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European Disability Expertise (EDE) provides independent scientific support to the Commission's policy Unit responsible for disability issues. It aims to mainstream disability equality in EU policy processes, including implementation of the United Nations Convention on the Rights of Persons with Disabilities.

This country report has been prepared as input for the European Semester in 2022.¹

¹ For an introduction to the Semester process, see <https://www.consilium.europa.eu/en/policies/european-semester/how-european-semester-works/>.

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1 Executive summary and recommendations

1.1 Key points and main challenges for Denmark in 2022

In the Danish Recovery and Resilience Plan, disability is only slightly mentioned, and where it happens it is mostly in connection with the UN SDGs.

Disability and the labour market

SILC data show that Denmark has a smaller employment gap than the EU average, but a larger national survey shows an employment gap that is somewhat larger. It also shows that the gap is significantly larger for the groups with intellectual disability and especially with mental health problems than it is for other disabilities.

After many years with a policy that relied heavily on conditionality, there is now talked of the need for a reform of the employment policy so that more support will be offered to the citizen in the process of getting to work. Analyses show that the employment policy and the equal treatment policy are difficult to reconcile. They also point out that people with disability have become an invisible target group in the Danish social system, and the latest legislative changes have not rectified this.

Disability, social policies and healthcare

Disabled People's Organisations Denmark (DPOD) has published a social policy programme which has not yet received the attention it deserves. It puts the finger on a sore point in Danish social policy, namely that help creates dependence if nothing is done to counteract this effect. Therefore, the main point of the programme is that the citizen should have more choice and control on his own life.

The official social policy as set out in the 2020 report² is almost exclusively about the protection of children, and in this connection, there is a danger that parents with disabilities, especially those with mental health problems, will not be guaranteed the help and support they are entitled to but just get their children removed. There are hardly any suitable forms of support; the required effort needs to be developed first.

Since the municipal reform in 2006 where large parts of the specialist knowledge were lost, there have been efforts to describe the groups that need the most specialised efforts, and the efforts that are available to them, in order to ensure that these groups get the necessary offers. And inequality is rising in Denmark as in other countries, especially because the richest 1 % has rising incomes.

Disability, education and skills

The evaluation of the Inclusion Act from 2012 shows that not as much as critics have suggested.

Investment priorities for inclusion and accessibility

It is noteworthy that the government's social policy is unilaterally aimed at vulnerable children, which means, among other things, that there is no disability policy. In this connection, it should be mentioned that the Danish Institute for Human Rights has put forward a proposal that the government draws up a new disability policy.

² <https://sm.dk/publikationer/2021/feb/socialpolitisk-redegoerelse-2020>.

1.2 Recommendations for Denmark

These recommendations are based on the evidence and analysis presented in the following chapters of our report.

Recommendation:

Employment policy should change its focus from conditionality towards support to enter the labour market and to remove barriers to finding work, so that it is no longer about checking that recipients of support are really available and willing to take part in activities they do not find are bringing them closer to the goal.

Rationale: Employment policy has for many decades been very focused on control. A number of offers have been given to the citizens without the need for it, simply because the municipal job centre was obliged to do something. The new employment policy must be about finding out what the citizen needs to be able to get into work, and support the process of entering the labour market. The starting point must be confidence that the citizen wants to make an effort, but that there are barriers to it being possible. The efforts must be of a nature that the citizen experiences as meaningful, and experiences as an aid to moving forward toward the goal of coming into employment.

Recommendation:

A new social policy should be implemented in the field of disability based on the Disabled People's Organisations Denmark's (DPOD) programme, which is about giving the citizen more influence on his or her own life.

Rationale: DPOD's programme aims to give the citizen an independent life. In line with this goal, it provides a range of suggestions on how assistance to citizens with disabilities can be made more user-driven and flexible. Thus, it proposes that personal budgets be introduced, that there be a greater opportunity to solve the problems in a different way than is provided for by law, that it will be possible for a group of people with disabilities to pool their help if they think they can get more out of it that way.

Recommendation:

Forms of positive support for parents with disabilities should be developed to children are not removed as response to the problems faced.

Rationale: There are few examples of efforts to support parents with disabilities, particularly with a mental health condition, and this has been lacking for years. The efforts made towards families where the parents have mental health problems are often about examining whether they have sufficient parenting skills, or observing how the interaction in the family proceeds, in order to decide whether it is necessary to remove the child, either voluntarily or non-voluntarily.

2 Mainstreaming disability equality in the Semester documents

Country Reports and Country Specific Recommendation of direct relevance to disability policy were not published in this exceptional policy cycle. For a commentary on the last published documents please see our country fiche for the previous Semester 2020-21.

2.1 [Recovery and Resilience Plan](#) for Denmark (RRP)

The following key points highlight where the situation of persons with disabilities or disability policies was considered in these plans. We address the most relevant of these and other issues arising from the RRP/NRP in the next chapters.

The Recovery and Resilience Plan (RRP) for Denmark does not mention disability in the report itself, but only in the appendix on the 17 Sustainable Development Goals (SDG) that it is provided with. When looking more closely at the content of the report, however, there are three points where it can be argued that disability should have been mentioned.

- 1.5 Gender equality and equal opportunities for all. The section is about inequality in relation to gender, but there is also still a significant inequality in relation to disability.
- 2.1 Strengthen the resilience of the healthcare system. In this section, 'vulnerable groups' are mentioned only in the introduction, but several groups of people with disabilities have major barriers in relation to the health system.
- 2.6 Digitalisation. It would be appropriate to point out that the use of artificial intelligence is an opportunity to develop assistive and accessible technologies of a completely new kind, and that research in this area has the potential to enrich research into digitalisation.

And now to the plan's appendix on the 17 Sustainable Development Goals (SDGs). The RRP's appendix on the 17 SDGs mentions disability four times.

- Reduced inequality (SDG10). It is mentioned here that in 2018 there was a general law against discrimination on the basis of disability, and that this law in 2021 was added provisions, which obliged schools and day care for children to make reasonable adjustments to their buildings and access conditions, so that children with disability were not prevented from participating. A law from 2020 has also obliged the municipalities to start preparations when a child with a disability turns 16, so that before the age of 18 the transition from the law on children to the law on adults is in place. As will be mentioned later, these are proposals from the Danish disability organisations.
- The section on poverty (SDG1) mentions that people with disabilities are guaranteed equal access to health, and that a pool has been established with the aim of getting more people with disabilities into work. The last point is discussed in more detail in section 3.
- In the section on clean water and sanitation (SDG6) it is mentioned that Denmark has rules that ensure that there are toilets for people with disabilities.

- In the section on sustainable cities and communities (SDG11) it is mentioned that a lot is being done to ensure people with disabilities access to nature areas.

The link between disability and the UN's world goals seems to be a good idea, and it is obvious to point out that one could also look for disability aspects and connections to the UN CRPD in several of the other world goals. It is often an experience that working with problems for people with disabilities also solves problems for several other groups, such as the elderly, pregnant women and families with children, and thus contributes to making society as a whole more inclusive.

2.2 Semester links to CRPD and national disability action plans

Relevant recommendations and issues arising from participation in the United Nations Convention on the Rights of Persons with Disabilities (CRPD) are highlighted in each chapter.

It is also important that Semester plans align with national disability strategy too. In Denmark, this refers to the Policy statement and Action Plan for Disability Policy (2013, 2014, 2016). A disability action plan was developed in 2013 and reviewed in 2014. A Disability Policy Statement was published by the Ministry of Social Affairs and the Interior in 2016. In 2019 the Danish Institute for Human Rights recommended the government to introduce a national disability action plan, following widespread demands from civil society.

Some years have passed since national action plans for disability have been prepared (2013,³ 2014⁴). The disability policy statements from 2016⁵ and 2018⁶ should also be mentioned in this connection, although they are not disability policy action plans, but more just overviews of initiatives related to the various articles in the UN Convention on Human Rights for People with Disabilities (UN CRPD). The Danish Institute for Human Rights has recommended that a new disability policy action plan be drawn up.⁷ Such a plan should be structured in accordance with the UN CRPD. But it will also be worth considering the rights of people with disabilities in the light of the UN's global goals.

However, there is the Social Policy Report 2020,⁸ which also contains a lot about disability. This policy statement is structured with children, and in particular the removal of children, as the main topic, in accordance with the policy that more children should be removed. Disability comes into play in two ways: on the one hand, some children can be placed outside the home due to the child's own disability, and on the other hand, they can be placed due to the parents' disability.

³ <https://sm.dk/publikationer/2013/okt/handicappolitisk-handlingsplan-2013-kort-fortalt>.

⁴ <https://im.dk/publikationer/2014/sep/handicappolitisk-handlingsplan-status-2014/>.

⁵ <https://im.dk/publikationer/2016/feb/handicappolitisk-redegoerelse-2016/>.

⁶ <https://im.dk/publikationer/2018/dec/handicappolitisk-redegoerelse-2018>.

⁷ https://www.humanrights.dk/sites/humanrights.dk/files/media/migrated/handicappolitisk_handlingsplan.pdf.

⁸ <https://sm.dk/publikationer/2021/feb/socialpolitisk-redegoerelse-2020>.

The statement cannot say how many children are placed outside the home due to disability, but it shows that among the removed children there is 10 % with disability, while among the non-removed children there is 6 %, so there is a certain over-representation of disability among removed children. However, it emphasizes that this is a small number of children who both have a disability and receive a social measure.

The account is considerably more detailed in the case of parents, where an entire chapter is about the parents of the removed children. It reviews how parents differ from parents of non-removed children. One of the differences is that there are more parents with disabilities among parents of removed children than among parents of non-removed children. In particular, there are more parents with diagnoses that indicate mental health problems. This point should be elaborated in section 5.2.

3 Disability and the labour market - analysis of the situation and the effectiveness of policies

In 2014, the UN CRPD Committee made the following recommendations to Denmark:

[Article 27 UN CRPD](#) addresses Work and Employment.

'59. The Committee recommends that the State party take all necessary measures to significantly increase, as soon as possible, the percentage of persons with disabilities working in the open labour market, including amendments to the general labour legislation so that it imposes clear obligations on employers to afford reasonable accommodation to employees with disabilities.'

3.1 Summary of the labour market situation of persons with disabilities

Data from EU-SILC indicate an employment rate for persons with disabilities in Denmark of 60.1 % in 2019, compared to 78.9 % for other persons against a national employment target of 80 % and approximately 8.8 points above the EU 27 average. This results in an estimated disability employment gap of approximately 19 percentage points (EU 27 average gap 24.2, see Tables 2-4) or an employment chances ratio of 0.8.

The same data indicate unemployment rates of 12.7 % and 5.7 %, respectively in 2019 (see Tables 5-7) and the economic activity rate for persons with disabilities in Denmark was 68.8 %, compared to 83.7% for other persons (see Tables 8-10). These indications are broken down by gender and age in the respective tables in annex.

Data from a national survey with a larger sample show a somewhat larger difference in employment between people with and without disabilities.⁹ It found that in 2019, 58 % of people with disabilities were at work and 84% of people without disabilities. That gives a difference of 26 percent points. For people with severe disabilities, only 37 % were in work. The study follows the development from 2008 to 2019. This development has been such that the employment gap has been larger at lower levels of employment and smaller at higher employment (see Figure 1 in annex).

The division into five main groups shows that while the employment of people with diseases, sensory and communication disabilities and mobility disabilities is about 65 %, the employment of people with cognitive disabilities or mental health problems is only about 46 % and 35 % respectively. It gives differences in percentage points of 19, 38 and 49. Thus, there are far greater barriers for people with cognitive disabilities and especially mental health problems than there are for the other types of disabilities.

⁹ Mona Larsen, Vibeke Jakobsen & Christian Højgaard Mikkelsen (2020): Handicap og beskæftigelse 2019 – viden til at understøtte at flere personer med handicap kommer i arbejde Disability and employment 2019 - knowledge to support more people with disabilities coming to work. København: VIVE.

The barriers that exist in the labour market are highlighted in a new contribution to research into disability and employment.¹⁰ It highlights, among other things, the importance of accessibility and discrimination, the importance of social networks, and the importance of employers' attitudes, knowledge and experiences. This is a versatile and comprehensive study, which is presented in a form that makes it suitable for use in the teaching of future job consultants. It may therefore have an impact on developments in the field.

3.2 Analysis of labour market policies relevant to the Semester

For reference, see also the 2021 [Recovery and Resilience Plan](#) for Denmark and the Policy statement and Action Plan for Disability Policy (2013, 2014, 2016).

The political context for the employment of people with disabilities is that the municipalities are responsible for promoting employment for this group, and the work with this takes place in the municipalities' job centers, which are also responsible for promoting employment for all other groups. From around 2000 onwards, legislation has been implemented which aims to support the employment of people with disabilities, including the introduction of the flex job scheme. In the two decades that have passed since then, legislation has been continuously developed and revised.

A landmark in the period is the disability pension reform in 2013. In the years before, the number of disability pensioners was fairly constant, and the number of people with flex jobs after a growth in the first years had reached a stable level. After 2013, the number of people with a disability pension decreases over the following years, while the number of people with the new resource course (Ressourceforløb) increases correspondingly. At the same time, the number of people with flex jobs is gradually growing over the same number of years.¹¹ (See Figure 2 in annex).

Amby has analyzed the policy for the employment of people with disabilities in the first part of the period and distinguishes between two tracks in the legislation: the employment track and the equal treatment track.¹² He shows that the ideal of equal treatment (via mainstreaming) results in people with disabilities not being mentioned in connection with employment, but only classified according to how close they are to the labour market (i.e. how difficult it can be expected to be to get them into jobs). In this way, the target group 'disappears' due to a lack of connection between the two tracks in the legislation.

¹⁰ Thomas Bredgaard, Finn Amby, Helle Holt & Frederik Thuesen (2020): Handicap og beskæftigelse. Fra barrierer til broer (Disability and employment. From barriers to bridges). København: Djøf forlag.

¹¹ Thomas Bredgaard & Finn Amby (2020): Handicap og arbejdsmarked fra industrisamfund til arbejdssamfund (Disability and labour market from industrial society to work society), side 64-65, i: Thomas Bredgaard, Finn Amby, Helle Holt & Frederik Thuesen: Handicap og beskæftigelse. Fra barrierer til broer. København: Djøf forlag.

¹² Finn Amby (2015): Målgruppen der forsvandt – Handicapområdets position i dansk beskæftigelsespolitik og hvordan ledige med handicap kan komme i ordinær beskæftigelse (The target group that disappeared - The disability area's position in Danish employment policy and how the unemployed with disabilities can get into ordinary employment). Frederiksberg: Frydenlund Academic.

The Act on Active Employment Efforts was revised in 2019, and Amby has subsequently analyzed whether the resulting changes solve the problems he pointed out.¹³ The law now operates with 13 target groups, which are divided according to the persons' means of subsistence. A special effort under the Compensation Act is typically given to citizens who already receive public support or other offers, and disability is not included in the criteria. The job center is not obliged to include compensation schemes in the deliberations. Amby's conclusion is that there are only a few changes in relation to disability, the problems have not been solved, disability remains an invisible group.

Since 2007, there has been a fairly intensive central political management of the area, although it is a municipal responsibility. Every year, the Minister has set goals in the area of employment, which until 2015 were binding on the municipalities, but since then have only been indicative, and the municipalities are obliged to report to a nationwide data system so that the Minister can continuously follow the results. For most of the period, however, disability has not been mentioned in the ministerial goals. Only in 2018 did they come in with the wording, 'The number of people with a greater disability in the labour market must be increased by 13,000 persons by 2025'. However, no data on disability are reported.

Amby believes that this means that there is now greater central political awareness of disability and employment, but disability remains a large invisible target group. As before, there is a lack of link between the political goals and the concrete framework for the local implementation of these goals, and much is left to the local politicians. The job centres have key people in the field of disability, but there are only rarely guidelines for their business, and none of the job centres have departments for disability. Nevertheless, some studies suggest that local political attention in the area is also increasing.

Since 2002, great political efforts have been made to solve the problem of getting more people with disabilities into work, without achieving greater results. It is mentioned that a pool has now been set up, but it is difficult to see that this initiative should differ so much from the many others it has carried out over the last two decades that it contributes to solving the problem.

There has been a lot of criticism of the work of the job centres, which has been governed by legislation that placed particular emphasis on checking whether the recipients of assistance really did what they could to get into work, and too little on really helping them to function in working life. There are many indications that there is a need for a reform of the entire area, based on the concrete problems people with disabilities have in getting into and maintaining a job. The research in the field of disability and work has recently been summarized in a publication that is suitable for the training of job consultants in the job centres.¹⁴ So, they are better equipped than before to take up the problems than you have been in the past

¹³ Finn Amby (2020): Jobcentrenes rammer og organisering af handicapområdet (The framework of the job centers and the organization of the disability area), i: Thomas Bredgaard, Finn Amby, Helle Holt & Frederik Thuesen: Handicap og beskæftigelse. Fra barrierer til broer. København: Djøf forlag.

¹⁴ Thomas Bredgaard, Finn Amby, Helle Holt & Frederik Thuesen (2020): Handicap og beskæftigelse. Fra barrierer til broer. København: Djøf forlag.

4 Disability, social policies and healthcare – analysis of the situation and the effectiveness of policies

In 2014, the UN CRPD Committee made the following recommendations to Denmark:

[Article 28 UN CRPD](#) addresses Adequate standard of living and social protection.

‘There was no recommendation on Article 28.’

[Article 19 UN CRPD](#) addresses Living independently in the community.

‘43. The Committee recommends that the State party end the use of State-guaranteed loans to build institution-like residences for persons with disabilities; that it amend the legislation on social services so that persons with disabilities may freely choose where and with whom they live, while enjoying the necessary assistance to live independently; and that it take measures to close existing institution-like residences and to prevent the forced relocation of persons with disabilities, in order to avoid isolation from the community.’

[Article 25 UN CRPD](#) addresses Health.

‘The Committee recommends that the State party ensure that persons with disabilities , in particular persons with psychosocial disabilities, have equal access to the highest attainable standard of health, including by providing adequate and accessible health services needed by persons with disabilities , and by providing training to health professionals and officials in the public health authorities , including on the right to free and informed consent .’

2014 UN CRPD Committee recommendations: institution-like residences (19), access to the highest attainable standard of health (25).

For more than a decade now, there has been criticism that Denmark has once again begun to build larger residential facilities for people with disabilities, especially when it comes to intellectual disability. The municipalities justify this on the grounds that it is necessary in order to get a sufficient number of well-qualified staff. Based on the rights of people with disabilities, the UN CRPD Committee and the Danish disability organisations criticise this practice.

It is difficult to get an overview of how many people with disabilities live in the large institutions. The Social Policy Report 2020¹⁵ mentions (page 221) that 15 per cent of the departments of housing and inpatient treatment places have more than 20 places. It is not mentioned what percentage of the residents with disabilities then live in these large institutions, but it goes without saying that this number must be significantly above 15 percent, possibly many times greater.

The second point that the UN CRPD committee pointed out in 2014 that people with disabilities do not have the same access to health care as other people and therefore do not have as long a life expectancy, has received less attention in

¹⁵ <https://sm.dk/publikationer/2021/feb/socialpolitisk-redegoerelse-2020>.

Denmark. However, it is mentioned as one of 31 proposals in a remarkable proposal from the Danish disability organisations, which we will return to below.

4.1 Summary of the social situation of persons with disabilities

Data from EU-SILC 2019 indicate the poverty risk rate for working age persons with disabilities in Denmark was 15.0 % in 2019, compared to 13.7 % for other persons of similar age - an estimated disability poverty gap of approximately 1 percentage points (see Table 14). For people aged over 65, the disability poverty gap was -0.9 points (8.5 % for older persons with disabilities and 9.4 % for other persons of similar age). The tables in annex also indicate the respective rates of risk of poverty or social exclusion and break these down by gender as well age.

For persons with disabilities of working age in Denmark (age 16-64) the risk of poverty before social transfers was 38.2 % and 15.0 % after transfers. The in-work poverty rate for persons with disabilities aged under 60 was 6.5 %.

Of interest to health policy are the data on self-reported unmet needs for medical examination (too expensive or too far to travel or waiting list). Disability equality gaps are evident here too and, on this basis, the rate for persons with disabilities in Denmark was 4.2 %, compared to 0.8 % for other persons, which is above the EU27 average of 1.7 %.

The AE Council's latest analysis of poverty in Denmark shows that developments over the past decade make the richest group richer, especially the top percentage. Also geographically, the difference between rich and poor municipalities has increased. In the last years just before the COVID-19 crisis, however, poverty fell, especially for children, but that was only because a subsidy was introduced for families with children on cash benefits. Unemployment due to the pandemic has particularly affected those with the lowest incomes and without education. It suggests that people with disabilities are included in the group.¹⁶

VIVE's latest study of living conditions for people with disabilities based on an interview in 2020, SHILD2020, is expected to be published in October 2021, and the results will also be introduced in the Danish Institute for Human Rights' Disability Barometer.¹⁷ Here it will be shown how the development in income and poverty has developed for people with disabilities over the years 2012-2016-2020. It can already be seen that the development in the first part of this period has gone in the direction of the group becoming relatively poorer.

4.2 Analysis of social policies relevant to the Semester

For reference, see also the 2021 [Recovery and Resilience Plan](#) for Denmark and the Policy statement and Action Plan for Disability Policy (2013, 2014, 2016).

¹⁶ <https://www.ae.dk/publikation/2021-01-spraekkerne-i-det-danske-samfund-vokser-sig-stadig-stoerre>.

¹⁷ <https://handicapbarometer.dk/>.

In his New Year's speech in 2000, the Prime Minister presented herself as the children's prime minister and in this connection put forward ideas that children should be better protected against neglect and that more children should be removed from their parents, and this should happen earlier than it does now. In line with these ideas, the Social Policy Report 2020¹⁸ is almost exclusively about children. Only chapters 3, 9 and 10 deal with the social area more broadly, as they provide an overview of expenses, offers and the municipalities' perceived challenges.

The latter point illuminates the report with the results of a questionnaire survey for all municipalities. It shows that challenges in the area of children and young people occur in more municipalities than challenges in the area of adults. In both areas, many of the municipalities have challenges with complex mental health problems, while only a few of the municipalities have challenges with physical disabilities.

The report is based on registry analyses of parents of children and adolescents, which were removed in the years 2015-2019 with diagnoses made in the health system that are related to disabilities, such as: autism spectrum, cerebral palsy, Downs, acquired brain damage, and developmental disabilities. Examples of diagnoses related to mental health problems include those due to alcohol or drugs, schizophrenia, depression, anxiety, eating disorders and personality disorders.

The analysis shows that parents of removed children and young people have a much larger number of diagnoses related to disability or mental health problems than parents of non-removed children and young people. For example, 12 % of mothers of children aged 0-5 years, have a diagnosis related to disability, and 21 % have a diagnosis related to mental health problems. The corresponding figures for mothers of unborn children and young people are that 2 % with diagnosis related to disability and just as many with a mental diagnosis. The statement notes that the number of parents of removed children with mental diagnoses would be significantly higher if they included the diagnosis ADHD. However, it does not say anything about what may be the reason why it has not done so.

The government's children-policy is based on a desire to protect children from neglect. However, it has aroused opposition from a number of professionals, including the former chairman of the children's council, Per Schultz Jørgensen, who has taken the initiative for a Facebook group which gathers experiences about the problem.¹⁹ The knowledge we have about child removal and consequences is very deficient, and it cannot be determined, for example, to what extent the removal of a child generally benefits or harms the child. The problem must be seen from the parents' point of view, too, in cases where the background is the parents' disability (possibly mental).

One may fear that an increased focus on children will lead to more reports, and that in several cases where one of the parents has a disability, parenting ability surveys will be conducted to the great detriment of an already burdened family. For these types of efforts will be a burden to the parents. On the other hand, there is a lack of efforts to support parents with mental health problems and help them shield their

¹⁸ <https://sm.dk/publikationer/2021/feb/socialpolitisk-redegoerelse-2020>.

¹⁹ <https://m.facebook.com/groups/855910391569569?view=info&sfd=1>.

children. However, as already mentioned, there is a single example of an effort that is carried out as an experiment.²⁰

The Danish social system is locally oriented, as the municipalities have the authority in the social area. This has been the case through a number of reforms, most recently the municipal reform in 2006. This structure can make it difficult to make an effort in the rarest of cases, as the municipalities lack the specialized staff and will not gain experience in such areas. To shed light on this issue, VIVE has conducted a literature review of the organisation of the highly specialised initiatives and offers.²¹

The literature review concludes that cross-disciplinary collaboration is difficult and requires continuity in relationships and time to build them. Cross-sectoral cooperation is often perceived as conflict-filled. Investment must be made in building common standards and trust, and there must be a sufficient number of tasks at all times. It requires a lot of management support and ad hoc collaboration is not enough. It is often a big problem that the financing is done through separate hierarchical systems. This presupposes that the systems become more curious, listening and helpful across borders.

Another problem that has been around Denmark for some decades is the tendency to create either a rigid regulatory system, or a high degree of discretion and arbitrariness. The disability organizations (DPOD) have taken the initiative to do something about the problem with a pamphlet with the headline, Make the good life the goal.²²

The paper is two years old but has not yet received the attention it deserves. One of the 31 proposals put forward here is already being implemented. This is the law from 2020 which was mentioned in section 2.1., which obliges the municipalities to start preparations when a child with a disability turns 16, so that before the age of 18 the transition to the law on adults is in place.

There is reason to highlight this last point as a really big achievement for Danish disability policy. It is an attempt to fill a loophole in the legislation, which has existed for decades, and which has been pointed out several times over the years, but which has not yet found a satisfactory solution. It is also not certain that the solution found here is sufficient, so there is reason to follow developments over the coming years closely.

In short, the problem is as follows: there is legislation for children with disabilities, i.e. a legislation that secures the group from 0-17 years. In addition, there is legislation for adults with disabilities, i.e. legislation that secures the group from 18 years and up. The municipality is responsible for processing and deciding cases. In a number of municipalities, people have waited until the child with a disability reaches the age of 18 and thus lost their schemes according to the legislation for children, and only

²⁰ Experiment with efforts to support parents with mental illness in Frederiksberg:
<https://videnskab.dk/kultur-samfund/indsats-til-boern-af-foraeldre-med-svaer-psykisk-sygdom-har-manglet-i-aarevis>.

²¹ <https://www.vive.dk/da/udgivelser/organisering-af-hoejt-specialiserede-indsatser-og-tilbud-paa-socialomraadet-16051/>.

²² <https://handicap.dk/detgodeliv>.

then found that there was a problem that they now had to solve according to the legislation for adults.

Thus, there was a gap in the security, where months or years could pass where the parents were faced with a problem that could just as well have been foreseen several years before, while the cases of support for the now adult person with disabilities were decided by the municipality. In particular, the problem was big when it came to finding a place to live. In Denmark, it is common for children who become adults to move from their parents into their own homes, and it should therefore also be possible for young adults with disabilities. However, in many cases they have had to wait for several years before it was possible to find a suitable home for them.

Among DH's 31 proposals, there are also others that can fill gaps in the law, e.g. on the placement of sectoral responsibilities when different authorities disagree on who has it, and on allowing an allocated grant to remain dormant. Most notable, however, are a number of proposals aimed at giving the person with a disability more influence on their own life and more quality of life. It is a proposal to give the person with a disability a personal budget, the opportunity to choose a different type of help than the law describes, and the opportunity for more recipients of help to pool their support in order to get more benefit from it. Finally, there are proposals to prevent the known causes of the higher mortality rate for people with disabilities.

It is a disadvantage of a social security like the Danish one, which aims to meet needs in an individual and flexible way, that too much of the citizen's attention is swallowed up by the communication with authorities, and that this in itself creates a feeling of dependence which limits the possibilities of an independent life. A large part of DH's 31 proposals is precisely aimed to counteract this effect.

5 Disability, education and skills – analysis of the situation and the effectiveness of policies

In 2014, the UN CRPD Committee made the following recommendations to Denmark:

[Article 24 UN CRPD](#) addresses Education.

'53. The Committee recommends that the State party amend its legislation to ensure the inclusion of all children with disabilities in the mainstream education system, with adequate support and accommodation, in particular through the provision of adequate training to teachers and other employees in the school system in all parts of the Kingdom of Denmark, in order to ensure quality education for pupils with disabilities. The State party should take measures to address discrepancies in accomplishment rates between pupils with and without disabilities at all levels of education.

55. The Committee recommends that the State party amend its legislation to ensure that all children with disabilities can submit a complaint to an independent authority if they do not receive adequate educational support.'

The inclusive primary school started in 2012 with an agreement between the National Association of Local Authorities (KL) and the government. They would lower the number of students attending special school and special classes. The cost of special education was rising, and it was also thought that it would be an advantage for pupils with special needs to attend regular classes. One might interpret it as meaning that it is this project that is backed by the statement quoted above.

VIVE conducts an evaluation of inclusion in primary and lower secondary school, where results are expected in October 2021.²³ Based on the results from the previous studies in the field, it is conceivable that the results will be something along the lines of the following:

Expenditure on special education has fallen slightly, but it is not possible to follow whether the resources have been channelled to the supplementary education to the same extent. On the other hand, there is no doubt that this lacks funds. As far as you can see from VIVE surveys along the way, the well-being of the students in the previous special classes has not been less well-being during the transition to general classes, nor has it meant poorer well-being for the other students in the class. The evaluation will probably also confirm the results of previous studies that teachers do not feel equipped to teach children with diagnoses.

5.1 Summary of the educational situation of persons with disabilities

The EU-SILC 2019 estimates concerning educational attainment should be treated with additional caution due to relatively wide confidence intervals, but they consistently indicate disability equality gaps (an average of 2-3 years provides a more stable indication). Table 16 indicates early school leaving rates disaggregated by disability status in Denmark. Youth with disabilities (aged 18-24) tend to leave school significantly more than their peers without disabilities of the same age groups (and this is reinforced by widening the sample size to age 18-29). Table 17 shows

²³ <https://www.vive.dk/da/undersogelser/evaluering-af-inklusion-og-specialpaedagogisk-bistand-15322/>.

completion rate of tertiary education disaggregated by disability and age group. Persons with disabilities (age 30-34) are less likely to complete tertiary education than their peers (and this is reinforced in the wider age range 30-39).

VIVE's latest study of living conditions for people with disabilities based on an interview in 2020, SHILD2020, is expected to be published in October 2021, and the results will also be introduced in the Danish Institute for Human Rights' Disability Barometer.²⁴ SHILD is a survey with a representative sample of people between 16 and 64 years old with 20 000 completed interviews that is conducted by VIVE every four years. Here it will be shown how the development in the number of early school leavers and people with higher education has been for people with and without disabilities over the years 2012-2016-2020.

5.2 Analysis of education policies relevant to the Semester

For reference, see also the 2021 [Recovery and Resilience Plan](#) for Denmark and the Policy statement and Action Plan for Disability Policy (2013, 2014, 2016).

The study of students with disabilities from 2019,²⁵ which was mentioned in last year's report, is still the latest study that sheds light on the subject. Since it was published, it has given rise to a number of comments and debates, and has recently led to an initiative, as a majority in the Danish Parliament (Folketinget) in May 2021 has agreed to spend EUR 3.92 million to improve the efforts of pupils and students with disabilities.²⁶

Glad Fonden's flex education for former STU students will be extended with a new admission in 2021. High school classes for students with autism spectrum must be evaluated, and an extra class at HF will be funded. In vocational education, students with disabilities have the opportunity to extend their studies as much as a number of athletes already do. A counseling effort is initiated for students with disabilities in vocational education. Finally, there are funds to prepare materials and conduct experiments in higher education.

²⁴ <https://handicapbarometer.dk/>.

²⁵ <https://handicap.dk/nyheder/ny-rapport-mange-oplever-handicap-hindring-tage-uddannelse>.

²⁶ <https://www.uvm.dk/aktuelt/nyheder/uvm/2021/maj/210510-ny-aftale-om-indsats-for-elever-og-studerende-med-handicap>.

6 Investment priorities in relation to disability

6.1 Updates on use of existing EU funds (up to 2021)

The European Social Fund mentions on its website²⁷ 18 projects in Denmark, most of which have been completed while some are still in progress. Six of these are relevant to the group of people with disabilities, but five of these projects have already ended in 2015 or before. Only one of the projects is still active.

It is the project 'Rummelig i Midt' (Spacious in Midt), which has formed a network of more than 100 companies in region Midtjylland with the aim of helping people on the edge of the labour market in jobs. The project runs from 2015 to 2021 with a budget of EUR 7.38 million, of which the EU contributes with EUR 3.69 million, where they will help a total of 800 participants in jobs.

The project concerns people who have been unemployed for a long time. In that situation it may be difficult for the person to get into job again. Typically, unemployment has a variety of reasons, and the role of disability is not made clear. The project aims to develop strategies to create jobs for such people.

6.2 Priorities for future investment (after 2021)

As Denmark is far ahead with digitalisation, and also has a relatively high standard with regard to disability policy, it will be obvious to invest in digital and artificial intelligence solutions that in various ways can benefit people with disabilities.

The Danish Recovery and Resilience Plan places great emphasis on the green transition. Thus, the costs are distributed with 60 % on green transition, 25 % on digital transition and 15 % on others. Denmark has gone further than many other countries in the digital transition. The experience from this is that digitalisation has provided many benefits for all people, including people with disabilities. On the other hand, digitalisation has also presented many challenges, both for people with and without disabilities. People are very different in terms of how ready they are to adapt.

It is therefore important that the organisations of people with disabilities are involved in the process, so that they can channel attitudes and challenges to the authorities, who then have the opportunity to solve the problems before they become too big. It can be expected that the green transition will be a significantly larger change, and that it will also include changes in everyday life and life patterns.

Changes in environment and conditions will often mean that new barriers arise for people with disabilities. It is therefore important that the organisations of people with disabilities are also involved in this process.

²⁷ <https://ec.europa.eu/esf/main.jsp?catId=46&langId=en&list=1&theme=0&country=376&keywords>.

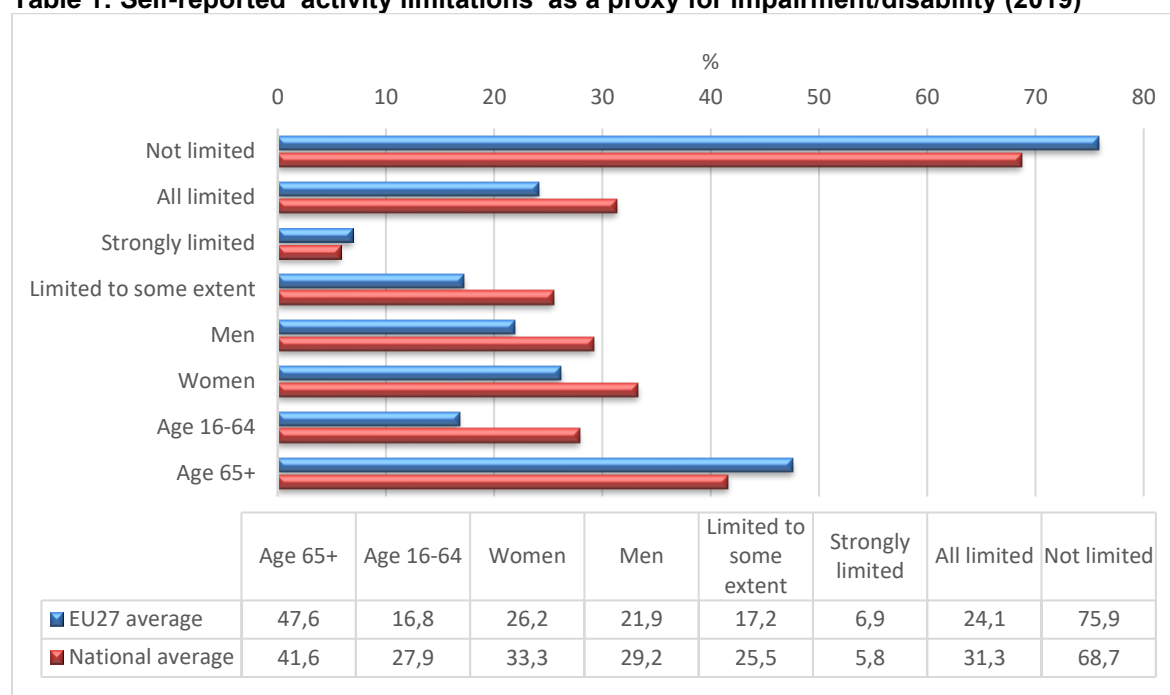
7 Annex: disability data relevant to the Semester

See also disability data published in the Eurostat database²⁸ and statistical reports.²⁹

Unless specified, the summary statistics are drawn from the most recent EU-SILC data available to researchers from Eurostat. The EU-SILC sample includes people living in private households and does not include people living in institutions (congregative households). The sampling methods vary somewhat in each country.

The proxy used to identify people with disabilities (impairments) is whether ‘for at least the past 6 months’ the respondent reports that they have been ‘limited because of a health problem in activities people usually do’.³⁰

Table 1: Self-reported ‘activity limitations’ as a proxy for impairment/disability (2019)



Source: EU-SILC 2019 Release 2021 version 1.

In subsequent tables, these data are used to indicate ‘disability’ equality gaps and trends relevant to the analytical chapters – for the labour market, social policies and healthcare, and education – by comparing outcomes for persons who report and do not report ‘activity limitations’.³¹ National estimates for Denmark are compared with

²⁸ Eurostat health Database, <https://ec.europa.eu/eurostat/web/health/data/database>.

²⁹ Eurostat (2019) *Disability Statistics* https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Disability_statistics.

³⁰ The SILC survey questions are contained in the Minimum European Health Module (MEHM) [https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Special:WhatLinksHere/Glossary:Minimum_European_Health_Module_\(MEHM\)](https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Special:WhatLinksHere/Glossary:Minimum_European_Health_Module_(MEHM)).

³¹ This methodology was developed in the annual statistical reports of ANED, available at <http://www.disability-europe.net/theme/statistical-indicators>.

EU27 mean averages for the most recent year.³² In general, more younger adults and fewer older people in Denmark reported limitations than the EU average.

7.1 Data relevant to disability and the labour market

Table 2: EU and Denmark employment rates, by disability and gender (aged 20-64) (2019)

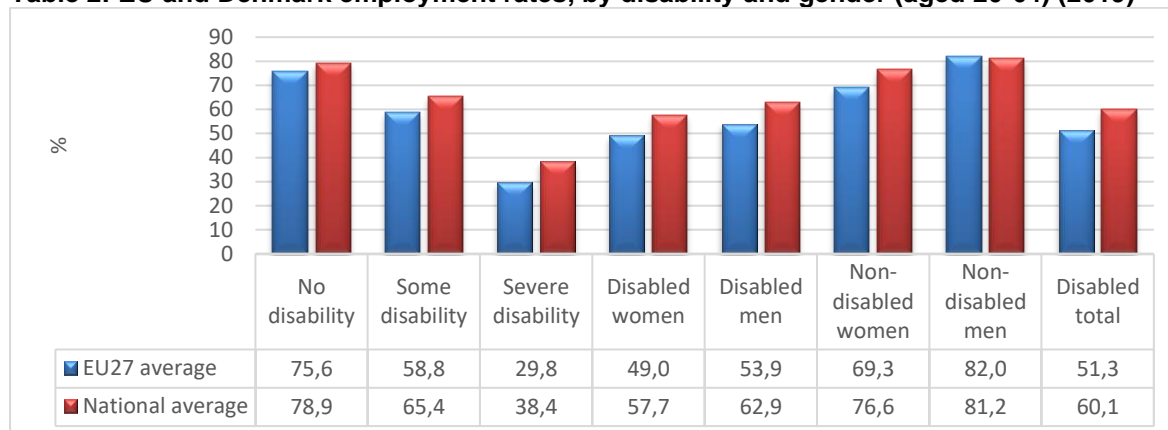
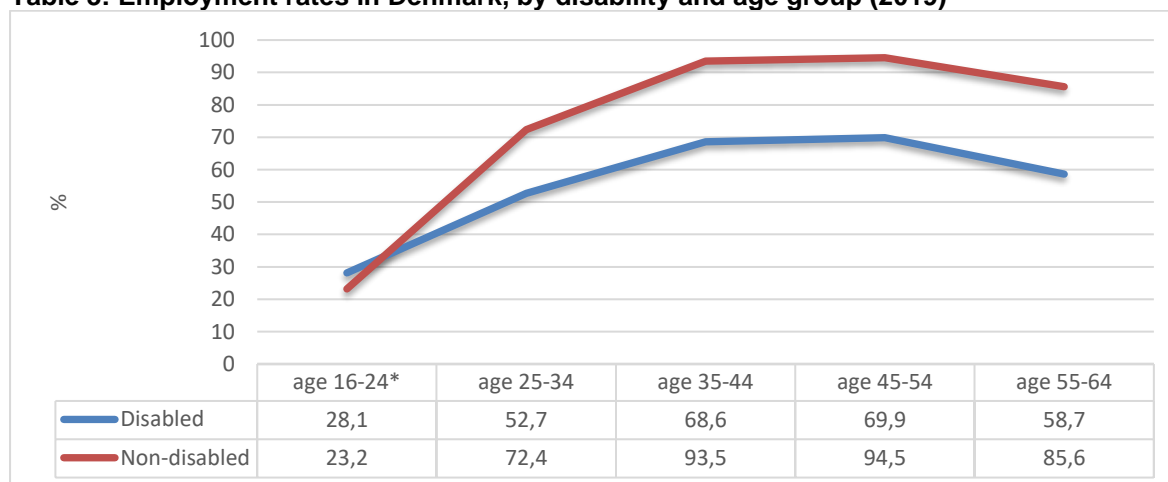


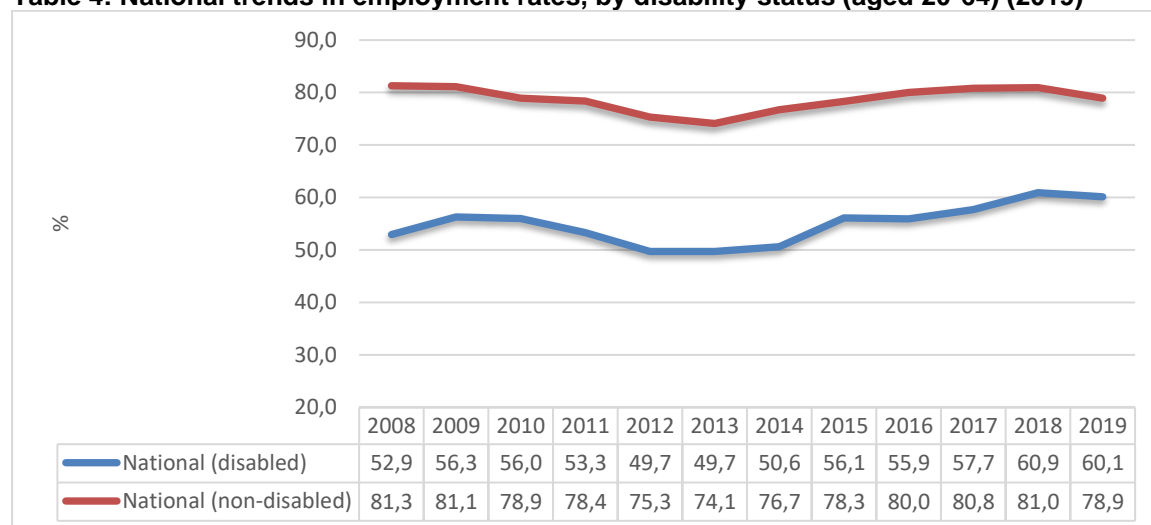
Table 2 shows as expected that the employment rates in Denmark exceed the EU average for all groups (except men without disabilities) and follow similar patterns for groups of persons with disabilities.

Table 3: Employment rates in Denmark, by disability and age group (2019)



In Table 3 we observe a widening disability gap into adulthood (the differences are not great in youth probably because many Danish young people remain in education) whereas the employment rate of young persons with disabilities might even be higher.

³² The exit of the United Kingdom from the EU changes the EU average. Averages were also affected in 2015 by a discontinuity in the German disability data due to a definitional change.

Table 4: National trends in employment rates, by disability status (aged 20-64) (2019)

Source: EU-SILC 2019 Release 2021 version 1 (and preceding UDBs).

In Table 4 we observe a small narrowing of the disability employment gap since 2016.

7.1.1 Unemployment

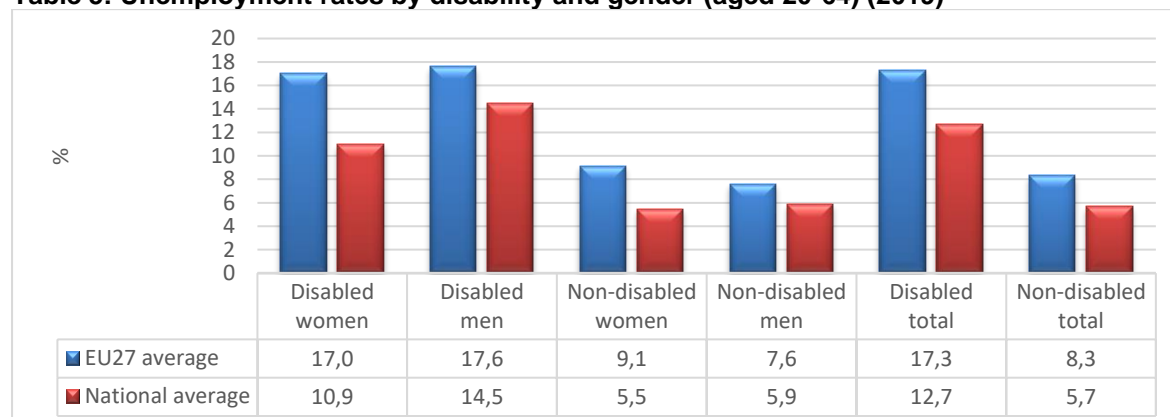
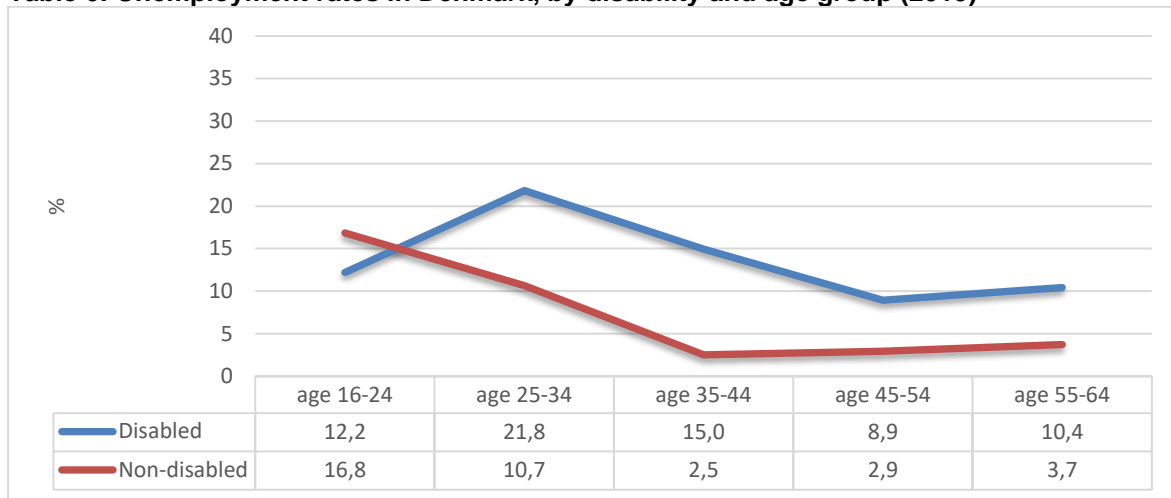
Table 5: Unemployment rates by disability and gender (aged 20-64) (2019)

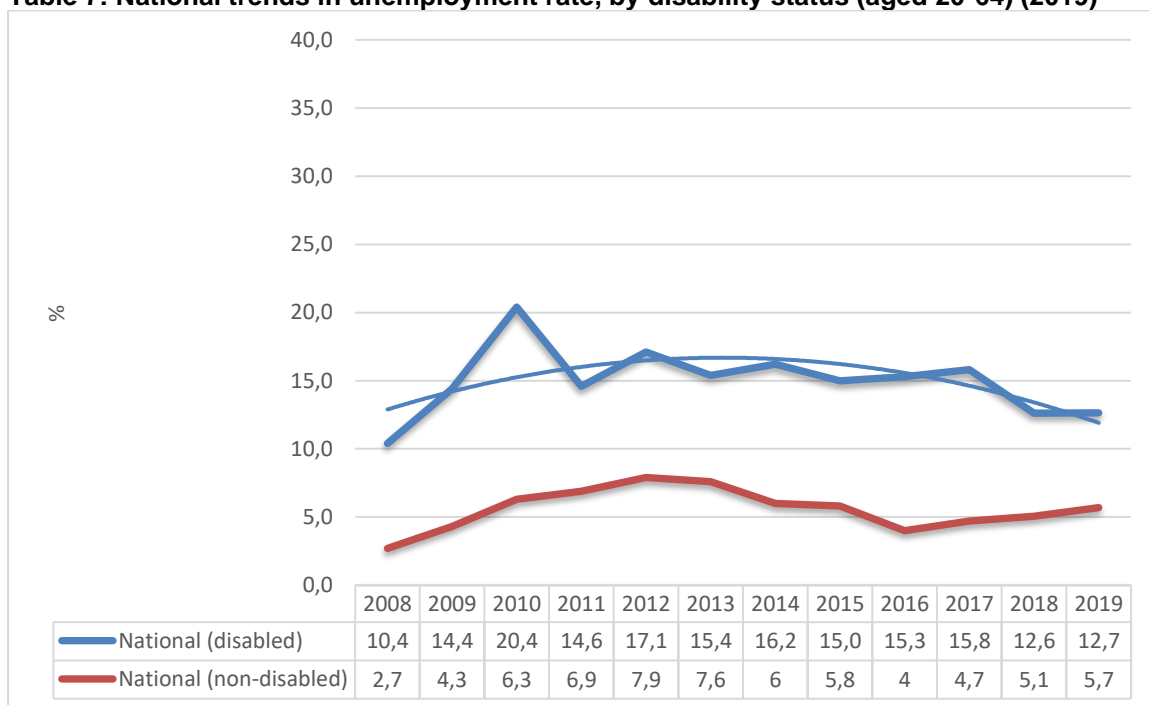
Table 5 shows as expected that unemployment rates are generally lower in Denmark than the average but follow the same disability patterns.

Table 6: Unemployment rates in Denmark, by disability and age group (2019)



The pattern in Table 6 with lower disability employment gap for the younger than for the older age groups is similar to earlier years, but the numbers are quite small to disaggregate in age groups, and details in the figure varies considerably from year to year, so caution is advised.

Table 7: National trends in unemployment rate, by disability status (aged 20-64) (2019)



Source: EU-SILC 2019 Release 2021 version 1 (and preceding UDBs).

Similarly, the small sample makes disability trend difficult to plot but overall, the gap appears to narrow a bit pre-COVID. The pattern in figure 7 is however similar to the results of national surveys.

7.1.2 Economic activity

Table 8: Activity rates in Denmark, by disability and gender (aged 20-64) (2019)

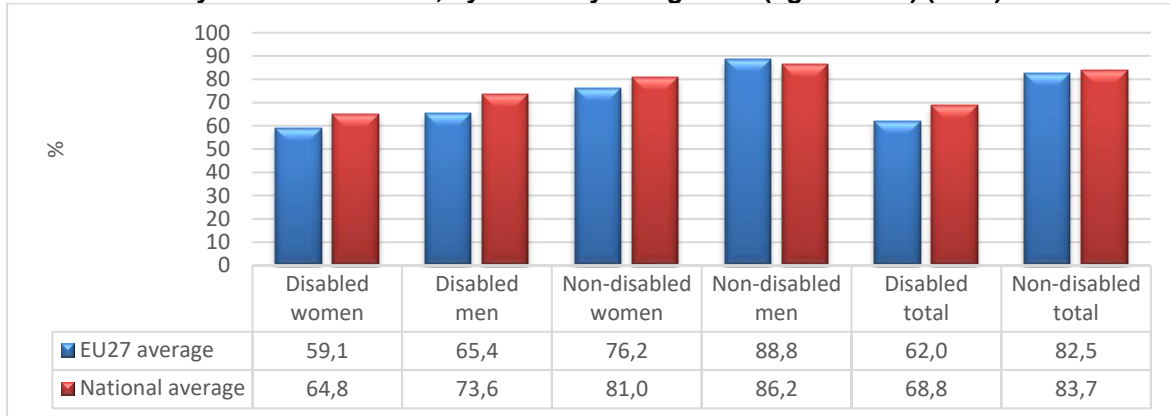


Table 8 shows that the activity rate is larger than EU27 average for most groups, except men without disabilities where it is smaller, resulting in an average activity rate for persons without disabilities total.

Table 9: Activity rates in Denmark, by age group (2019)

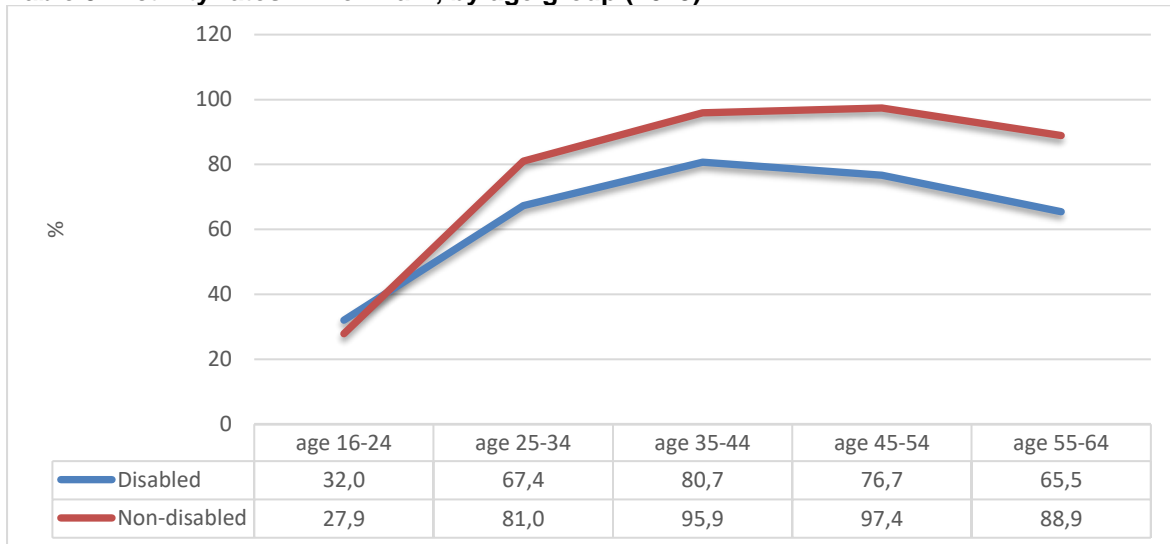
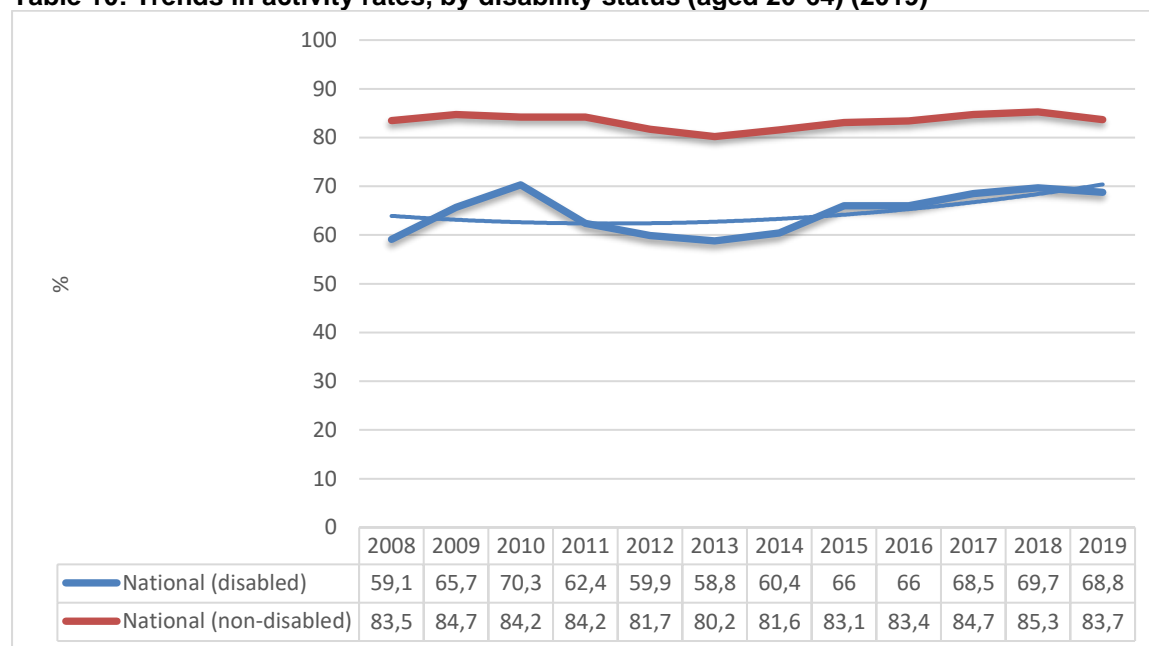


Table 9 shows in accordance with table 3 that the activity gap widens with increasing age.

Table 10: Trends in activity rates, by disability status (aged 20-64) (2019)

Source: EU-SILC 2019 Release 2021 version 1 (and preceding UDBs).

Table 10 shows a development in activity rates similar to the development in employment rates in Table 4.

7.1.3 Alternative sources of labour market data in Denmark

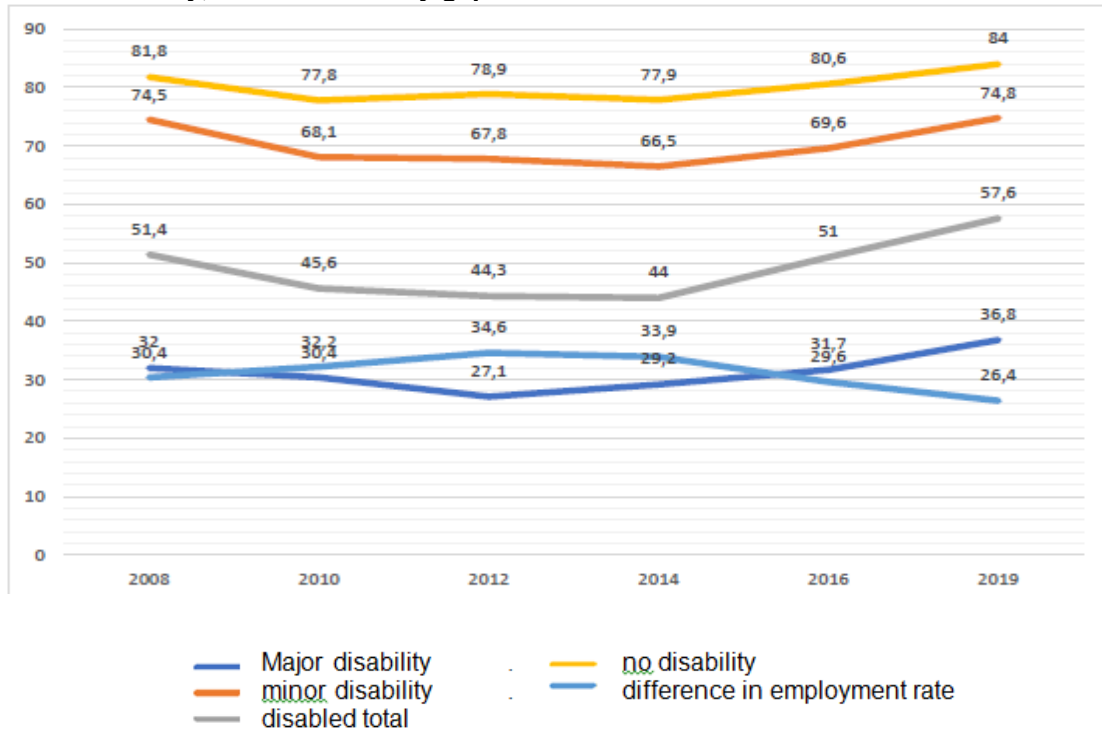
Disability data is not yet available from the core European Labour Force Survey but historical labour market indicators for Denmark were disaggregated from ad modules conducted in 2001 and 2011. These can be found in the Eurostat disability database.³³

The following Figure is from a large sample survey showing a wider disability employment gap³⁴ which develops opposite to employment. The disability data here is divided into minor and major disabilities.

³³ Eurostat Health Database: <https://ec.europa.eu/eurostat/web/health/data/database>.

³⁴ Mona Larsen, Vibeke Jakobsen & Christian Højgaard Mikkelsen (2020): Handicap og beskæftigelse 2019 – viden til at understøtte at flere personer med handicap kommer i arbejde Disability and employment 2019 - knowledge to support more people with disabilities coming to work. København: VIVE.

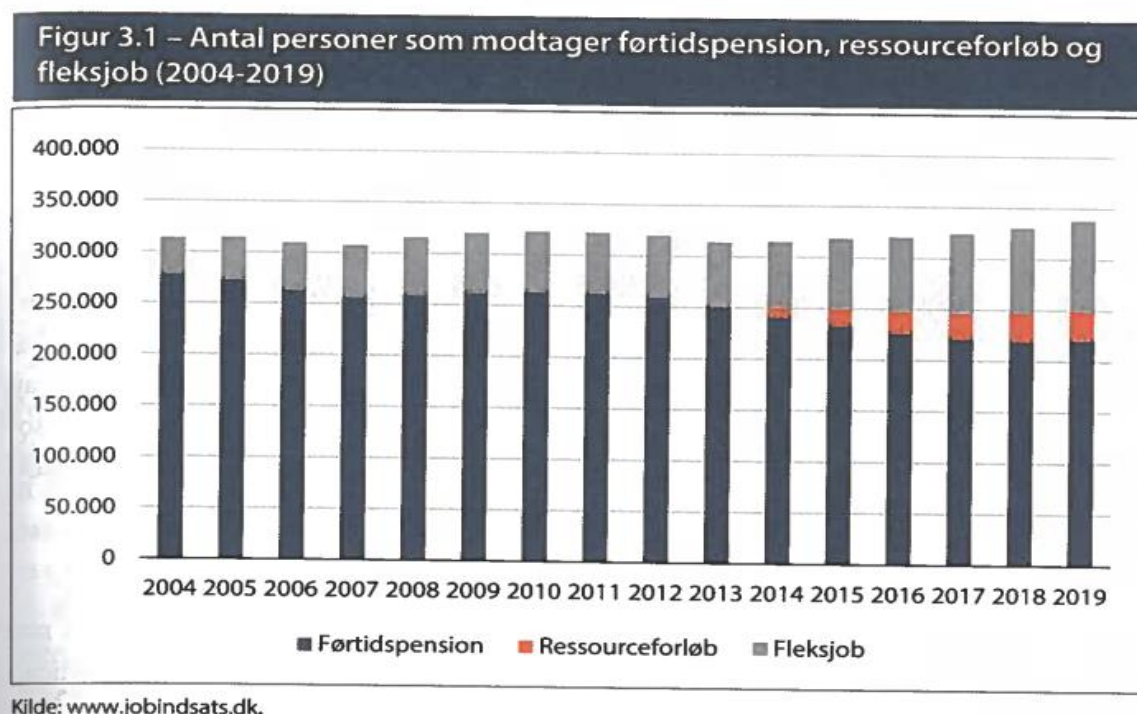
Figure 1: Percent employed among people without disability, among people with different degrees of disability, and the disability gap between 2008 and 2019



The following Figure shows changes over time in the number of people receiving a disability pension, the number of people with the new resource course (Ressourceforløb) and, the number of people with flex jobs.

The figure shows that after the reform in 2013, the number of people receiving disability pension decreases, while the number of people working in flex jobs grows. At the same time, a new group emerges which grows especially in the first years, people with resource courses.

Figure 2: Number of people receiving disability pension, resource course and working in flex jobs 2004-2019



7.2 EU data relevant to disability, social policies and healthcare (2019)

Table 11: People at risk of poverty or social exclusion, by disability and risk (aged 16-59)

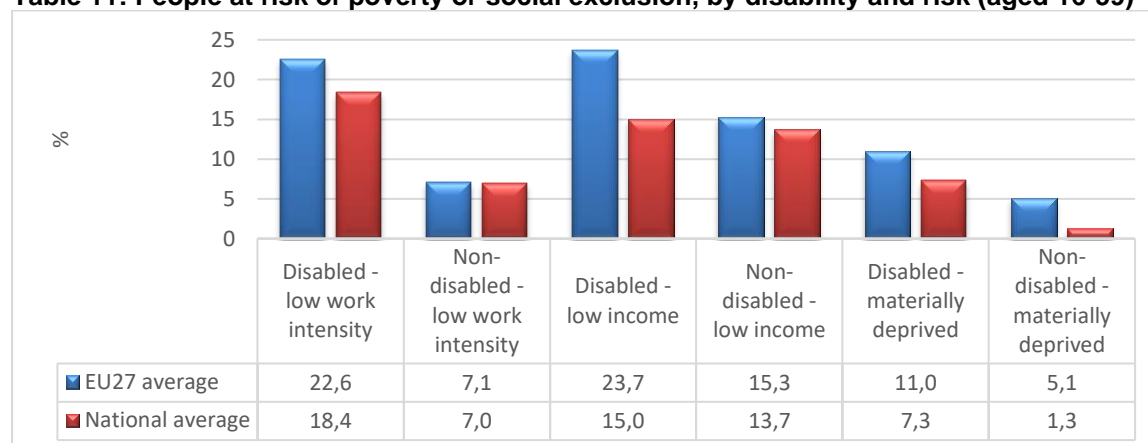


Table 11 shows in most groups a smaller number at risk of poverty than EU27, except among persons without disabilities with low work intensity, where it is the same.

Table 12: People at risk of poverty or social exclusion, by disability and gender (aged 16+)

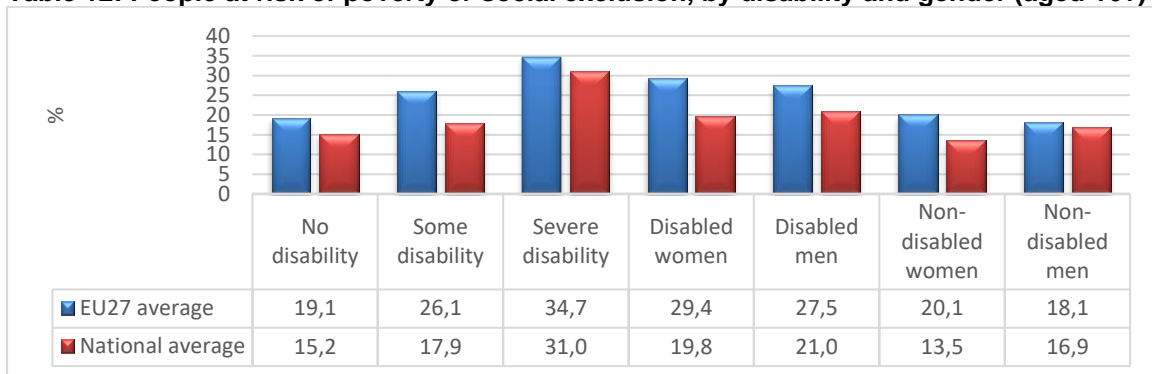
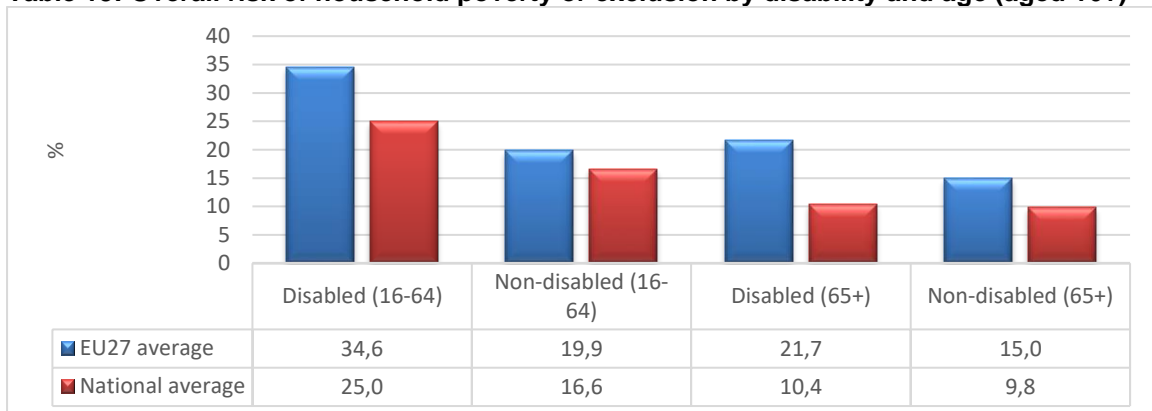


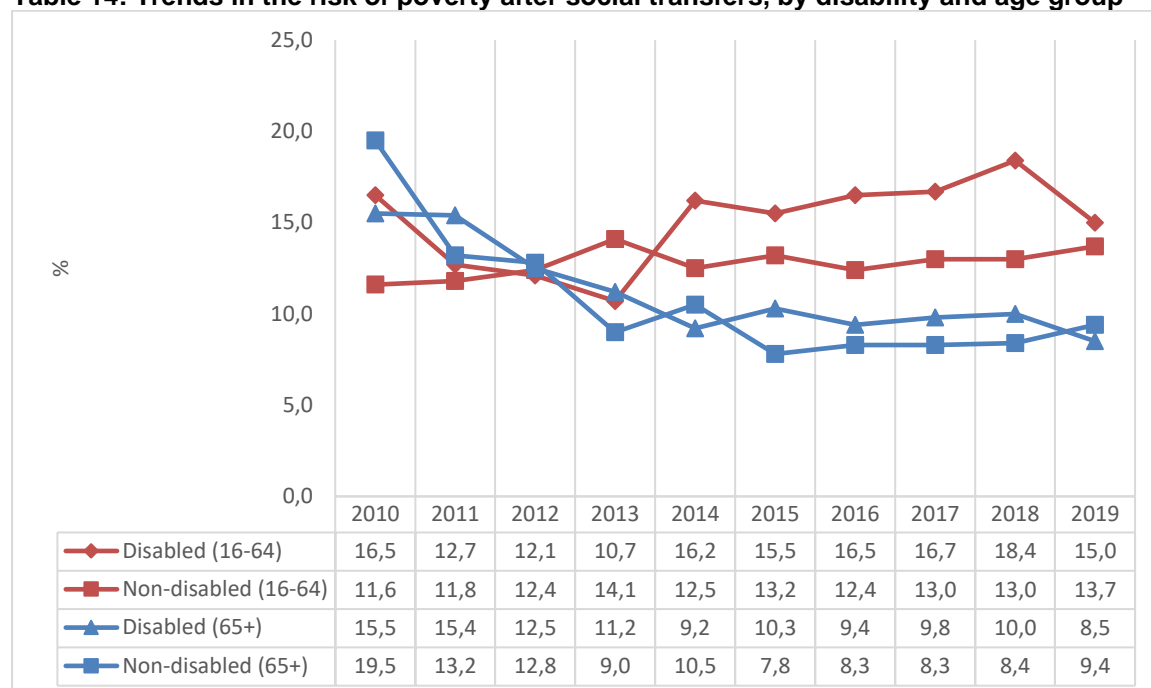
Table 12 shows for all groups a smaller number of persons at risk of poverty or social exclusion, for men without disabilities however only slightly smaller.

Table 13: Overall risk of household poverty or exclusion by disability and age (aged 16+)



Source: EU-SILC 2019 Release 2021 version 1 (and previous UDB).

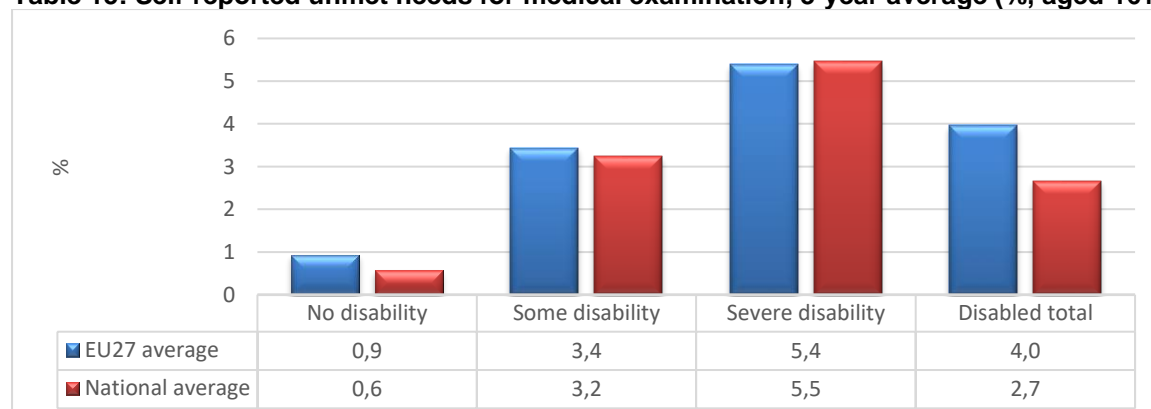
Table 13 shows for all groups by disability and age a smaller risk of household poverty or exclusion than EU27 average.

Table 14: Trends in the risk of poverty after social transfers, by disability and age group

Source: Eurostat Health Database [[hlth_dpe020](#)] - People at risk of poverty.

Note: this table shows national trends in financial poverty risk, rather than the general AROPE indicator (which is not as comparable between age groups due to the effect of paid employment); the survey does not distinguish 'activity limitation' for children under 16.

The trend in table 14 seems to suggest a decrease in poverty risk for persons with disabilities in 2019 which corresponds to the increase in 2014, but none of these rather significant hops are easy to interpret. Furthermore, we see a slight increase for persons without disabilities in 2019, but it is a relative measure of poverty, so the two values interact.

Table 15: Self-reported unmet needs for medical examination, 3-year average (% , aged 16+)

Source: Eurostat Health Database [[hlth_dh030](#)] - 'Too expensive or too far to travel or waiting list'.

Note: due to large variations an average of three years is indicated. EU mean averages are also skewed by high values in a minority of countries within disability groups but median averages for the total disability and no disability groups in 2019 are consistent with the 3-year mean values.

Table 15 shows a strange picture, as the unmet needs for medical examination both for persons without disabilities and for persons with disabilities total are considerably

lower than EU27, whereas the results for some disability and for severe disability are quite even.

7.2.1 Alternative sources of poverty or health care data in Denmark

The EU-SILC data provides a comprehensive and reliable source concerning poverty or social exclusion rates. In addition to the summary tables presented so far, the Eurostat disability database also contains breakdowns concerning disability and poverty before and after social transfers, as well as in-work-poverty.³⁵

7.3 EU data relevant to disability and education

Table 24: Early school leaving rates, by disability status (aged 18-24 and 18-29)³⁶

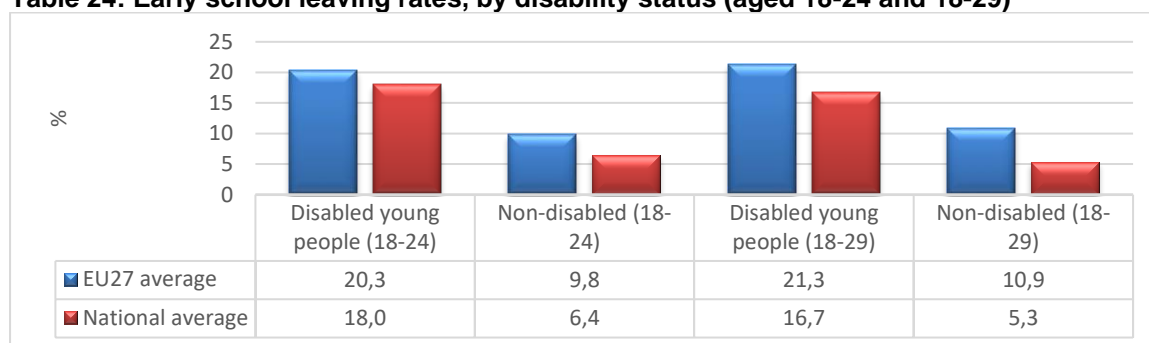
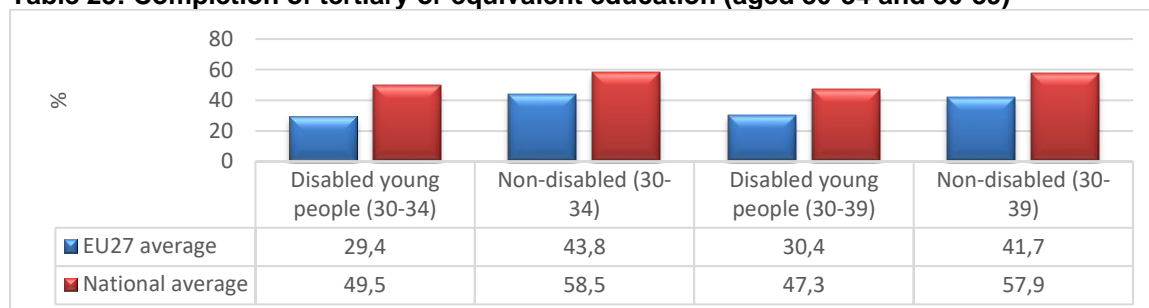


Table 24 shows early school leaving rates that are lower than EU27 for all groups.

Table 25: Completion of tertiary or equivalent education (aged 30-34 and 30-39)



Source: EU-SILC 2019 Release 2021 version 1 (and preceding UDBs).

Note: Confidence intervals for the disability group are large and reliability low (due to the small sample size in the target age group). An average of several years may be needed to establish trends or to compare breakdowns by gender.

Table 25 shows higher rates for completion of tertiary or equivalent education for age groups 30-34 and 30-39 than EU27.

7.3.1 Alternative sources of education data in Denmark

Disability data is not included in the core European Labour Force Survey, but education and training indicators were disaggregated from ad hoc modules

³⁵ Eurostat Health Database, <https://ec.europa.eu/eurostat/web/health/data/database>.

³⁶ There was a change from ISCED 1997 to ISCED 2011 qualification definitions in 2014 although some Member States continued to use the older definition after this time.

conducted in 2001 and 2011. These can be found in the Eurostat disability database.³⁷ Similar caution is needed with this data.

Some administrative data is also provided in the European Agency's Statistics on Inclusive Education (EASIE), concerning the population of enrolled students identified with special educational needs in Denmark.³⁸

Further data is reported in chapter 5.1 on education and skills.

³⁷ Eurostat Health Database, <https://ec.europa.eu/eurostat/web/health/data/database>.

³⁸ European Agency for Special Needs and Inclusive Education, *Statistics on Inclusive Education*, <https://www.european-agency.org/data/data-tables-background-information>.

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