

**Access to social protection
for workers and
the self-employed:**

**Focus on accidents at work and
occupational diseases**

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6 February 2024, Brussels

Significance of accidents at work and occupational diseases related benefits

- Regulatory distinction between sickness benefits and work-related injury and illness benefits in most MS.
- Such schemes encourage employers to identify and mitigate work-related hazards and create a safer, less stressful, work environment, lowering worker absenteeism.
- They often have more generous income replacement rates than sickness schemes.
- Some MS explicitly recognise the need for additional compensation and entitlements for traumatic work-related events (e.g. AT, DK, IT, LU, SE).
- The Netherlands takes the opposite approach, treating injury/disability as a social risk regardless of work-related origin.
- Renewed interest in insurance against occupational diseases in the pandemic.

Access and adequacy for employees

- The scheme generally accessible to employees in all MS except the Netherlands.
- In 2023 not accessible to some categories of non-standard workers in LV, PL, PT and RO, and on a voluntary basis to others in PT.
- No qualifying period for access, substantially easier to access than sickness.
- The benefit is also *de jure* typically more generous than sickness.
- In most MS, the reference wage is calculated in the same way as for sickness – workers without an adequate reference wage get inadequate compensation.
- DE, FR and HU are exceptions, as they have shorter periods for reference wage calculation than for sickness.

Formal coverage of the self-employed by the scheme in EU-27

- *Compulsory scheme (11 MS)*: AT, HR, Hungary, IT (no scheme for liberal professions and some tradespeople), LU, MT, PL, PT, SI, ES (voluntary for farmers), and SE.
- *Voluntary scheme (3 MS)*: DK, FI (compulsory for farmers) and DE (compulsory for farmers); for low-income categories in AT and LU.
- *Partial scheme (2 MS)*: EL (only craftsmen), FR (compulsory scheme for farmers)
- *No scheme (11 MS)*: BE (only exists for asbestos exposure), BG, CY, CZ, EE, IE, LV, LT, RO, SL and NL

Effective access and adequacy for the self-employed

- In the 14 MS where the scheme exists, the beneficiary generally has access cash benefits under less stringent conditions than in the case of sickness.
- Levels of compensation are also typically higher than in the case of non-work-related injury or illness.
- Issues of adequacy remain pertinent in the same way as for sickness benefits: Income basis is adjusted to increase benefit adequacy for accidents at work and occupational diseases for the self-employed only in Germany.
- In the 11 MS without this scheme for the self-employed, they rely on invalidity/disability insurance.
- Difficult to assess adequacy of health-related coverage of the self-employed without getting into the gist of how sickness, accidents at work and invalidity schemes interact.

Challenges for the self-employed

- Lack of access for 3.9 million self-employed in 9 reporting MS.
- Principles of access for the self-employed more complicated; traditionally considered solely responsible for their working conditions.
- Exposed to occupational hazards beyond their immediate control (e.g. COVID19).
- Debate on preventative paid leave for vulnerable self-employed individuals with chronic illnesses exposed to occupational hazards (e.g. in essential jobs/services).
- Conflicting goals in balancing cost competitiveness and comprehensive social protection insurance packages:
 - Research presented in a mutual learning event in February 2020: Belgium's self-employed were reluctant to pay additional contributions.
 - Romania removed some schemes, including the accidents at work one, to reduce labour costs and thus encourage formalisation of self-employment.

Thank you for your attention!

Questions or comments?

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