further political momentum for the strengthening of disability policy at EU level.

Fighting discrimination
The scope for anti-discrimination policies and action has increased considerably as a result of the Amsterdam Treaty. A comprehensive strategy is planned which includes, inter alia, on one hand, legislation against discrimination in the field of employment and occupation for all grounds referred in Article 13 of the Amsterdam Treaty, and on the other hand, an action programme consisting of a wide array of complementary measures. Such measures are aimed at strengthening the co-operation with Member States and civil society, building partnerships and networking, exchanging good practice, improving knowledge and awareness of the issue. Within this framework, disability issues will be given a particular visibility.

Employment for people with disabilities
The new employment strategy, with its strong bias in favour of prevention and early, active intervention, has a great deal to offer to people with disabilities. Since the adoption of the 1998 guidelines, disability is firmly embedded in almost all of the
Member States' Naps. The proposed 1999 guidelines will further promote the integration of disabled people into the mainstream labour market through guideline number 9 which, in turn, complements and supports guidelines 1, 2 and 3. Some of the major strands of DGV policy will be harnessed to strengthen the disability employment strategy, namely the Social dialogue, the Information society and Health and safety at the workplace. Moreover, the 1998 NAPs have highlighted the paucity of suitable information on disability. It is the Commission's intention, therefore, to work with Eurostat in order to improve statistics in this area and it is anticipated that appropriate research projects will be launched in this respect.

**Action for social inclusion**

People with disabilities figure within the population that is exposed to social exclusion. As with the fight against discrimination, the Commission plans to implement a comprehensive and multi-prong strategy to combat such exclusion. Particular attention will be paid to disability-related issues in the framework of Social security, Demography and Public Health. Moreover, the proposed programme to promote social inclusion will aim to support Member States to tackle the processes leading to exclusion. Notwithstanding a horizontal approach, the programme foresees a series of initiatives aimed at ensuring the visibility of its benefits for key groups including people with disabilities.

**New financial resources for inclusion policies**

The ESF will further underpin the disability strategy by targeting those at risk and improving their employability. In line with the Employment guidelines, Member States will be invited to undertake initiatives that test support measures for early interventions and link active with passive measures in order to reduce long-term dependency and facilitate the transition to participation in the labour market. For its part, the planned new Community Initiative will address the roots of discrimination and the resulting job prospects of those who have difficulties in integrating into the labour market; a population, therefore, which includes people with disabilities.

**Other policies**

The inter-service disability group, established in accordance with the 1996 Communication, is an appropriate tool to mainstream disability issues into all appropriate policies and initiatives outside Social policy. Some fields are of particular importance at the moment, namely Education and Training, Research, Transport, Telecommunications, Industry and Market and Public Health. In this context, it is necessary to consider that disease prevention strategies play an important role in the prevention of disabilities.

**The civil dialogue**

As foreseen in the 1996 Communication, the Commission will co-operate actively with the appropriate disability NGOs. This framework document also will constitute the basis for a debate aiming at gathering their views and stimulating their contribution in the development and implementation of the different initiatives mentioned above.
1. PURPOSE OF THE DOCUMENT

In providing an overview of the Commission strategy on disability policy and the mainstreaming of such in the fields of EU employment and social policy, this document reviews the basic policy challenges raised by disability in light of the principles outlined within its new disability strategy as well as the key developments since the adoption of those principles. In the main, this document provides a comprehensive overview of how the relevant social policy fields will be harnessed to the benefit of people with disabilities.

2. THE DISABILITY CHALLENGE

Eurostat estimates drawn from national surveys within ten Member States (between the years 1991-1992) identify broad similarities across the Union in respect of the proportion of the population which is disabled (at around 12%)\(^1\). Disparities only exist in respect of Spain where the figure is much higher (15%) and in France, Greece and Portugal where the proportion is lower (10%).

Disability affects older people disproportionately and in all countries between 35 and 45% of disabled people are 65 years old or over - with the exceptions of Germany (45%) and Spain (55%). Since less than 3% are under 20, between 45% and 65% of disabled people in the Union are of working age according to these estimates and they make up 6 to 8% of the population aged 15 to 64.

The population of people with disabilities is extraordinarily heterogeneous. An individual’s limitation/s may result from a wide variety of impairments that have differential impacts on their participation in society\(^2\). Disabilities are disproportionately represented among ethnic minorities and lower socio-economic populations. Another characteristic of the disabled population found in many surveys is a low educational level.

Disability is clearly a major public policy issue in Europe. The growing acceptance of a need to protect the rights and freedoms of people with disabilities and to secure both their full inclusion within society and a right to equality of opportunity is manifest in recent legislative and constitutional developments within a number of Member States. These developments are based upon a civil rights approach to disability; an approach to this area which the European Union is now committed.

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\(^1\) In spite of the large number of disabled people, there are still no reliable European-level statistics in this field. Comparison of the situation at EU level is further complicated by the fact that each Member State has its own system for defining the disabled population. The Commission and Eurostat commissioned a study with a view to improving this situation in 1992. However, the methodology employed for this purpose relied essentially upon estimations taken from participation in social protection schemes and, therefore, interpretation of such data must take account of legislative definitions and eligibility criteria.

\(^2\) Disability is a multi-faceted concept that represents the relationship between an individual and his or her environment. It typically refers to a limitation in functioning that stems from the presence of a physical or mental impairment. The definition becomes complex, however, because an individual who is limited in his or her ability to function in one environment may not be limited when components of that environment are modified or when functioning in alternative environments. In addition, disability status may be dependent on the skills or abilities an individual had prior to the onset of impairment and how the impairment has reduced or destroyed those abilities. For example, a concert pianist who loses her hand might be considered to have a work disability, whereas a singer who loses his hand may not be considered work disabled.
The growth of the **public expenditure** which is associated with an increasing number of people entering the passive and dependency-fostering disability income maintenance programme is another reason for attaching a high profile to this issue. The 1997 Social Protection Report highlights the remarkable increase in both the number receiving disability or invalidity benefits and the expenditure involved over the past 20 years or so in a number of Member States (the Netherlands and the UK being among the most prominent examples). Disability benefits accounted for 8% of the total expenditure on social protection in 1995 (ranging from 5.6% in France to 14.7% in the Netherlands); expenditure which is equal to that made in respect of unemployment benefits. The latest British LFS demonstrates that while the proportion of disabled people in work amounts to 43%, 51% of their peers have been categorised as inactive despite 34% of them wanting to work.

If current **demographic trends** relating to the ratio of the active/passive population continues, policy makers should focus their attention on the increasing economic burden which will rest upon the active population. Coupled, therefore, with the possibility of a future labour shortage hampering economic growth, such trends demonstrate both the importance of removing disincentives to work for those of working age and for encouraging/assisting more people at the margin of the labour market - a large number of which are people with disabilities - to become economically active.

In this respect one should note that **unemployment rates** of people with disabilities are higher than for others in the labour force. The 1997-98 British LFS provides some first data on the long-term unemployment of disabled people. Unemployment rates for disabled people are twice as high as those for non-disabled people (11% compared of 6% of their non-disabled peers). Their likelihood to be long-term unemployed is also higher. 43% of unemployed disabled people are unemployed for a year or more. As for the population as a whole, more disabled men (36 %) than women (25 %) are employed (EHCP 94). The proportion of disabled people in employment in the Union is substantially lower than for other people, though it tends to be higher in member States where the overall level of employment is high which suggests that the latter is a precondition for increasing the job opportunities of those with disabilities (ECHP 1994).

For all the reasons mentioned above, disability is likely to continue as a major public policy issue which, in the absence of effective interventions, is likely to lead to increased pressure for income support and services, and increased overall costs to governments.

### 3. THE NEW APPROACH TO DISABILITY

#### 3.1 From the accommodation of people with disabilities to the accommodation of society

The traditional approach to disability policy has been based on the belief that disability is a deviation from normality. In this context, the policy orientation adopted by society is one of rehabilitation; the aim of which is to help compensate for the deviation and to encourage the disabled person to function as near as possible to the social norm. Currently this relationship between disability and “normality” is undergoing a revolution; a revolution instigated primarily by disabled people themselves. In this respect, it is increasingly being recognised on a global scale that human difference should be embraced as a phenomena which is both natural and beneficial to human society.

A society, therefore, which is truly concerned with human rights is believed to be one which defends the right of its minorities to be different and does not compel those minorities to adjust to an artificial “norm” constructed by a perceived majority.
Given these beliefs, the limitations faced by disabled individuals are no longer linked to their disabilities as such, but to society’s inability to provide equality of opportunity to all citizens. This new approach is based on the notion of **right** rather than charity and an accommodation for difference rather than a compulsory adjustment to an artificial norm. The new approach, therefore, advocates a full notion of citizenship and inclusion rather than segregation and exclusion; an approach reflected both within various international instruments relating to human rights and modern policy which has been implemented in this respect at a national level.

### 3.2 The new EU disability strategy

This move towards a human rights approach has been expressively endorsed by the Council in its Resolution of on *Equality of Opportunity for People with Disabilities*. The Communication stressed the need for a new approach which focuses on the identification and removal of the various barriers preventing disabled people from achieving equality of opportunity and full participation in all aspects of life. In this respect, the Commission has committed itself to mainstream the disability perspective into the formulation of policy and legislation and has therefore recognised the need to harness policies and programs that could help people with disabilities to participate effectively in the economic and social processes.

The new disability strategy has heightened the understanding and the recognition of the barriers faced by persons with disabilities. At EU level, the Commission’s inter-service group on disability has been reinforced to ensure that disability issues are integrated into mainstream Community policies. A High Level Group of Member States’ Representatives has been set up to allow the Commission to keep abreast of policy developments in the Member States and to further the exchange of information and experience within the Union. Co-operation with NGOs has been consolidated with support being granted to the newly established European Disability Forum as well as to the exchange of information and good practice among other disability NGOs. A Code of good practice for the employment of disabled people within EU institutions has also been adopted. In many fields of EU Social policy, worthwhile developments have taken place such as: employment guidelines, social dialogue, civil dialogue, information society, ESF, etc.

The task now is to build upon these achievements. The adoption of the Treaty of Amsterdam and agenda 2000 has provided both a platform and further political stimuli for the strengthening of disability policy at an EU level. A co-ordinated and comprehensive approach to disability across the various policy instruments will be sought to address the complexity of the issues and their linkages. For example, success in employment is affected not only by employment and training initiatives, but by the availability of personal support, transportation, housing, flexible and supportive return to work in income programs, the availability of jobs, and the attitude of employers.

Consequently, this document gives an overview of a number of social policy areas which will contribute significantly to pursuing the disability strategy’s objectives. In line with the social action programme 1998-2000, it draws together the key policies and programmes to be harnessed under three main headings: non discrimination, employment and social inclusion. Specific attention is also paid to horizontal issues such as the role of the ESF, enlargement, and dialogue with NGOs.
4. FIGHTING DISCRIMINATION

The Community Disability Strategy is grounded on the firm belief that people with disabilities have the same fundamental rights as other citizens and should have equal opportunities to participate in community life. It accurately reflects the increasing awareness at both international and national level of the need to take legislative action to remove conditions that may adversely affect people with disabilities and the acceptance that discriminatory provisions against disabled people must be eliminated.

Through its focus on strengthening the rights of the individual, the Amsterdam Treaty is in line with this perspective. This is particularly so in light of the new Article 13 which confers on the Union the power to take appropriate action to combat discrimination based inter alia on disability. The new Treaty is thus a major leap forward and could provide a decisive new impetus to the Community disability strategy and its rights based approach.

The Commission has already announced its intention, in the short term, to implement this new provision following the Treaty’s ratification. Preparatory work and consultation are under way to discuss the possible approach in this respect. In essence, the Commission would consider it appropriate to develop a comprehensive strategy which includes, inter alia, on one hand, legislation against discrimination in the field of employment and occupation for all grounds referred in Article 13 of the Amsterdam Treaty, and on the other hand, an action programme consisting of a wide array of complementary measures. Such measures would aim at strengthening the co-operation with Member States and civil society, building partnerships and networking, exchanging good practice, improving knowledge and awareness of the issue. Within this framework, disability issues should be given a particular visibility.

5. RAISING EMPLOYMENT LEVELS OF PEOPLE WITH DISABILITIES

5.1 The employment strategy

The employment strategy, with its strong bias in favour of prevention and early, active, intervention has a great deal to offer to people who run a high risk of becoming unemployed and, thereafter, remaining unemployed for long periods. People with disabilities are perhaps more likely to fall within this category than any other group in the labour market. Thus, in Great Britain they are nearly twice as likely to be unemployed. Moreover, research in both West Germany (claimant unemployed) and Great Britain (ILO) indicates that once people with disabilities become unemployed they are 50% more at risk of moving into long-term unemployment than non-disabled people.

The strategy aims to prevent this inflow into long-term unemployment and inactivity. The new approach helps people to become employable, not to define themselves as unable to work before they can gain access to appropriate support and assistance. A wait and see policy is especially damaging for people with disabilities. Disabled people face a situation in labour market terms where early and active intervention can really make a difference to their ability to take up new opportunities.

Disabled job-seekers can expect to derive major benefit from the new active approach implicit in the employment strategy; a strategy which places an emphasis on preventing long-term unemployment before it develops.
There is an explicit reference to the needs of disabled people under pillar 1 “employability” of the 1999 Employment Guidelines. **Guideline 9** of package says that the Member States will give special attention to the needs of people with disabilities, ethnic minorities and other disadvantaged groups and develop appropriate forms of preventive and active policies to promote their integration into the labour market. This has direct relevance for the participation of disabled people in the mainstream labour market. Guidelines 1, 2 and 3 underpin the preventive approach of the whole employment strategy, taken together with Guideline 9 they form a mutually-supportive policy-thrust promising to get more people with disabilities into jobs.

**Guideline 1** seeks to tackle youth unemployment and guarantees that Member States will offer every unemployed young person a new start before reaching six months of unemployment. That new start will come in the form of training, retraining, work experience, a job or some other active measure. And of course this includes young people with disabilities.

**Guideline 2** is a huge step in preventing long term unemployment. It commits Member States to offering unemployed adults a fresh start before they reach the critical threshold of 12 months of unemployment, i.e. before they become forced to define themselves and be seen as long-term unemployed. Many of those unemployed adults are people with disabilities.

**Guideline 3** encapsulates the move from passive to active measures. Member States will endeavour to increase (by at least 20%) the proportion of unemployed people benefiting from active measures to improve their employability. This will double the average retraining effort achieved up until now and will bring many hundreds of thousands, perhaps millions, of unemployed people the clear prospect of a return to work. Many of the unemployed people to date that have not been able to get help with employability measures are people with disabilities.

Consequently, solutions for the employment problems facing people with disabilities will be integrated into a wide range of employment programmes. Care will be needed to ensure that this process occurs without stigmatising people with disabilities. Help should not be based, therefore, on traditional assumptions or stereotypes afforded to people with disabilities but instead on the particular needs of the individual.

Interesting employability measures are already in place or in the process of being developed in a number of countries. Sweden has tested and put into place systems for giving disabled youths access to the full array of resources and services provided by the Employment Service and Employability Institutes - even whilst in compulsory school. One scheme open to them is the youth trainee scheme (adopted in 1991). It targets youths below 25 years of age and is designed to give participants a chance to try working in a field of their interest for a period of six months with the possibility of extension for another six months under certain circumstances.

Portugal has established a challenging but highly worthwhile 25% target for an increase in the employability of people with disabilities. The strategy aims to make mainstream Employment Centres the mediators in a process of socio-professional integration.

In the Netherlands passive benefit expenditure is being activated: employers recruiting a partially disabled person are entitled to a substantial lump-sum payment. That balances the increased employer liability for the costs associated with their employees becoming disabled. Also disabled people following training or working on a trial basis can claim a “reintegration benefit”.

Moreover, the new focus provided by the employment strategy and its need for effective monitoring and evaluation has highlighted the paucity of suitable information. Improved
frameworks for the collection of data and a policy of systematic evaluation of programmes are required.

To support Member States in pursuing the revised Employment Guidelines, research is needed to identify good practice in the field of disability and anti-discrimination. Such research should clearly highlight the gains to employment and economic well being that can result from an improved labour market environment; part of this research should be from the point of view of the economy as a whole. Other actions could analyse in more detail particular programmes.

The Commission itself is starting research actions to support the wider Employment Strategy. These may produce useful assessments of disability policy or improve the basis for evaluation. They include a peer review of best practice and work with Eurostat to improve statistics.

5.2 The Employment incentives measures

The Employment Incentive Measures (EIM) initiative is a further instrument to promote pilot activities linked to the development, planning, monitoring and evaluation of the employment strategy. The EIM could address a range of disability issues. In assessing submissions by Member States the Commission will ensure that pilot proposals fully recognise the disability dimension. The evaluation of experiences and benchmarking of results is likely to be particularly valuable. The Commission should now be working to ensure that pilot proposals include return-to-work strategies applicable to people with disabilities and that policies for adjusting the work environment are investigated and the mechanisms of evaluation of disability programmes are improved.

5.3 The contribution of the social partners

The new Disability strategy has already stressed the fact that social partners have an increased role to play in creating negotiated work organisation changes on behalf of people with disabilities. In response to the 1996 Communication, the social partners have already produced an important joint contribution to the Vienna Summit under the form of a Compendium of best practices.

The Compendium deals with a comprehensive range of case studies which covers a wide range of practices: recruitment, working environment (working hours, premises, …), staff training, promotion and career development. The factors decisive to success and failure are highlighted along with the experiences which are exemplary and transferable. The social partners agreed to organise a seminar to be held under the German Presidency to disseminate the Compendium. It is foreseen that, at the end of the seminar, they will adopt a joint Declaration on the employment of disabled people.

5.4 Harnessing the Information society

Developments in relation to Information and Communication Technologies (ICTs) considerably affect people with disabilities in several ways. First, the disappearance of manual, routine and repetitive work has a disparate impact on people whose skills or cognitive capacity are restricted to elementary jobs. Be that as it may, considerable scope also exists for new technologies to improve the employment situation of people with disabilities. The use of information and communication technologies can, therefore,
provide the means to overcome many of the physical and psychological barriers faced
by people with disabilities and thereby provide for increased participation not only at
work but in all areas of life activity. Through the European employment strategy, the
education and training programmes and the structural funds, in particular the European
Social Fund, the EU social policy will play a leading role in fostering policies and
programmes designed to harness the potential of the information society to create jobs
for people with disabilities and ensuring that there is equal access to its opportunities
and benefits.

5.5 Fostering a good and safe environment

A good and safe working environment is important for the individual in order to maintain
health and working capacity. Every year a significant number of workers that either
develop occupational diseases or are involved in the 5 million accidents at work, are
forced out of employment either temporarily or permanently. Health and safety policy
aims to prevent work accidents and occupational disease and palliate their effects on
health. In this way, health and safety measures can contribute to improving productivity
and help to improve the economic performance of the enterprise.

At the same time, a good and safe working environment is an important competitive
factor for the enterprise. The quality of work and its organisation increasingly influences
the availability of skilled labour, the motivation of personnel, and the development of
human resources in general.

The framework directive 89/391/EEC already foresees that the employer should adapt
the work to the disabled worker. The Commission - based on its own evaluation and the
reports which Member States are required to submit - will assess the implementation of
the disability requirement contained within the framework directive in addition to its
degree of compliance within the workplace as well as the enforcement effort deployed in
its application. The Commission will also build a database with guidance on best practice
and on methods improving disability management in the workplace. This will be
achieved by means of up-to-date electronic information enabling access by enterprises
and their intermediates at the Bilbao Agency. Finally, in the framework of the Safe
programme, pilot projects developing a disability friendly layout and work organisational
approach could be planned.

6. Promoting social inclusion

6.1 Modernising social protection

A high level of social protection is a prime concern in providing people with disabilities
with the guarantee of a decent life and income. However, an income solution alone is
not necessarily enough to enable the fullest possible participation in mainstream society.
It is important to consider how to develop social protection so that it can be wholly
adapted to, and supportive of, emerging labour market policies and other measures that
seek to expand and enhance the opportunities for integration available to people with
disabilities.

The European debate on social protection has shed more light on the interdependence
of the various strands of policy in this area. The importance of these factors is clearly
recognised in the Employment Guidelines for 1999 with a call for both real incentives to
seek and take up work or training and a critical reassessment of measures inducing workers to leave the labour force early. The Commission will support Member States in these endeavours by providing the framework and opportunity for study and exchange of ideas and best practice. The Social Protection in Europe report will also provide a regular analysis on recent disability social protection developments in Member States.

These interesting linkages between policy domains are not the sole reason that disability must be a central concern within the social protection debate. A sizeable minority of between one quarter to one third of those aged 70 years or older, experience health problems and require some assistance in carrying out activities of daily living and it is estimated that over 30% of those aged 80 or older are severely incapacitated. Throughout the Member states there has been a continued move towards the delivery of health and social services by means of community care programmes. The community care approach to service delivery is not only motivated by cost containment concerns, but also by humanitarian and consumer demand. In this context, the desire of older people and people with disabilities for autonomy, self care and self management where possible, and the desire to maintain themselves in their own homes with assistance when necessary (for as long as possible) has been acknowledged. The Commission has undertaken to raise awareness and stimulate a European debate about the challenges that an ageing population will pose for social protection systems in the field of long-term care. A recently completed study commissioned on social protection for dependency in old age in the EU and Norway will serve as a useful point of departure for this work.

6.2 Social exclusion

Disability figures inter alia among the factors that cause social exclusion and poverty. This is primarily due to a lack of employment opportunities for people with disabilities whose productive role in society continues to be underestimated. The enhanced commitment to fight against discrimination in the field of employment and invest in preventive active labour market measures will constitute the basic prong to improve social inclusion of people with disabilities.

Action to combat social exclusion will also be possible through provision of incentive measures under new Article 137 of the Treaty. Such measures would encourage Member States to invest in conditions of participation and social protection that make it possible for vulnerable people to raise their standard of living and to improve conditions of life. Notwithstanding a horizontal approach addressing all aspects of social exclusion, incentive measures will ensure visibility of benefits for disability related issues.

6.3 Public Health

People with disabilities, by and large, have the same kinds of problems and require the same kinds of services as people with chronic illnesses. Moreover, disability is in many, if not in most cases, the result of a serious illness or an accident. Consequently, the prime focus of work in public health to date has been on illness and accident prevention and measures to minimise their impact.

Moreover, the current predicament of people with disabilities is aggravated by the fact that the social and health services which they require are under the same significant pressure as that which currently exists within the health and social systems generally.
Questions relating to the empowerment of and discrimination against disabled people, their employment possibilities, their position in the context of social security benefits as well as the potential impact of new information technologies should therefore be seen in a broader sense. They cannot be completely divorced from issues relating to health policy. Furthermore, health and social systems and the way they function (including key questions of costs and finance) cannot be excluded from a strategy on disability.

Accordingly, a number of initiatives so far undertaken in the public health sector have implications for people with disabilities such as the action programme on health promotion, information and education, the action programme in the field of cancer, and the action programme on AIDS and other communicable diseases. In addition, two proposals for programmes currently under discussion are of relevance in this context: i.e. the action programme on rare diseases and action programme on accidents and injuries.

Of importance are also the Community programmes on pollution-related diseases, drugs prevention and actions alcohol abuse prevention. In fact asthma and other chronic respiratory diseases, on the one side, and mental disease related to substance abuse (alcohol, drugs, etc.) on the other side, score very high among the diseases which cause disability, in particular, in young and active people. Therefore, in demonstrating, how the EU is promoting employability of disabled people, it seems important to focus the attention to those Community public health actions which address the main causes of disability.

The recent Communication on the Future Community Public Health Policy identifies three strands of action which could be acted upon in the future and of which are significant for disability policy.

The first strand involves the development of a structured and comprehensive Community system for collecting, analysing and disseminating information concerning trends in health status and health determinants and developments concerning health systems. Such could entail:

- Trends and patterns of demography, morbidity and mortality, and of major health determinants. Analysis could cover different conditions, including physical and mental illness and specific population groups such as children and the elderly.
- Inequalities in health, covering variations between population groups of the determinants of health, morbidity and mortality, and assessment of interventions to reduce them. Analysis would also cover issues of access to health services, their use, and health outcomes.
- The interaction between health status and socio-economic factors such as social exclusion, migration and employment, and between health status and the environment.
- Developments in health systems, including reforms, distribution of resources, cost containment measures and their consequences including their impact on health status.

The second strand is about creating a capacity to react rapidly to health threats. It has some relevance because of the important causal link between certain health hazards (communicable diseases, serious environmental and industrial accidents, adverse reactions to pharmaceuticals, poisonings, etc.) and the onset of disability. The whole aim of this strand of action is to provide early warning against, and thus minimise the consequences of, such events (short-term prevention). An important step towards short-term prevention has been taken recently. Decision 2119/98/EC on the establishment of
a network for the epidemiological surveillance of communicable diseases was published on 3 October 1998.

The essential thrust of the third strand of action is to tackle the determinants of health through a variety of strategies, including legislation and incentive measures, as well as traditional health education and information activities (long-term prevention).

7. NEW FINANCIAL RESOURCES FOR INCLUSION POLICIES

7.1 Disability-related issues in the current mainstream European Social Fund programming period

The ESF is the main financial tool through which the Commission could translate its disability employment policy aims into action. Currently, it is difficult to identify the overall amount of ESF allocated to people with disabilities as some Member States have a rather “broad” targeting policy for groups with problems in accessing the labour market. Other Member States, however, have adopted “more specific” targeting policies and have earmarked significant ESF support for people with disabilities: i.e., Austria (Obj. 3): 95 MECU, Belgium (Obj. 3): 44 MECU, Germany (Obj. 3): 118 MECU, Greece (Obj. 1): 81,5 MECU, Ireland (Obj. 1): 149 MECU, Luxembourg (Obj. 3): 9,94 MECU, Portugal (Obj. 1): 167,3 MECU, Sweden (Obj. 3): ± 40 MECU.

The type of actions under the priority to promote the integration of people with disabilities varies enormously. The predominant element however in comparison to the previous programming period is the move away from fragmented action of a corrective nature, to integrated actions which promote a systematic structural approach.

The programming documents show that in many Member States progress has been made in providing packages of integrated measures forming pathways to social and professional integration. There is also evidence of a real effort to decentralise activity and achieve greater co-ordination of services (for example in the Netherlands, Denmark and Germany).

The individualised approach has been respected in a number of Member States (U.K., Ireland, Denmark, Finland and France) where the duration and content of provision is often adapted to the needs and capacities of individual beneficiaries.

Programming documents raise the importance of linking training with labour market needs and recognise the need for both the adaptation of training equipment and facilities and the use of new technologies to improve the quality of training.

To promote labour market integration for people with disabilities most Member States use ESF to support a range of actions including work experience wage subsidies, work experience schemes, temporary sheltered employment and other intermediate labour market steps. Support is also provided for self employment, including the development of co-operatives for the mentally and severely physically disabled (Germany, U.K., Greece).

Many programming documents (France, Italy, U.K., Greece) recognise the need for special training of trainers and advisory/support staff to ensure that appropriate skills and experience is on hand to provide specialised assistance to people with particular needs. An example of this is the “occupational adviser” initiative in Germany whose task is to provide the main link between the labour market and the disabled population. In
Austria an innovative ESF co-financed action is the development of “Arbeitsassistenz” a support structure to assist people with disabilities.

7.2 The Commission’s proposals for 2000-2006

There are a number of ways in which the Commission’s proposals in regards the European Social Fund for the forthcoming programming period recognises the importance of integrating disabled people into the labour market and builds upon work done so far. The importance of integrating disabled people into the labour market is reinforced by the Fund’s mission of contributing to actions undertaken in pursuance of the European Employment Strategy and the Annual Guidelines on Employment. It therefore follows that ESF funding should also support such an approach.

The new ESF for the forthcoming programme period 2000-2006 will maintain its traditional focus on supporting the integration into the labour market of disadvantaged groups; groups which of course include people with disabilities. While there has been a move away from naming specific ESF target groups (an approach reflected in the Commission’s general policy towards disabled people) it remains essential that people with disabilities should benefit from ESF interventions. There are a number of ways in which this will be possible:

The most obvious of the five priority ESF policy fields listed in Article 2 of the draft ESF Regulation is the field of promoting social inclusion and equal opportunities for all in accessing the labour market. This would enable ESF support to be given under any Objective for activities such as upgrading skills and qualification of relevant personnel or the reinforcement and improvement of guidance-counselling services and job agencies; activities which take account of the specific needs of those with disabilities. In addition to these measures, support will also be given to initiatives for the social and professional integration of disadvantaged groups and in particular to measures to improve the analysis and diagnosis of the problems which they face.

The first of the ESF policy fields - active labour market policies to combat unemployment and to prevent both women and men from moving into long-term unemployment – is also of particular importance to disabled people due to their more vulnerable labour market status. Disabled people should therefore receive support under this field in addition to other ESF policy fields such as lifelong learning or improving adaptability.

Under each of these policy fields there are a variety of specific actions which will be of particular relevance to disabled people. These action include, inter alia, the pathways approach; an approach which encompasses a tailor-made package of training and other support measures for each individual and of which combines the efforts of a wide range of partners (local authorities, social partners, NGOs, etc) to help the most vulnerable into employment. Of similar importance are the accompanying measures which allow support to be given for the provision of services to beneficiaries, including the provision of care services and healthcare where this is part of an overall package of ESF support. Obviously this will be of particular benefit to groups with particular needs; groups such as the people with disabilities.

Member States should also be encouraged to undertake systematic research when appropriate data is lacking on the number, specific problems, needs and geographical distribution of people with disabilities.
7.3 The role of the ESF Community Initiative

At present, European Social Fund support is available through the EMPLOYMENT Community Initiative to help people who have specific difficulties in finding or keeping a specific job or career. The total budget for the initiative during the period 1994-1999 is almost 3.5 billion ECU, including both EU and Member States contributions. One of the four strands of this Initiative, HORIZON, provides support specifically for people with disabilities; disabilities ranging from physical to mental health impairments or cerebral palsy. A total of 1700 projects have received or are still receiving ESF funding under HORIZON, the aim of which is to develop new ways of tackling the problems which people face in today’s ever changing labour market and to bring about positive changes in training and employment policies and practices. It funds projects which are innovative, have a high degree of local involvement, and are able to show how they can help others to gain from their experience. The impact of these projects is reinforced by grouping them in transnational partnerships so that lessons learned can be taken up throughout the EU.

Under the Commission’s proposals for the forthcoming programming period, Article 5 ESF proposes a specific Community Initiative for combating discrimination and inequalities in relation to the labour market. As in the current EMPLOYMENT Community Initiative, this new ESF-funded Community Initiative will continue to have a thematic focus with a number of cross-national thematic working groups each led by a separate Member State focussing on thematic areas reflecting the policy priorities agreed with the Commission. A number of these thematic working groups will be considering issues of importance to disabled people.

The Initiative will be based on a number of principles:

- **A comprehensive horizontal approach, which takes account of the multi-dimensional character of inequality and concentrates on the relationship between the excluded and a labour market that needs to become more inclusive.** Preventive actions will be an essential part of this approach.
- **The search for alternative, innovative forms of action which add value to other ESF actions undertaken.**
- **The identification of best practice and the elaboration of common policies at national and European level, while recognising that innovative solutions to specific problems often spring from the local level.**

8. The wider picture: other EU policies of main relevance for the disability strategy

Disability policy goes far beyond the sole social and employment fields. Some other EU policy fields are of particular importance for people with disabilities, namely Enlargement, Education and Training, Research and Transport and Industry and Market. According to the 1996 Communication, the Commission is working towards the mainstreaming of disability issues in all appropriate policies and initiatives. All relevant Directorates General participate actively in the inter-service disability group. The latter, constitutes a major tool to raise awareness of disability issues and to encourage more intersectoral co-operation in this field.

The Declaration N° 22 annexed to the Amsterdam Treaty states that "the Conference agrees that, in drawing up measures under Article 100a [now Article 95] of the Treaty..."
establishing the European Community, the Institutions of the Community shall take account of the needs of persons with a disability. In order to ensure full compliance with Declaration N°22 and to strengthen the effectiveness of its application, the interservice Group on Disability will seek to develop a framework for assessing and addressing the impacts of proposals for legislation, policy and programs.

9. **Civil Dialogue/Dialogue with Disability NGOs**

As foreseen by the 1996 Communication, the Commission also intends to co-operate actively with the appropriate disability organisations. This will strengthen the civil society’s capacity to monitor social needs and identify emerging problems. It will also allow these organisations to bring their expertise to the Commission to help develop responsive programs, policies and laws.

Furthermore, since disability relevant activities are spread across many directorates and programmes, adequate information needs to be developed in order to ensure easy access for users in this respect. Information on community EU programmes and initiatives relevant to people with disabilities will therefore be made easily accessible through specific Internet pages to be included in the Europa Web site.