Poverty and Social Exclusion of Persons with Disabilities

European Human Rights Report
Issue 4 - 2020
By Haydn Hammersley

With contributions from Lillie Heigl, Tania Katsani, Mia Ahlgren, Luisa Bosisio Fazzi, Ríona Morris and Kamran Mallick

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European Disability Forum’s series of Human Rights Reports

The European Disability Forum (EDF) is an independent organisation of persons with disabilities that defends the interests of more than 100 million persons with disabilities in Europe. This is the fourth issue of our Human Rights Report Series, which aims to track the progress of the realisation of the rights of persons with disabilities in Europe.

- The first issue was centred on the United Nations Convention on the Rights of Persons with Disabilities (CRPD), marking its 10th anniversary and providing an overview of the commitment to the CRPD in Europe.
- The second issue gave an overview of the state of play in relation to the 2030 Agenda for Sustainable Development and the Sustainable Development Goals (SDGs) in Europe and how it links with the CRPD.
- The third issue focused on equality and protection against discrimination for persons with disabilities.

The series stimulates comparison between European countries, studies key aspects of the implementation of the CRPD and provides recommendations to policy makers at both national and EU levels. The EU and all of its Member States have ratified the CRPD, albeit with some important gaps: not all countries have ratified the Optional Protocol to the CRPD and many States have made declarations and reservations which limit their commitment to the Convention.

This issue addresses how persons with disabilities in the EU experience poverty and social exclusion. Despite the ratification of the CRPD, there have not been significant improvements in the living conditions of persons with disabilities and their families in the EU. Furthermore, the issues of income, social protection and employment are frequently cited by persons with disabilities as being priority issues. Consequently, this report looks at the following questions: How affected are persons with disabilities by poverty and social exclusion? What are the main causes? What must policy makers do about it?

To answer these questions, this report includes a comparative study of poverty rates of persons with disabilities in different Member States, with a particular focus on the impact of the economic crisis and austerity measures. It also explores the impact of varying disability assessment models and provides an overview of the employment situation for persons with disabilities in different countries. Finally, the obligations of the EU and its Member States are explored in order to tackle this pressing issue alongside specific policy recommendations.

All EDF Human Rights Reports are available on EDF’s webpage: [http://www.edf-feph.org/otherpublications](http://www.edf-feph.org/otherpublications).
Methodology

The Report was developed by EDF’s Social Policy and Inclusion Committee, under the direction of EDF’s Executive Committee. It was written with the help of guest authors including persons with disabilities willing to share their lived experience. All country-specific information was verified by national disability councils or disability organisations working in the Member States. The report as a whole was reviewed by EDF’s Board members.

The European Anti-Poverty Network (EAPN) and the European Federation of National Organisations Working with the Homeless (FEANTSA) provided guidance on the direction of the publication, research papers to be used to support this publication, and on the use of language.
About the data used

The comparative data on poverty and employment levels of persons with disabilities are taken from the European Union Statistics on Income and Living Conditions (EU SILC). With regard to the risk of poverty and social exclusion for persons with disabilities, EU SILC and national statistics offices sometimes set different thresholds for classifying a person as having a disability. The figures for almost all Member States are taken from 2018, with the exception of Ireland, Slovakia and the UK, where the most recent figures available were from 2017. The data on employment rates comes from the 2017 EU SILC, which was the most recent made public at the time EDF conducted its research for this publication. Information on methods for disability assessment and policies for the employment of persons with disabilities were taken from the national reports of the Academic Network of European Disability Experts (ANED)\(^1\), before being updated and verified by EDF’s national members.

EU SILC is an EU data-collection instrument that focuses on income, poverty, social exclusion and living conditions. It is important to note that figures from EU SILC can differ from national data and, in some cases, show lower figures for poverty and unemployment among persons with disabilities. EU SILC only targets people living in private households; therefore excluding people living in institutions or experiencing homelessness.

In addition, the sub-indicator “at-risk-of-poverty rate after social transfers” used by EU-SILC should be viewed with caution. This classes people living in a household with an equivalised disposable income of less than 60% of the median national average after social transfers, as being at risk of poverty. Therefore, poverty thresholds are relative to the general income distribution of each country. In other words, in countries with low average household income, the level of disposable income would have to be far lower to class a household as being at risk of poverty than in rich countries. The poverty thresholds are arbitrary and do not reflect real poverty in terms of living conditions, but rather how much disposable income you have compared to others in your country. It also means that, in countries where income levels were slashed during the financial crisis, a household once deemed “poor” but maintaining the same level of income might no longer be classed as “at risk of poverty” despite the fact that their living conditions have not improved, simply because the conditions of those around them have gotten worse.

It should also be noted that there is a lack of disaggregated data at EU level. We are therefore limited when it comes to understanding the types of disabilities or conditions linked to particular barriers. It also makes it difficult for us to analyse cases of multiple discrimination on the basis of ethnicity, sexual orientation, etc.
Glossary

**Discrimination**: any distinction, exclusion or restriction on the basis of one or several grounds (sex, race, disability, sexual orientation, gender identity, etc.) which damage or nullify the recognition, enjoyment or exercise, on an equal basis with others, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field.

**(EU) Directive**: legislative act that sets out a goal that all EU countries must achieve. The Directive must be transposed at national level. It means that it is up to the individual countries to decide on the basis of their own laws how to reach these goals.

**European Commission**: the EU’s politically independent executive arm. Its core responsibilities include proposing EU laws and policies and monitoring their implementation.

**European Disability Forum (EDF)**: an independent organisation representing the rights of 100 million persons with disabilities in Europe. It is a unique platform that brings together representative organisations of persons with disabilities from across Europe and is run by persons with disabilities and their families.

**European Union (EU)**: a unique economic and political union between 27 European countries, as it stands at the time of the creation of this publication. Gross Domestic Product (GDP): the total value of goods produced and services provided in a country during one year.

**Member States (of the EU)**: the EU currently consists of 27 countries, also called “Member States”. Each Member State is party to the founding treaties of the Union, and thereby subject to the privileges and obligations of membership. Unlike members of most international organisations, the Member States of the EU are subject to binding laws in exchange for their representation within the common legislative and judicial institutions. Although the UK is no longer a Member State as of January 31 2020, it was still part of the EU at the moment the data in this publication was collected and thus appears alongside the 27 Member States in all maps and charts.

**Percentage Points (pp)**: express the arithmetic difference of two percentages, whereas percent (%) refers to the rate of change. For example, if Country A has an employment rate of 30% and Country B has an employment rate of 60%, Country B’s employment rate is 30pp higher than County A’s but is also higher by 100%.
Person with disabilities: Those who have long-term physical, mental, intellectual or sensory impairments which, in interaction with various barriers, may hinder their full and effective participation in society on an equal basis with others.

Poverty: defined in this publication as below the at-risk-of-poverty threshold, which is set at 60 % of the national median equivalised disposable income after social transfers.

Reasonable accommodation: necessary and appropriate modification and adjustment, where needed in a particular case, to ensure to persons with disabilities the enjoyment or exercise of their human rights and fundamental freedoms on an equal basis with others. To be “reasonable” the accommodation cannot impose a disproportionate or undue burden. Denial of reasonable accommodation is a form of discrimination.

Social Exclusion: a process whereby certain individuals are pushed to the edge of society and prevented from participating fully by virtue of their poverty, or lack of basic competencies and lifelong learning opportunities, or as a result of discrimination. This distances them from job, income and education opportunities as well as social and community networks and activities. They have little access to power and decision-making bodies and thus often feeling powerless and unable to take control over the decisions that affect their day-to-day lives.

States Parties (to the CRPD): countries that have signed and ratified the CRPD and have committed to making the rights of persons with disabilities a reality. The European Union, having concluded the CRPD, is also a State party together with all its Members States.

United Nations Convention on the Rights of Persons with Disabilities (CRPD): an international human rights treaty that reaffirms that all persons with disabilities must enjoy all human rights and fundamental freedoms. It clarifies that all persons with disabilities have the right to participate in the civil, political, economic, social and cultural life of the community the same as anyone else.
FOREWORDS
Ioannis Vardakastanis - President of the European Disability Forum

In Europe, we pride ourselves on our solidarity. We are a continent with a long history of strong social protection, accessible healthcare and free education. And yet these principles often take a back seat when it comes to persons with disabilities. Almost two decades into the 21st century, being a person with a disability in the European Union is still synonymous with an increased risk of poverty, unemployment and social exclusion. It is an uncomfortable reality that many are far too happy to ignore, but it is time for us to clearly acknowledge that European solidarity does not extend fully to persons with disabilities.

In this, the fourth edition of the European Disability Forum’s Human Rights Report, we will explore the true extent of poverty and social exclusion facing persons with disabilities in the European Union.

There are currently an estimated 100 million persons with disabilities in the EU. This is not a small group by any stretch of the imagination. It easily surpasses the population of Germany, the EU’s largest Member State. And yet, as prominent as our community is, at EU, national and regional level, policy makers still overlook policy changes that could reduce poverty risks and support persons with disabilities to take part actively in their communities. What this publication will outline is how persons with disabilities, particularly women, are systematically more at risk of poverty and social exclusion than the rest of the population. At risk of not being able to pay rent, of not being able to heat their homes, of not even being able to pay for food, and cut off from opportunities for social mobility that are available to the general population. More shockingly, we’ll see the extent to which persons with disabilities have borne the brunt of the financial crisis over the last decade, resulting in the situation for many Europeans with disabilities being far worse than it was 10 years ago.

It is time for Europe to take a good look in the mirror and assess how much solidarity our societies really display. This moment of reflection should be an opportunity to lift the lid on some inconvenient truths and shed some light on what persons with disabilities and their representative organisations are really calling for in order to improve the situation.

Understanding the issue is the first step to devising solutions, and the sooner we take note of the reality of persons with disabilities in Europe, the sooner we can begin working together for a fairer future.
Helena Dalli – European Commissioner for Equality

Equality is one of the European Union’s fundamental values along with respect for human rights, human dignity, freedom, democracy, and the rule of law. Yet, too many people in Europe continue to experience inequalities on the grounds of sex, race or ethnic origin, religion or belief, disability, age or sexual orientation, or unequal treatment on multiple grounds.

As the first Commissioner for Equality, I am deeply committed to working on strengthening equality for all Europeans, including people with disabilities. A dignified standard of living for all and the enjoyment of basic human rights are essential to fulfil the values that the European Union stands for.

In leading on the EU’s implementation of the United Nations Convention on the Rights of Persons with Disability, I will also champion the implementation of the principles in the European Social Pillar, including income support that ensures living in dignity, services that enable participation in the labour market and in society, and work environments adapted to individuals’ needs.

This report by the European Disability Forum provides much-needed insight on the underlying reasons why persons with disabilities are disproportionately at risk of poverty and social exclusion. It explores the extent of the problem and is based on data collected by the European Commission and by researchers in the Member States.

The report also shares personal stories from throughout the Union. We learn about the quality of life of individuals with disabilities from around Europe and how their security is affected by living in a society insufficiently adapted to meet their needs.

As the Commissioner for Equality, I will ensure that the actions of the European Union contribute to tackle social exclusion, poverty and the lack of opportunities currently faced by far too many persons with disabilities. Tackling these inequalities requires the mainstreaming of equality on the ground of disability throughout all EU policies.

I will work actively together with all EU Commissioners to achieve this. Additionally, I want to work together with organisations of people with disabilities to devise and implement strategies and policies to bring about real change for all.

Nothing about you, without you.
Carlos Susias - President and Executive Member of the European Anti-Poverty Network (EAPN)

We all share a moral and social responsibility to ensure a poverty-free Europe where everyone has a decent standard of living. This reflects our shared value of justice for all and protecting each other from harm. The fact that over 113 million people in Europe are living at risk of poverty and social exclusion highlights that we must take these values more seriously. As this report by EDF outlines, persons with disabilities are very much present within this statistic and are one of the particularly vulnerable groups. They are in a worse situation according to practically all indicators.

In recent years, European leaders have made ambitious political commitments in the Sustainable Development Goals (SDGs) and the European Pillar of Social Rights. Political leadership is crucial to ensure a transformative implementation of these commitments and to ensure meaningful changes to the lives of people experiencing poverty. This means not simply relying on coordination efforts and “soft law”, but constructing action plans containing binding measures for implementation. With the definition of the new Multiannual Financial Framework, the new Commission and the Parliament now also have a historic opportunity that they cannot afford to lose, which could meaningfully support these goals.

An urgent priority for leaders must be a review of Europe 2020: A strategy for smart, sustainable and inclusive growth and the creation of a Europe post-2020 strategy, underpinned by the SDGs and the Social Pillar. This must form the guiding principles for a sustainable Europe, free of poverty and social exclusion. The strategy must aim to leave no-one behind, enable us to live within Europe’s fair share of our planetary boundaries, and put respect for human rights at the core of EU and national policy-making.

The targets within the post-2020 strategy should also particularly address vulnerable groups, of which persons with disabilities are one, reinforcing the need to bridge the gaps between such groups and the general population.

As highlighted in this publication, another crucial issue is that of social protection. This is not just about ensuring that everybody has adequate income, it is also about access to care and support at times of need, something that is particularly relevant to persons with disabilities. Households with members with a disability, particularly single-parent households, suffer deeply from a disturbed life balance, being confronted with duties and tasks,
but often with no relief or possibility for improvement in their future. We must acknowledge and address the economic costs incurred by households with persons with disabilities.

It is promising for the economy that European leadership appears committed to ensure that every worker in Europe has a fair minimum wage, allowing for a decent living wherever they work. In-work poverty is a growing issue and a key focus for EAPN. Low wages, low quality jobs and business models that erode social rights are all contributing factors. In this sense, the integration of persons with disabilities in the labour market poses a great challenge, since their employment rate is insufferably lower than that of persons without disabilities.

Those at risk of poverty and social exclusion in the EU see nothing of economic prosperity – the trickle-down economy is a myth. Their housing costs are becoming unbearable, much more so for persons with disabilities, and their belief in and hope for improvement is declining day by day. Eradicating poverty is a question of rights and of justice.

Poverty is an inevitable consequence of political choices, and an explicit denial of fundamental human rights, brought about by moral, economic and political systems – systems which we can make fairer, more compassionate, more reflective of our European values. Ending poverty in all its forms must be a pre-requisite for effective social and sustainable development, and poverty eradication must be at the heart of Social Europe.
EXECUTIVE SUMMARY

The fourth edition of the European Disability Forum’s Human Rights Report aims to present the true extent of how poverty and social exclusion affects persons with disabilities in the EU. It highlights how EU countries have largely failed at reducing poverty faced by persons with disabilities, especially in the wake of the financial crisis (from 2008): 28.7% of persons with disabilities living in the EU are at risk of poverty. This report shows that the situation has worsened since 2010 in 11 EU countries: Estonia, Luxembourg, Germany, Sweden, Ireland, Czechia, Lithuania, Italy, Netherlands, Malta and Spain.

It shows how, in all EU countries, persons with disabilities are more likely to be poor and unemployed than persons without disabilities. Not only are persons with disabilities poorer, but they also face extra costs from living in a society that is not adapted to them: disability-related costs estimated at 23,012 Euros per year in Sweden or 14,550 Euros per year in Belgium, for example.

Given the extent of the problem, we are urging EU and national decision-makers to take on board our recommendations, presented in full at the end of this report. These include:

- Fully implementing the EU Pillar of Social Rights by establishing an action plan that includes proposals for the inclusion of persons with disabilities.
- Establishing a follow-up to the European Disability Strategy 2010-2020 for the coming decade, including measures to address poverty and social exclusion of persons with disabilities and their families.
- Adopting legislation that will protect persons with disabilities against discrimination in all areas of their lives, not just employment.
- Fostering job creation by establishing a Disability Rights Guarantee ensuring an offer of employment, apprenticeships, training or life-long-learning. This can be further supported by offering person-centred and flexible support to persons with disabilities seeking work, helping them not lose disability allocations when taking up work, as well as setting standards for reasonable accommodation in the workplace and necessary support or assistance.
- Favouring the use of disability assessment methods that follow a CRPD-compliant and holistic approach, looking at a person-centred approach and using a combination of impairment and functional considerations.
- Investing in the accessibility of all support structures and services provided to the general public to enable persons with disabilities to make use of them, reducing the need to resort to costly, specialised services, thus minimising extra disability-related costs to individuals.

The report also outlines how all these actions are necessary in light of the EU and the Member States’ commitment to the UN Convention on the Rights of Persons with Disabilities.
INTRODUCTION

The level of poverty and social exclusion in 21st-century Europe is alarming. According to recent figures, 19.2% of people in the European Union (EU) are at risk, which is around 1 in 5 people. However, this is nothing compared to the figure we see for persons with disabilities, an estimated 28.7% of whom are at risk of poverty and social exclusion. In this fourth edition of the European Disability Forum’s Human Rights Report, we will take stock of the true extent of this problem in the EU. To do this, we will:

Explore the reasons why having a disability, or even living in a household with a person with disabilities, can greatly increase the risk of poverty and social exclusion. We will assess the additional cost of living that can arise from having a disability in a society ill-equipped to meet one’s needs. We will also look at how being a woman with a disability further increases the risk of poverty.

Study the link between disability and extreme cases of poverty, particularly homelessness, and analyse the extent to which the financial crisis and austerity have impacted poverty rates among persons with disabilities.

Address some key barriers to employment in the open labour market, resulting in persons with disabilities being at a far higher risk of unemployment than those without disabilities. We will also highlight how persons with certain types of disability are shown to face disproportionate barriers.

Explain the role of disability assessment and benefits in the prevention of poverty and social exclusion, ask how well-adapted the various systems in place around the EU are to meet the needs of persons with disabilities. We will also study which actions are being taken in Member States, as well as what the EU itself is doing to address the issue.

The learning from our research has been channelled into clear recommendations for action to be taken by national and EU policy makers. You will find these recommendations in the final section.
Chapter 1: The United Nations Convention on the Rights of Persons with Disabilities

The CRPD is an international human rights treaty reaffirming that persons with disabilities enjoy all human rights and fundamental freedoms. It clarifies that persons with disabilities have the right to participate in civil, political, economic, social and cultural life in the community, just like anyone else. It stipulates what public and private authorities must do to ensure and promote the full enjoyment of these rights by all persons with disabilities.

The CRPD was adopted in 2006 by the General Assembly of the United Nations (UN). 177 countries and the European Union (EU) are States Parties to the CRPD. It is also the world’s fastest-ratified international human rights treaty.

In Europe, the CRPD has also been ratified rapidly. The EU has been a State Party to the CRPD since 2011. Ireland was the last EU Member State to ratify the Convention in March 2018. This means that now every Member State of the EU has ratified it. This is the first time that there has been universal ratification of an international human rights treaty in the EU. Other countries in Europe that have ratified the CRPD include Albania, Andorra, Iceland, Monaco, Montenegro, North Macedonia, Norway, San Marino, Serbia, Turkey.

States Parties are obliged to submit an initial report to the CRPD Committee on measures taken to implement the CRPD two years after the CRPD comes into force in their country. Some EU Member States have not sent in their first state report to the CRPD Committee, thereby blocking the Committee’s review process on progress made by those countries towards the implementation of the CRPD. This is the case for the following countries: Romania (state report was due 2 February 2013) Iceland (state report was due 23 October 2018) and San Marino (state report was due 22 March 2010).

EDF calls on Romania, Iceland and San Marino to urgently submit their initial state report to the CRPD Committee.

The Optional Protocol

The Optional Protocol (OP) to the CRPD is an additional agreement to the Convention that allows for individual complaints to be submitted to the CRPD Committee by individuals and groups of individuals, or by a third party on behalf of individuals and groups of individuals, alleging that their rights have been violated under the CRPD. Complaints may only be communicated against a State Party that has ratified or acceded to the OP. If the CRPD Committee makes a finding that the State has failed in its obligations under
the CRPD, it will issue a decision requiring that the violation be remedied and for the State Party to provide follow-up information.

Twenty-two Member States, as well as all candidate countries have ratified the Optional Protocol. However, None of the EEA/EFTA countries (Norway, Iceland and Liechtenstein) have ratified it.

The CRPD Committee calls on each State Party to ratify the Optional Protocol. You can read the full text of the CRPD and the Optional Protocol on the web page of the CRPD Committee: www.ohchr.org/EN/HRBodies/CRPD.

EDF calls on:

- Liechtenstein to ratify the CRPD without further delay.
- the EU, as well as Bulgaria, Czechia, Ireland, the Netherlands, Poland, Romania, Iceland, Liechtenstein, Norway and Switzerland, to ratify the Optional Protocol.
- Romania, Iceland and San Marino to urgently submit their initial state report to the CRPD Committee.
Chapter 2: Persons with disabilities and the risk of poverty and social exclusion

Available data on disability in the EU

Data collected at EU level suggests that there are currently approximately 100 million persons with disabilities in the EU. This data source itself counts 99 million persons with disabilities living in households in the EU, 30.5 million of whom would class themselves as having a “severe disability”. We then need to add the more than one million people that live segregated in residential institutions to this figure who are not counted.

The data reveals that being a person with a disability in the EU significantly increases the risk of experiencing poverty and social exclusion. EU figures suggest that 28.7% of all persons with disabilities currently live in poverty and experience social exclusion. Given the estimated population with disabilities mentioned above, this means that poverty and social exclusion is a reality for just under 29 million persons with disabilities in the EU.

Persons with disabilities are shown to face a higher risk of poverty and social exclusion than the general population in all 28 Member States and even more so if you are a woman with disabilities.

![Map of EU showing percentage of persons with disabilities at risk of poverty and social exclusion by Member State]

- Countries with <25% risk
- Countries with 25%-35%
- Countries with >35%

1. The Netherlands 22.7%
2. Belgium 30.5%
3. Luxembourg 28.8%
4. Czechia 23.8%
5. Slovakia 18.4%
6. Austria 21.7%
7. Slovenia 24%
8. Croatia 37.1%

See endnote for Lithuania regarding the map above.
Certain countries see soaring rates of poverty and social exclusion for persons with disabilities. In Bulgaria, almost half of all persons with disabilities are at risk (49.4%). Other countries also fare particularly badly, including Estonia (41.7%), Latvia (43.6%), Lithuania (43%), Ireland (38.1%), Croatia (37.1%) and Romania (37.6%).

A stark difference in poverty risks between those with and without disabilities can indicate which countries offer insufficient support for persons with disabilities. It can also illustrate how, or indeed if, the CRPD is being implemented.

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**Increase in risk of poverty and social exclusion in percentage points (pp) for persons with disabilities compared to general population**

<table>
<thead>
<tr>
<th>Country</th>
<th>Increase in Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ireland</td>
<td>19.1pp</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>15.3pp</td>
</tr>
<tr>
<td>Denmark</td>
<td>7.9pp</td>
</tr>
<tr>
<td>Portugal</td>
<td>10.6pp</td>
</tr>
<tr>
<td>Spain</td>
<td>7pp</td>
</tr>
<tr>
<td>France</td>
<td>6.7pp</td>
</tr>
<tr>
<td>Germany</td>
<td>15.1pp</td>
</tr>
<tr>
<td>Italy</td>
<td>4.5pp</td>
</tr>
<tr>
<td>Greece</td>
<td>1pp</td>
</tr>
<tr>
<td>Cyprus</td>
<td>13.7pp</td>
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<tr>
<td>Malta</td>
<td>13.2pp</td>
</tr>
<tr>
<td>Slovenia</td>
<td>11.1pp</td>
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<tr>
<td>Austria</td>
<td>7.6pp</td>
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<tr>
<td>Czechia</td>
<td>13.5pp</td>
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<tr>
<td>Slovakia</td>
<td>4.9pp</td>
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<td>Austria</td>
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<td>Sweden</td>
<td>14.7pp</td>
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<tr>
<td>Finland</td>
<td>9.1pp</td>
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<tr>
<td>Poland</td>
<td>12.9pp</td>
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<tr>
<td>Lithuania</td>
<td>20.5pp</td>
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<tr>
<td>Hungary</td>
<td>12.4pp</td>
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<tr>
<td>Denmark</td>
<td>15.3pp</td>
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<td>Latvia</td>
<td>22.4pp</td>
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<tr>
<td>Estonia</td>
<td>22.5pp</td>
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<tr>
<td>Bulgaria</td>
<td>19.5pp</td>
</tr>
<tr>
<td>Greece</td>
<td>1pp</td>
</tr>
<tr>
<td>Cyprus</td>
<td>13.7pp</td>
</tr>
<tr>
<td>Malta</td>
<td>13.2pp</td>
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</tbody>
</table>

EU SILC 2018, except for Slovakia, Ireland and the UK for which that data is from 2017.

See endnote for Lithuania regarding the map above.

The data shows the greatest disparity in the Baltic countries of Estonia, Latvia and Lithuania. Persons with disabilities in Bulgaria and Ireland are also disproportionately at risk compared to persons without disabilities.

Other countries such as Sweden, Belgium and Germany, typically considered to have well-developed social protection systems, also fare badly. This data might therefore suggest that their social protection systems, while well-established, are not well adapted to meet the needs of persons with disabilities.
Higher risk for women with disabilities

On average, figures indicate that 29.5% of women with disabilities in the EU are at risk of poverty and social exclusion compared to 27.5% of men with disabilities. The figures below indicate the percentage points (pp) by which women with disabilities are more at risk than their male counterparts in the EU Member States. Only in six of the 28 countries are women less at risk than men.

A combination of factors such as the lack of competitive vocational training, digital illiteracy, lack of access to the labour market, unpaid work, the salary gap between men and women, barriers caused by lack of work-life balance and, in general terms, the various forms of discrimination on the grounds of gender and disability, result in women with disabilities being one of the poorest social groups.

Higher risk for young adults with disabilities

Figures collected by the EU suggest that younger adults of working age with disabilities face a higher risk of poverty and social exclusion than older people. This is partly due to the importance of employment income, which remains extremely problematic to access for persons with disabilities. Older persons with disabilities are also slightly more protected than younger persons with disabilities, owing to the protective effect of retirement pensions for each group respectively.
Persons with disabilities from ethnic minorities

Data collection on ethnicity per se is lacking at EU level. However, it has been shown that persons with disabilities from ethnic minorities face more difficulties in accessing services. Part of this is due to the fact that many conditions are underdiagnosed in people from ethnic minorities, such as autism for example18. A group that is particularly susceptible to poverty and social exclusion, and that finds it difficult to access support services, is the Roma community. It is estimated that there are at least 1.6 million Roma with disabilities in the EU and in EU enlargement countries19.

It is also interesting to note that a Eurobarometer survey from 2018 found that 59% of people in the EU considered discrimination based on ethnic origin and skin colour to be widespread, and that 61% considered there was widespread discrimination against people from a Roma background. The same survey found that 44% of people believed there was widespread discrimination based on disability in the EU. It is therefore easy to imagine how multiple and intersectional discrimination faced by persons who have disabilities and are also from ethnic minorities is likely to be even more widespread20.

Persons with disabilities in rural areas

Limited services, adapted housing, accessible transport and employment opportunities can sharply increase the risk of poverty and social exclusion in rural areas. These factors drastically limit the earning potential of persons with disabilities and greatly increase the amount they need to spend to make up for a lack of appropriate services and accessible infrastructure.

Persons with disabilities born outside of the EU

According to EU data, non-EU citizens residing in the EU are almost twice as likely to be at risk of poverty than EU citizens. In fact, 41.2% of all non-EU citizens in the EU are thought to be at risk21. While we do not have EU-level data specifically showing the risk of poverty for persons with disabilities born outside the EU, the indication is that this group is doubly impacted both by way of having a disability and by the extra barriers that come from not being an EU citizen. At even greater risk are refugees with disabilities who are largely unprotected and often do not have access to the support they need22.

Poverty rates at household level

Research from the United Kingdom suggests that childless couples without disabilities have a poverty rate of only 8%. When one of the two people in the couple has a disability, the poverty rate dramatically increases to 28%23.
Poverty rates are higher in households with children, not least for single parent households: 37% where no household members have a disability and 43% when at least one member has a disability\textsuperscript{24}.

It is not just poverty rates that are affected. Unemployment rates also dramatically increase for people living with persons with disabilities. The same study from the UK concluded that in 69% of households where nobody had a disability, all the adults in the household had jobs. In only 9% of such households were no adults employed. However, in households where at least one member has a disability, it is a very different story. Only in 39% of the cases were all adults employed, while in a staggering 27% of these households no adults had jobs.

It has been strongly suggested that many parents of children with disabilities are unable to work because of insufficient services for their children. A recent study in the UK claimed that 93% of parents of children with disabilities who don't work say they would like to, but are restricted from doing so by a lack of childcare and flexibility\textsuperscript{25}. 
PERSONAL TESTIMONY


My disability caused me to lose my job. Due to this I am now struggling financially. I was the sole provider for my family and now my husband has to be my carer as well as caring for our son. The disability benefits are so little that we have very little life outside of just surviving. We can’t afford day trips for our son or trips to museums etc. I also have difficulty with travelling and am unable to receive a powered wheelchair, so I have basically zero social interaction outside of my home.

Extra disability-related costs

Persons with disabilities and their families face additional costs to be able to enjoy the same standard of living as other people. These costs need to be taken into consideration within all social policies. Many of these costs are directly related to the barriers created by an inaccessible society. The extra disability-related costs significantly increase the risk of poverty and social exclusion.

Studies from Ireland suggest that the extra costs for households with a member who has a disability are significant, in order to reach the same standard of living as households with no persons with disabilities. Researchers indicate that having a person with long-term “severe limitations” in a household, costs on average 23.7% of a household’s income, which equated to around 101.40€ per week at the time the study was conducted. When a household member only has “some limitation”, the loss is still estimated at an average of 20.3% household income, or 96.38€ per week.

A UK study suggests that families with children who have disabilities face average extra costs of £581 (659€) per month, and that for almost a quarter of families with children who have disabilities (24%), the extra costs amount to over £1,000 (1134€) per month.

The same study from the UK also attempts to quantify the extra costs incurred by persons with disabilities themselves. It showed that, on average, adults with disabilities face extra costs of £583 (661€) per month. However,
this average obscures the fact that one in five adults with disabilities, having higher support needs, face extra costs of over £1,000 (1134€) a month, even after they have received welfare payments designed to meet those costs29.

According to a 2018 report by the European Parliament Research Service, the additional costs of access to goods and services faced by persons with disabilities in the EU combined comes to between 15€ and 41€ billion per year30. We can get an indication of what the main additional costs are for persons with disabilities by looking at the situation in Spain, outlined in the Special Report by the Spanish National Disability Observatory (OED)31. Here it is shown that the main expenses tend to be medical treatment (29% of expenses) medicine (28.3%), technical aids (28%), transport and mobility (24.3%) and personal assistance (21.6%).

PERSONAL TESTIMONY

Joncour, man aged 19 years on the autism spectrum.
From Rennes, France.

I am a 19-year-old non-verbal autistic person who needs ongoing help. I managed to attain my baccalaureate (French high school diploma) and I go to university. However, the MDPH (body that assesses and notifies the rights of people with disabilities in France) has only granted me 3 hours a day of personal assistance. My family has to cover the costs for the remaining support hours (1000 euros per month) so that I can go to class and have a normal life without my parents, like any young person of my age. This impacts our daily life enormously and puts us in a precarious position32.

Member States with higher disability-related living costs

Researchers from the University of Linz (Austria) and the University of Salamanca (Spain) have attempted to shed light on how countries compare to each other regarding living costs for persons with disabilities33.

Their research suggests that there are Member States where greater costs are incurred by persons with disabilities when trying to make ends meet. Somewhat unsurprisingly, countries with a high cost of living tend to have the highest extra disability-related costs. However, the extra costs are
indicative of much more, highlighting countries where mainstream services and infrastructure, such as transport, housing, education and healthcare, are not sufficiently adapted to the needs of persons with disabilities. The costliest Member States for persons with disabilities, according to this study, are outlined below.

**Estimated average additional cost of living for a person with a disability, based on ability to make ends meet (thousand € per year)**
Chapter 3: Disability assessment and national spending on disability

By Lillie Heigl

Financial investments, in the form of social services made available by the state, are an important factor in lowering the poverty rate of persons with disabilities. Their availability varies greatly across the EU. In order to understand the differences between Member States, it is important to not only look at how much countries invest in supporting persons with disabilities, but also how countries evaluate a person’s need for support through disability assessment.

Disability support investment by Member State

On average EU countries spend 2% of their Gross Domestic Product (GDP) on disability. Some countries invest more, whereas in other countries the share dedicated to persons with disabilities is far lower.

See endnote for chart above.
PERSONAL TESTIMONY

Loredana. Partially sighted woman. Originally from Romania but now living in Leuven, Belgium.

I am a person with very low vision, almost blind. I originally moved from my country of origin, Romania, to Belgium to do a Master’s programme.

To benefit from all services offered to students with disabilities, the first step was to have my disability recognised. I started that procedure in November 2007. Until the full recognition of my disability and the decision as to whether or not to give me a Belgian disability allowance, I had to live on 350€ a month, the 200€ I was still able to get from disability benefit in Romania, and 150€ support from my university. It was only in May 2009 that I finally got the answer that I was approved to receive disability support.

Although I eventually got the support I needed, the precarious financial situation I faced while waiting had an effect on my life. All my money had to go to rent, and fortunately my landlady was kind enough to include meals for me at a small extra cost I could just about afford. But I was unable to go out and socialise with other students because I didn’t have any money to buy a drink or a cinema ticket, for example. I also had difficulty buying clothes, although luckily the parish of my church helped me with this. I was ashamed to ask for help. I didn’t want to feel like I was begging.

Quicker and easier recognition of disability would save people going through such undignified situations.
Disability Assessments

The method for assessing disability, granting benefits, and providing social protection to citizens with disabilities varies substantially by Member State. Some disability assessment models focus exclusively on a medical or functional model of disability without consideration of environmental or social barriers. Furthermore, the variance of systems of assessment prevents recognition of one’s disability when a person moves from one country to another.

In the Country Reports on Disability Assessment by the Academic Network of European Disability Experts (ANED)\(^36\), analysis was done on which methods were used by different EU Member States, each with weaknesses that need to be addressed. The methods typically used are the following:

**Medical approach**: Involves procedures relying on medical assessment and does not take account of the needs of the person being assessed.

**The Barema method**: A list or table, divided into chapters covering physical or mental components of the body. It gives guidance on medical benchmarks against which assessments should be made for each of these components. On this basis, a “percentage of disability” is declared. For example, the loss of an eye might account for 40% disability and the amputation of a foot for 30% disability\(^37\). The overall “percentage of disability” will be the impairment ratings for all different parts of the body combined.

**Functional capacity assessment**: Seeks to establish functional limitations. It involves identifying the abilities and inabilities of an individual. The assessment may involve standardised tests which measure performance and the ability of an individual to perform certain activities.

**Holistic approach**: A holistic assessment combines assessments related to impairment, functional capacity and environmental factors, which more closely aligns with the CRPD and will aid in its successful implementation.

**Several countries** leave their assessments entirely up to medical professionals or officers of the municipality or State, who often do not have an understanding of what a human-rights based model of disability entails. Assessments that only consider a medical condition or a percentage of “incapacity” do not consider the lived experience of the person with a disability or the barriers they encounter on a daily basis.
See end notes for Belgium\textsuperscript{38}, Finland\textsuperscript{39}, the Netherlands\textsuperscript{40}, Italy\textsuperscript{41}, Denmark\textsuperscript{42} and Croatia\textsuperscript{43} regarding the map above.
Assessment process

21 countries are described as having systems of assessment that include either some form of self-assessment by the person with a disability applying, or a face-to-face evaluation with the assessor.

Countries where disability assessment includes self-assessment and/or face-to-face evaluation

- United Kingdom
- Portugal
- Spain
- France
- Italy
- Sweden
- Finland
- Latvia
- Lithuania
- Poland
- Hungary
- Romania
- Bulgaria
- Greece
- Cyprus
- Belgium
- Czechia
- Slovakia
- Austria
- Slovenia
- Croatia
- Norway

PERSONAL TESTIMONY

Sven, a man on the autism spectrum with an intellectual disability
From Norsjo, Sweden.

I have personal assistance around the clock and, thanks to that, can live a good life with self-determination and meaningfulness. Because of harder assessments and claims from the government, I and many others risk losing the vital support that personal assistance offers. Losing this would mean I would have no future. I have skilled, well-trained assistants who are experts in supporting me in a way that allows me to live the way I want. Should I lose my assistance, I cannot stay in my home, I cannot do my leisure activities or my daily activities. It is frightening to even think about it, because that would mean that I would go under.
Lack of freedom of movement

Fragmentation of disability assessment systems has led to a fractured understanding of what disability is and who qualifies for social protection and benefits. The EU provides citizens with opportunities for mobility in countries other than their own. Today, 17 million EU citizens live and work abroad in another EU country. This mobility, however, is extremely limited for persons with disabilities.

The inconsistent types of assessment, qualifications for benefits and administrative processes inherently deprive persons with disabilities of their right enshrined in the EU treaties to freedom of movement (Article 3(2) of the Treaty on European Union (TEU) and Articles 4(2)(a), 20, 26 and 45-48 of the Treaty on the Functioning of the European Union (TFEU).

While the CRPD provides a definition for disability, the assessments of disability are not always in-line with this definition. A person may qualify as “disabled” in one country but not in another.

There is great variance in the process to be registered as disabled and then to begin receiving social support. There are different types of qualifying criteria, assessment methods, assessors and supporting evidence required. This makes navigating the process and system difficult in one’s home country and even more difficult abroad. If a person with a disability were to move to a new country, it would be difficult for them to register again as disabled and to receive their social protection, meaning they may experience time with no social protection at all, often unable to keep their protection from their last country of residence.

While a fully harmonised and transparent system of disability assessment across the EU would be beneficial, this is a long-term goal. In the short and medium term, the problem could be alleviated by the introduction of a system of mutual recognition of the different national systems for persons that are travelling or staying temporarily in another Member State. Tourists, students and young persons on exchange programmes, or interns, could benefit from this system.

This system could be connected to the European Disability Card, a pilot scheme which has already been rolled out in eight Member States and could potentially be widened to the entire EU. While the Disability Card at the moment is still limited to non-essential discounts in culture, leisure, sports, and sometimes transport, this could be a good start to associate the Card to the recognition of the disability “status" one receives in his Member State of residence.
PERSONAL TESTIMONY

Matthieu. Man aged 31 with cerebral palsy.
From France.

I was studying in the UK (as a French citizen) until I was asked by the British Government authorities to leave due to France having abruptly stopped my financial support. Because of my cerebral palsy and my reliance on personal assistance, I was perceived as an unreasonable burden on the host country. I need round-the-clock assistance for eating, washing, physical assistance and enablement.

French law on disability benefits and care support has a very restrictive derogation on allowing students with disabilities to continue receiving their disability benefits whilst studying in another Member State. My case was quite exceptional, because there had never been such a dependent person who had the project of continuing his studies abroad at my MDPH (body that assesses and notifies the rights of people with disabilities in France), it was thus dealt with through the emergency channel and everyone was very supportive. That being said, no one informed me of the rules I had to meet, which were a lot harsher than in France.

At the end of 2014, whilst attempting to register at the overseas branch of the social security, my eligibility to continue receiving the benefits was challenged as, according to the pensions department, I did not meet the criteria. I was informed by the French Social Security authorities that I had two weeks to pay back 18,000€ of French disability allowance. It was impossible. I told them I could not and that I would suffer real hardship as a result. No one took into account that for years on top of having been transparent throughout the process of having my life project validated by the MDPH, I submitted years of
invoices labelled in British pounds in relation to my care. So it seemed at best doubtful, and surprising, that the same institutions which gave me the green light to continue my studies abroad then complained about not having been aware that I left or met the conditions. My refusal to pay more than 18 000€ or to recognise the accusation made against me led to a court battle and to the stopping of all my disability benefits and compensation pending a final answer by the court. As I could no longer pay, the agency providing care assistance to me in the UK withdrew their full service and support. A volunteer was found to support me as an emergency measure, but the agency didn’t check properly who this person was before they started assisting me. I was abused and eventually placed in a home for older people by British social services who had stepped in under their emergency powers.

Since I had been in the UK for more than 5 years, social services suggested I could apply for permanent residency, which would give me the right to receive more appropriate care and a personal budget. My social worker and I were sent a huge, inaccessible form of 120 pages to apply for this. We did the assessment and I was told I was eligible for permanent residency. However, then the decision was reversed as the first determination did not take into account that for two years I had returned to France for the purpose of receiving the physiotherapy denied to me on the NHS, that I so badly needed. In between July 2011 and May 2013, I had returned to receive the physio and, although still studying in the UK, I was doing so only part time, it was thus decided that I had in total spent more time in France than in the UK over that period. My time in the UK had thus been interrupted according to the EU freedom of movement Directive, which rendered me ineligible for permanent residency. I was then “invited to voluntarily return to France”.

Chapter 4: Extreme poverty and homelessness

It is hard to gauge the proportion of homeless people in the EU who have a disability. What we can say with some certainty, however, is that a fair number of persons with disabilities experience homelessness specifically because they have undiagnosed conditions and have not received the support they need.

The information we have from studies carried out in various EU countries is that persons with disabilities are largely overrepresented when it comes to homelessness. A study carried out in the Netherlands in 2014, for example, found that 29.5% of homeless people had an intellectual disability, whereas the prevalence of intellectual disabilities among the population as a whole is around 0.7%.

A 2018 UK study addresses the link between homelessness and autism, highlighting that 12.3% of homeless people displayed autistic traits in line with diagnostic criteria, compared to the estimated 1% prevalence rate of autism in the EU.

Another group that runs a high risk of experiencing homelessness are people with psychosocial disabilities. Studies suggest that the prevalence of mental health conditions among homeless people is disproportionately high, yet less than one-third of them receive support, including medical care. Not only do mental health issues exacerbate the problems that can lead to homelessness, especially when undiagnosed and when sufficient support is not in place, but the fact of being homeless in itself can also intensify mental health issues. A study conducted in England in 2014 concluded that 80% of homeless people reported having mental health issues and 45% had actually been diagnosed with a mental health condition. Furthermore, in the UK as a whole, 26% of homeless people cited mental health problems as being an actual cause of their being homeless.

The impact of disability on the risk of homelessness is not unique to Europe. Research from Australia shows the same trends. Findings from 2019 suggest that, in the Australian context, persons with disabilities are disproportionately at risk of homelessness, particularly persons with learning difficulties or mental health issues.
Chapter 5: The legacy of the financial crisis and austerity

Data showing the risk of poverty and social inclusion for each year since 2010, when the financial crisis was already well and truly taking effect, indicates that persons with disabilities were hit hard by the austerity policies enacted by governments following the economic downturn of 2008\textsuperscript{57}. The chart below indicates the countries with the highest increase in poverty rates among persons with disabilities between 2010 and 2018\textsuperscript{58}.

![Comparison between poverty rates for persons with disabilities between 2010 and 2018 (percent of persons at risk)](chart.png)
Interestingly, the countries seeing the highest increase in poverty among persons with disabilities are not necessarily those we would expect. Greece, for example, the country in which poverty rose the most during 2010-2018 among the general population, actually saw the risk of poverty and social exclusion among persons with disabilities drop by 3.2 percentage points. This can be partly explained by relentless campaigning in the country to avoid cuts to disability benefits, and to counteract severe restrictions to social and welfare policies being imposed by creditors.

In other countries that generally fared quite well during the crisis, such as Luxembourg, Germany and Sweden, we see that the rate of poverty and social exclusion among persons with disabilities significantly increased.

Here we will take a closer look at a selection of countries that were most affected by the financial crisis and/or chose austerity policies as a response to the crisis, to see what exactly what the impact on persons with disabilities was. These sections were submitted by authors from the countries in question.
GREECE

by Tania Katsani - The National Confederation of Disabled People, Greece (NCDP)

Fragmentation of disability assessment systems has led to a fractured understanding of what disability is and who qualifies for social protection and benefits. The EU provides citizens with opportunities for mobility in countries other than their own. Today, 17 million EU citizens live and work abroad in another EU country. This mobility, however, is extremely limited for persons with disabilities.

The inconsistent types of assessment, qualifications for benefits and administrative processes inherently deprive persons with disabilities of their right enshrined in the EU treaties to freedom of movement (Article 3(2) of the Treaty on European Union (TEU) and Articles 4(2)(a), 20, 26 and 45-48 of the Treaty on the Functioning of the European Union (TFEU). While the CRPD provides a definition for disability, the assessments of disability are not always in-line with this definition. A person may qualify as "disabled" in one country but not in another.

There is great variance in the process to be registered as disabled and then to begin receiving social support. There are different types of qualifying criteria, assessment methods, assessors and supporting evidence required. This makes navigating the process and system difficult in one’s home country and even more difficult abroad. If a person with a disability were to move to a new country, it would be difficult for them to register again as disabled and to receive their social protection, meaning they may experience time with no social protection at all, often unable to keep their protection from their last country of residence.

While a fully harmonised and transparent system of disability assessment across the EU would be beneficial, this is a long-term goal. In the short and medium term, the problem could be alleviated by the introduction of a system of mutual recognition of the different national systems for persons that are travelling or staying temporarily in another Member State. Tourists, students and young persons on exchange programmes, or interns, could benefit from this system.

This system could be connected to the European Disability Card, a project scheme which has already been rolled out in eight Member States and could potentially be widened to the entire EU. While the Disability Card at the moment is still limited to non-essential discounts in culture, leisure, sports, and sometimes transport, this could be a good start to associate the Card to the recognition of the disability “status” one receives in his Member State of residence.
Context
Sweden was once the model welfare state. In 2008 Sweden was the country in Europe with the lowest risk of poverty and social exclusion. Ten years later, the risk for poverty for persons with disabilities has grown at one of the fastest rates in the EU. One of the richest countries in the world, ranked the top country for doing business in 2016, has been saving on disability benefits.

Cuts in state budget reducing independent living
Higher cost of living and less financial support has been evident since 2008. Decisions in Swedish courts, stricter interpretations by the Social Insurance Agency and government measures to cut budget costs have caused a crisis for many persons and families with disabilities.

Since 2014, the number of people covered by state-funded personal assistance decreased by about 1,650. Changes in the interpretation of the law have had an adverse effect on children and families. When losing state benefits, the municipalities are responsible for support. In 2017, 12,700 decisions granting individual support were not implemented by municipalities. This number has increased since 2013. Fifty percent of women with disabilities aged 16-25 report difficulties in making a living, compared to twenty-five percent for women without disabilities.

Gaps in education, employment and health
Lack of support in compulsory schools for pupils with disabilities, especially with intellectual and psychosocial disabilities, has led to a debate about increasingly segregated education. The number of children in schools for children with severe learning disabilities has increased over the last five years, where only 14 percent of teachers have an exam in specific subjects, due to an exception in the law.

Without a job, many young people are trapped living in poverty. After school, dependence on support from relatives continues. The number of children aged 10-17 with experience of mental health issues increased by 100 percent between 2006-2016. For young adults aged 18-24 the increase was 70 percent.
The overall Impact of being trapped in poverty leading back to institutions

Many people having lost benefits and support, experience difficulties trying to find out who is accountable and how to claim rights. About 170 000 persons in Sweden are financially dependent on a “guaranty benefit” that is less than half of the minimum wage. This benefit is related to a person’s assets, so ownership of housing or inheritance would lead to lost benefits.

The costs of rent, transportation, rehabilitation, dental care, medicine and other expenses often exceed their income. There are significant divergences based on sex and geographical differences in the level of support provided by municipalities.

In some municipalities “group homes” are being constructed as segregated blocks of apartments. Children on the autism spectrum are forced into residential carehomes (HVB) for children and young people, with reference to The Care of Young Persons (Special Provisions) Act 1990:272 (LVU). Lack of community-based care forces people to remain in institutions instead of getting support to live independently.
General Information
The Italian welfare system is, still today, based on three pillars: health, social security and assistance. Unfortunately, the resources allocated are not balanced across these pillars. In fact, public spending is skewed towards social security rather than health and assistance, and towards monetary transfers rather than the provision of services. The social services supporting persons are mostly delegated to families where women are relegated to the roles of carers and assistants.

According to Eurostat, in 2015 Italy allocated 9.0% of its Gross Domestic Product to healthcare expenditure. In 2017 it was 6.8%. Again, according to Eurostat, in 2015 Italy allocated 29.8% of its GDP to social protection. In 2017 this fell to 20.9%. Such drastic reductions challenge the implementation of important social measures. Moreover, the gradual reduction of funding for social policies has increased the gap between the North and the South of the country. According to the ISTAT 2016 survey (the Italian Institute of Statistics), a person with a disability residing in Northeast Italy benefits, on average, from services and interventions at an annual cost of 5,150 euros, while in Southern Italy it is about 865 euros per capita. The extra costs that persons with disabilities and/or their families have to cover for the social impoverishment they undergo (barriers, obstacles and discriminations) are not taken into account by anti-poverty policies, and support measure for independent living are very limited.

Employment
Even though legislation exists on the employment of persons with disabilities, there are not enough measures in Italy that effectively and specifically promote this. The quota system (law 68/99) is unable to cover all of the people registered as unemployed. Furthermore, the Ministry of Labour data does not indicate the overall and relative unemployment rates of persons with disabilities, and these cannot be inferred from the official reporting on the quota law. If we compare the number of unemployed persons enrolled in the provincial registers with the number of positions available with the quota system, only 6.1% of registered persons could get a job. A complementary solution should be to incorporate persons with disabilities into active labour policies in the form of mainstreaming, but unfortunately this does not happen.

Disability and poverty
The economic crisis has produced a strong impoverishment of the Italian population. Persons with disabilities live, to a large extent, without a job, benefit from an extremely modest pension (3,700 euros annually, if they have a hundred percent disability and need accompanying they can get
up to 6,180 euros annually, enough to pay for 50 hours of assistance per month or less than two hours a day, inadequate to ensure a decent standard of living and full autonomy. There are reductions in taxes for the purchase and adaptation of cars, for some technologies, medical expenses or for the removal of architectural barriers at home, but they do not cover the extra costs they have to incur. The anti-poverty measures indicated by the latest Governments have not provided for effective measures to reduce the risk of poverty for persons with disabilities. The provisions, named Social Card (2016) and Inclusion Income (2017), replaced by the new Citizenship Income (2019), treat poor families where a person with disabilities is present less favourably compared to other families.

Regarding child poverty, the current anti-poverty measures refer to income parameters related to the household and do not take into account the specific aspects concerning children with disabilities. It takes for granted that resources are evenly distributed within the family. Because in Italy children with disabilities are invisible in statistics (0-5 years), they do not usually benefit from any measures to combat childhood poverty. To date we do not know how the measures against childhood poverty are being assessed, nor the effects of these measures on children with disabilities.

PERSONAL TESTIMONY

Maria Chiara. Woman aged 27. Power wheelchair user. From Senigallia, Italy.

Consumer-directed personal assistance is still severely underfunded in Italy, so the only real option for disabled people who are not self-sufficient and who do not have a support network is being relegated to institutions, stripped of fundamental liberties. My sister and I are both wheelchair users and need 24/7 assistance. The local authorities' funds only cover around one third of our needs. We have access to a "mainstream" and independent life only thanks to the joint financial efforts of our parents and brother. There are poorer regions of Italy where no support at all for Independent Living is put in place. It is sad and shocking that, due to poor resources, most of my peers with disabilities with a high impact like mine have to make huge sacrifices such as choosing distance learning, since university is not feasible for them as they do not have personal assistants, or not studying at all. So few of them are employed and often, when they are, it's their older parents who bring them to work. Many almost don’t have the chance to go outside at all.
IRELAND

Ríona Morris – Disability Federation Ireland Context

Context
Ireland was hit particularly badly in the 2008 economic crisis, which plunged the country into a recession. The government’s response to the crisis included adopting a policy of austerity, pursuing spending cuts. The effect of the economic crisis coupled with austerity had a disproportionately negative effect on marginalised groups in Ireland, including people with disabilities. As the economy has recovered, the benefits of this growth have not been equally felt, with people with disabilities being one of the groups yet to experience significant improvements.

Poverty
The crisis hit those on lower incomes the most. There was a huge increase in the poverty rate of people with disabilities, who already experienced poverty at a higher rate than the wider population. In 2009, at the beginning of the recession the consistent poverty rate for those out of work due to illness or disability was 9%. As of 2017, 24% of people not able to work due to illness or disability were living in consistent poverty compared to 6.7% of the rest of the population. Among those working, poverty remains a risk due to low pay and precarious employment.

Unemployment
The recession was accompanied by a huge increase in unemployment. This has since improved for the wider population, with long term unemployment halving between 2013 and 2016. Unemployment in general dropped by 5.3%. At the same time, the employment rate for people with disabilities saw just a 0.4% increase. 71% of adults of working age with a disability are not in work. Attempts by the government to address this have placed little emphasis on supporting people with disabilities back to work. Research has shown that the biggest barrier to inclusion of people with disabilities in the workplace is attitude. Another important barrier to work is the fear of losing out on crucial benefits needed to address the extra cost of disability.

There has been a shift in the quality of jobs that favours the employer to the detriment of the health and security of employees. Precarious employment contributes to mental health problems and anxiety. It has also meant that people with disabilities who might otherwise have worked or re-entered training (54%) were excluded from doing so.
Services

Funding to public services were cut drastically during the recession. Health and social supports were stripped away, community supports were removed and when the mobility transport grant was discontinued, it was not replaced. Disability services in Ireland are primarily operated by community and voluntary organisations. This sector lost 35-45% of funding after 2008 and saw a 31% reduction in staff, a rate unparalleled in Europe. Between 2008 and 2015 overall funding for disability services was reduced by €159.4 million. Mental health services lost almost 1000 staff over the course of the recession. The sustained cutbacks were accompanied by increased demand for assistance from individuals and communities under pressure as a result of the economic crisis.

There has been an increase in funding between 2016 and 2019. However, disability services remain under pressure. In June 2019, representatives of organisations providing disability services to over 40,000 adults and children told the Joint Oireachtas Committee on Health that they are carrying a combined deficit of €30 million threatening the future of services.

Housing

The financial crisis was accompanied by a housing crisis. Homelessness increased hugely. This crisis has not abated following the recession, with spiralling rents in the private rental sector and a shortage of social housing contributing to the problem. The rate of disability among homeless people is 27%, double that of the general population (13.5%). As well as adding an extra layer to the problems of those who are homeless, disability makes finding suitable accommodation more difficult. Yet housing adaptation grants that alter homes to make them accessible for people with disabilities, and the capital assistance scheme that provides rental accommodation for those with special needs including people with disabilities, older persons and homeless people, have not yet returned to 2010 levels. Many people with disabilities have been left unable to access appropriate housing. People with disabilities are more than twice as likely to report discrimination relating to housing and over 1.6 times as likely to live in poor conditions such as living in damp housing or housing lacking central heating.

Conclusion

The economic crisis led to a crisis that has not abated for people with disabilities, who faced spiralling poverty, unemployment and homelessness while essential services were cut. As the economy has recovered, there have been increases in funding for services, employment levels and wages but many people with disabilities are yet to benefit from these improvements and remain in crisis situations.
Context
The social policy priority of post-2008 UK governments has been spending reduction, rather than promoting equality, fairness and equal participation, which has disproportionately hurt disabled people.

Benefits
Stricter criteria for disability benefits and inaccurate assessment procedures have left many disabled people without the financial support needed to live independently. People previously given lifetime disability benefits have been reassessed under new criteria and often lose some or all of their support. Stricter criteria have particularly affected people with mental health issues or chronic illnesses. 74% of applicants who appealed a benefit decision won their case in January-March 2019 (the most recent data available), and many claimants do not know how to appeal.

Social care
Cuts to local government funding have meant many disabled people have had to pay more out-of-pocket for adult social care and have had care hours cut if they cannot contribute enough. Many disabled people are increasingly relying on unpaid care from family or friends, or going without other necessities in order to pay for care. Community-based care remains chronically underfunded and many people with learning disabilities or autism live in hospitals or care homes due to a lack of social care that would allow them to choose where they live.

Education
The proportion of disabled children attending “special” schools has increased from 2011 onwards, as mainstream schools are unable to provide proper support. Many disabled children are unable to find any school close to their home that can accommodate them and provide a good education.
Employment
Support for unemployed disabled people takes an all-stick no-carrot approach, and disabled people deemed not to be trying hard enough to find a job can lose access to benefits. Disabled claimants have been sanctioned because of hospital appointments conflicting with JobCentre appointments (The UK centre for finding employment). Cuts to legal aid and advice service funding has made it difficult for disabled people to file employment discrimination claims.

Overall Impact
Research commissioned by the Equality and Human Rights Commission into the combined impact of public spending reforms found that households with one or more disabled people saw and will continue to see greater decreases in their income than households without disabled people. Households with multiple disabled people or people with more severe disabilities stand to lose the most – expected to be over 10% of final income by fiscal year 2021/22 in England.
Context
According to the data obtained by Spanish National Disability Observatory (OED), in Spain there are almost one and a half million people with disabilities at risk of poverty, of which more than half a million are in extreme poverty.

Women with disabilities are particularly affected by extreme poverty, with a rate that almost doubles that of the rest of the population and which is 7% higher than that of the men with disabilities. The rate of extreme poverty for women with disabilities over 60 years of age is almost twice that of their male counterparts. Regarding the type of disability, in Spain women with intellectual disabilities are the group most affected by a lack of income, employment opportunities and access to benefits.

Persons with disabilities in Spain are mostly exposed to the risk of poverty when they are out of work, even when receiving benefits. More than half of the population with a disability of working age are unemployed, and almost half of the population with disabilities who do not work also lack income from benefits.

In Spain, persons with disabilities live predominantly in households with incomes between € 500 and € 999 a month (this is the case for 34.1% of persons with disabilities). In households without persons with disabilities, however, the most common income bracket is between € 1,000 and € 1,400 per month (this is the case for 23.5% of households not containing persons with disabilities).

Having a member of the household with a disability means higher living expenses than for households with no members with a disability. The main expenses, in the Spanish context, tend to be medical treatment (29%), medicine (28.3%), technical aids (28%), transport and mobility (24.3%) and personal assistance (21.6%).

Another important issue is the link between employment and poverty among persons with disabilities. It is noted that 14.1% of the general population in employment are poor, and this figure rises to 17.1% among people with disabilities who are employed. In the case of people with disabilities, it is assumed that employment offers higher levels of protection, however the figures show that this is not the case.
Persons with disabilities are under continuous financial pressure to make ends meet. Regarding late payments, whether it be mortgage repayments, rent, loans or other deferred purchases, late payment rates among people with disabilities are almost double those of people without disabilities. Furthermore, 36.1% of all people with disabilities, that is to say more than one in three, experience difficulty or great difficulty in making ends meet on a monthly basis. This is 15% more than the general population.

It is important to mention gender-based discrimination in the labour market, which also has a significant impact on poverty. In terms of access to the labour market, it has been shown that despite closing the gap over the past decade, employment among men is still far higher than that of women. This further underlines the vulnerability of women with disabilities when it comes to poverty.
Chapter 6: Employment of persons with disabilities

Across the EU, persons with disabilities are far less likely to be employed than persons without disabilities. On average, only 50.8% of persons with disabilities are in employment, compared to 74.8% for persons without disabilities. It should be noted that persons with disabilities living in institutions are not included in these statistics, meaning that in reality there is an even higher proportion of persons with disabilities not in employment. Furthermore, the figures do not shed light on the number of people in part-time employment, the quality of the employment, or indeed whether this employment takes place in the open labour market or not.

Unemployment is of course only one of several factors affecting the risk of poverty and social exclusion, and having a job is by no means a guarantee of avoiding poverty. Nevertheless, inclusion in the labour market undoubtedly still has a significant role to play in improving outcomes regarding poverty and social exclusion.

Member States with poor employment rates for persons with disabilities

While the average EU employment rate for persons with disabilities is already low, in certain EU Member States the situation appears worse than in others. EU figures show Ireland to be the country with the lowest employment rate of persons with disabilities, at 32.3%.

Other countries falling below the EU average are Croatia (33.75%), Greece (37.2%) Malta (37.25%) and Bulgaria (39.5%).
Percentage of persons with disabilities in employment by Member State

- Countries with <45% employment rate
- Countries with 45%-55% employment rate
- Countries with >55% employment rate

Ireland 32.3%
United Kingdom 52.85%
Denmark 58.1%
Poland 42.65%
Sweden 53.35%
Finland 54%
Estonia 62.15%
Latvia 61.75%
Lithuania 47.35%
Estonia 62.15%
Latvia 61.75%
Lithuania 47.35%

1. The Netherlands 59.15%
2. Belgium 42.95%
3. Luxembourg 53.6%
4. Czechia 50.2%
5. Slovakia 57.95%
6. Austria 56.6%
7. Slovenia 53.8%
8. Croatia 33.75%
9. Malta 37.25%

See end note regarding the map above.86
Member States with the biggest gaps between persons with disabilities and the general population

To understand the real extent of barriers persons with disabilities face when looking for employment, we must look at how much lower the employment rate is for persons with disabilities than for those without disabilities.

There are a number of countries with significant differences between employment rates for these two groups. The country with the largest difference in percentage points is Ireland, where persons with disabilities are a staggering 42.1 pp less likely to be employed than persons without disabilities.

Employment gap in percentage points (pp) between persons with disabilities and persons without disabilities

- **Countries with a difference of >30pp**
  - Ireland 42.1pp
  - United Kingdom 30.4pp
  - Denmark 22.7pp
  - Portugal 18.6pp
  - Spain 27.3pp
  - France 18.5pp
  - Germany 32.4%
  - Italy 13pp
  - Sweden 30.1pp
  - Finland 20.3pp

- **Countries with a difference of 30pp-20pp**
  - Poland 32.4%
  - Hungary 29.2pp
  - Romania 28.9pp
  - Bulgaria 34.2 pp
  - Greece 22.6pp
  - Cyprus 24.2pp

- **Countries with a difference of <20pp**
  - Latvia 17.3pp
  - Lithuania 31.9pp
  - The Netherlands 22.1pp
  - Belgium 31.4pp
  - Luxembourg 15.3pp
  - Czechia 30.4pp
  - Slovakia 21.9pp
  - Austria 20.2pp
  - Slovenia 19.6pp
  - Croatia 32.1pp
  - Malta 36pp

See end note regarding the map above87.

**Employment rate of women with disabilities**

On average only 48.3% of women with disabilities are in employment in the EU, compared with 53.3% of men88.

In Malta, 2017 EU figures show that women with disabilities were 20.5 percentage points less likely to be employed than men with disabilities. Other
countries where women with disabilities are far less likely than men to have jobs are Italy (17.1pp), Luxembourg (15pp), Romania (14.6pp), Denmark (12.4pp), Cyprus (11.6pp) and Austria (11.4pp)\textsuperscript{89}. These countries are by no means alone. In only four countries are women with disabilities more likely to be employed than men with disabilities, and in these cases only by the very smallest of margins.

**PERSONAL TESTIMONY**

Luminiţa. Woman with a learning disability. 
From Timişoara, Romania.

I was born in a village in Romania, in a family with eight siblings. I spent 18 years of my life in different families and orphanages, and also on the streets of Timişoara and Bucharest. My life was not easy. I have many bad memories. Memories of hunger, loneliness and exclusion. I have been discriminated against as a woman, as a person with intellectual disabilities, and also as a citizen of Roma ethnicity.

The lack of education has made things worse. I have studied for only two years. In 1999 I found out about a foundation in Timişoara that helps persons with intellectual disabilities. An assistant at the foundation went to a factory to find a job for me. The employer told them to bring me for an interview. Once I reached that place and the employer saw me, he said that he no longer needed a new employee because he had already employed someone else. In reality, he didn’t want to employ persons of Roma ethnicity. The same happened with a fast food chain that we contacted for a position as a cleaner, and then again with a hotel.

After all these trials I finally managed to find my first job, in a restaurant. I had to work excessively long hours, also during the night and during the weekends. I was not paid the money that I was entitled to and I had no work contract. After a few months I left that job. But then the foundation found me a new job as a cleaning lady for a block of flats. I still work there. It is a part-time job and I get along very well with the people living in that block of flats.

As a person with disabilities, it is very difficult to find a job. Without any help it is even more difficult. This is my experience of obtaining a job. I hope that, for the next generation of young people with disabilities, things will not be as difficult as they were for me\textsuperscript{90}.
The impact of type of disability on employment rates

Statistics collected in Spain suggest that the type of disability has a significant impact on employment levels. People with psychosocial disabilities were shown to be the most affected by unemployment, with an estimated employment rate of only 18% in Spain\(^91\). Persons with intellectual disabilities are also disproportionately affected by unemployment, with an estimated 19.5% in employment in Spain according to 2017 data\(^92\).

The cost for society

According to a 2018 report by the European Parliament Research Service, the loss of tax revenue in the EU linked to lower educational attainment and employment levels, in light of the barriers faced by persons was disabilities, was estimated to be 255€-416€ million per year. Furthermore, the loss of Gross Domestic Product is estimated at 710€ million to 1.2€ billion annually in the EU\(^93\).

Barriers to employment for persons with disabilities

There are a huge number of barriers to employment; not least the discrimination and stereotypes persons with disabilities have to face during the recruitment process. Below are some of the most frequent issues persons with disabilities face:

- **Incompatible benefits**: The lack of flexibility in disability benefit entitlement affects employment. Taking up paid work often results in the irreversible loss of benefits, and thus the loss of a person’s safety net. This means that a person’s wellbeing comes down to their ability to retain their job and relies on the fact that their condition will not worsen and prevent them from working in the future. It is a huge risk to take. Loss of allocations to cover costs of medical devices and other disability-related outgoings, when a person starts paid work, can also lead to a person with a disability being worse off in employment than they were when unemployed. Persons with disabilities are particularly prone to in-work poverty. In fact, figures from 2018 show that 11% of working persons with disabilities in the EU were at risk of in-work poverty, compared to 9.1% for those without disabilities\(^94\).

- **Lack of assistance and/or support**: A significant barrier is the provision of personal assistance. In only a handful of Member States do we see entitlement to personal assistance in the workplace. In other countries, even if personal assistance can sometimes be provided, there are restrictive rules on how much time they can dedicate to assistance in the workplace.
• **Lack of sign language interpretation:** While looking for and during employment, deaf persons face a particular challenge, as sign language interpreters are necessary to ensure full access to information, communication and knowledge. While seeking interpretation, deaf persons encounter numerous barriers. For example, there is often a lack of sign language interpreters available, the costs are high (e.g. when sign language interpreters are not paid for by the employer or the government), quality of interpretation can be insufficient, and the number of hours interpreters can dedicate to employment is often too low. Furthermore, most of the time the employers and their employees have no deaf awareness, which also poses communication problems with management, and creates barriers while communicating with hearing colleagues\(^95\).

• **Absence of reasonable accommodation:** One critical issue that we cannot ignore is the insufficient provision of reasonable accommodation for workers with disabilities, but we will discuss this in more detail later in this chapter.

• **Lack of opportunities in education:** Persons with disabilities in the EU are shown to be on average 10.1 pp more likely to be early school leavers than the general population\(^96\), and 10.5 pp less likely to complete tertiary education\(^97\). It can be difficult to access quality education due to the inaccessibility and lack of support for students with disabilities in most mainstream educational settings. Quality education is naturally a prerequisite for entering most labour market sectors, meaning exclusion from mainstream education puts persons with disabilities at a huge disadvantage. It should also be noted that girls and women with disabilities have high rates of illiteracy, school failure, absenteeism and drop-out rates.

**Member States’ policies for the employment of persons with disabilities**

There are a number of measures used across Member States to encourage the employment of persons with disabilities. Among these we see most notably quota systems, wage subsidies, tax reductions for companies employing persons with disabilities, assistance for training costs and reasonable accommodation, the provision of personal assistance and the possibility to retain certain disability benefits while in work. Below you can see which of these practices exist in different Member States\(^98\).
Countries with quota systems (marked in yellow)

1. Belgium
2. Luxembourg
3. Czechia
4. Slovakia
5. Austria
6. Slovenia
7. Croatia

See endnotes for Belgium\textsuperscript{99}, Cyprus\textsuperscript{100}, Germany\textsuperscript{101}, Ireland\textsuperscript{102} and Italy\textsuperscript{103} regarding the map above\textsuperscript{104}.

Countries offering wage subsidies or financial incentives for employers in the open labour market (marked in yellow)

1. The Netherlands
2. Belgium
3. Luxembourg
4. Czechia
5. Slovakia
6. Austria
7. Slovenia
8. Croatia

See endnotes for Croatia\textsuperscript{105}, Cyprus\textsuperscript{106}, Greece\textsuperscript{107}, Latvia\textsuperscript{108}, Lithuania\textsuperscript{109}, the Netherlands\textsuperscript{110}, Slovakia\textsuperscript{111} and Spain\textsuperscript{112} regarding the map above\textsuperscript{113}.
Countries offering tax reductions (marked in yellow)

Ireland
Portugal
Spain
The Netherlands
Estonia
Austria
Slovakia
Hungary
Italy
Croatia
Romania
Bulgaria
Greece
Malta

See endnotes for Bulgaria\textsuperscript{114}, Ireland\textsuperscript{115}, Malta\textsuperscript{116}, the Netherlands\textsuperscript{117}, Portugal\textsuperscript{118}, Romania\textsuperscript{119}, Slovakia\textsuperscript{120} and Spain\textsuperscript{121} regarding the map above\textsuperscript{122}.

Countries assisting in training or reasonable accommodation expenses (marked in yellow)

1 The Netherlands
2 Belgium
3 Luxembourg
4 Slovakia
5 Austria
6 Slovenia
7 Croatia

See endnotes for Belgium\textsuperscript{123}, Germany\textsuperscript{124}, Greece\textsuperscript{125}, Italy\textsuperscript{126}, Romania\textsuperscript{127} and the UK\textsuperscript{128} regarding the map above\textsuperscript{129}.
Countries where workers can retain disability allocations while in employment (marked in yellow)

Ireland

Finland

Lithuania

Austria

Slovakia

Croatia

Romania

Greece

Malta

Cyprus

See endnotes for Austria\(^{130}\), Cyprus\(^{131}\), Finland\(^{132}\), Greece\(^{133}\), Ireland\(^{134}\) and Slovakia\(^{135}\) regarding the map above\(^{136}\).

Countries with provisions for personal assistance for workers (marked in yellow)

Denmark

Sweden

Finland

Slovakia

Austria

See endnotes for Austria\(^{137}\) regarding the map above\(^{138}\).
EU policies for the employment of persons with disabilities

EU Directive (Council Directive 2000/78/EC) establishes a general framework for equal treatment in employment, vocational guidance and training (herein referred to as the “Equal Treatment Directive”). It underlines that there shall be no direct or indirect discrimination whatsoever on the grounds of disability, age, sexual orientation or religion. It also further clarifies that “indirect discrimination shall be taken to occur where an apparently neutral provision, criterion or practice would put persons having a particular religion or belief, a particular disability, a particular age, or a particular sexual orientation at a particular disadvantage compared with other persons […]”.

Article 5 states that reasonable accommodation shall be provided in order to guarantee compliance with the principle of equal treatment in relation to persons with disabilities. The article clarifies this by underlining that “employers shall take appropriate measures, where needed in a particular case, to enable a person with a disability to have access to, participate in, or advance in employment, or to undergo training, unless such measures would impose a disproportionate burden on the employer”.

Article 7 on “Positive Action” states that “[with] regard to disabled persons, the principle of equal treatment shall be without prejudice to the right of Member States to maintain or adopt provisions on the protection of health and safety at work or to measures aimed at creating or maintaining provisions or facilities for safeguarding or promoting their integration into the working environment”. These provisions are supposed to have been transposed into national legislation. A key issue that remains is the lack of EU harmonised minimum standards on what is understood by “reasonable accommodation”. It is therefore difficult to measure the adequacy of practices to ensure non-discrimination towards persons with disabilities in the workplace, and to facilitate their ability to do their job.
Reasonable accommodation

Reasonable accommodation is any change to a job, the work environment, or the way things are usually done that allows a person with a disability to apply for a job, perform in their role, or enjoy equal access to benefits available to other individuals in the workplace. Reasonable accommodation should always be linked to the particular needs of the person with a disability. Examples are:

- Flexible working hours, schedule or the possibility to work remotely
- Flexible recruitment procedures and interview processes
- Ensuring that a workplace is accessible and safe for all persons with disabilities (this typically involves making sure the built environment does not impede access, navigation or indeed evacuation of a person with disability, but also involves ensuring signs and instructions are usable by all, to name but a few examples)
- Providing a person with a disability with assistive devices and technology that enable them to carry out their tasks. The World Health Organisation’s List of Priority Assistive Products defines a number of essential items that could be required depending on the person’s specific needs, among them, but not exclusively:\(^{139}\):
  - Screen readers, screen magnification programmes, refreshable Braille display, Braille writing equipment
  - Hearing aids with Bluetooth connectivity
  - Speech recognition software
  - Special mouse types and keyboards
  - Video communication devices, video remote Interpreters, eye tracking devices for operating a computer
  - Visual fire alarms and adapted doorbells
- Job mentoring and support, and of course personal assistance to workers with higher support needs, including sign language interpreters.
Chapter 7: EU Commitment to Tackling Poverty and Social Exclusion

The EU and its Member States have a number of obligations to tackle the issue of poverty and social exclusion, particularly among persons with disabilities. Here are the main areas in which the EU has expressed commitment to improve the situation, and where we hope to see further efforts and progress going forward.

The ratification of the CRPD

We open with the United Nations Convention on the Rights of persons with Disabilities (CRPD), ratified by the EU and all its Member States. The following articles are of particular importance in reducing the risk of poverty and social exclusion, in part through employment.

**Article 28 – Adequate standard of living and social protection**

1. States Parties recognize the right of persons with disabilities to an adequate standard of living for themselves and their families, including adequate food, clothing and housing, and to the continuous improvement of living conditions, and shall take appropriate steps to safeguard and promote the realization of this right without discrimination on the basis of disability.

2. States Parties recognize the right of persons with disabilities to social protection and to the enjoyment of that right without discrimination on the basis of disability, and shall take appropriate steps to safeguard and promote the realization of this right, including measures:
   a) To ensure equal access by persons with disabilities to clean water services, and to ensure access to appropriate and affordable services, devices and other assistance for disability-related needs;
   b) To ensure access by persons with disabilities, in particular women and girls with disabilities and older persons with disabilities, to social protection programmes and poverty reduction programmes;
   c) To ensure access by persons with disabilities and their families living in situations of poverty to assistance from the State with disability-related expenses, including adequate training, counselling, financial assistance and respite care;
d) To ensure access by persons with disabilities to public housing programmes;

e) To ensure equal access by persons with disabilities to retirement benefits and programmes.

Article 27 – Work and employment

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

a) Prohibit discrimination on the basis of disability with regard to all matters concerning all forms of employment, including conditions of recruitment, hiring and employment, continuance of employment, career advancement and safe and healthy working conditions;

b) Protect the rights of persons with disabilities, on an equal basis with others, to just and favourable conditions of work, including equal opportunities and equal remuneration for work of equal value, safe and healthy working conditions, including protection from harassment, and the redress of grievances;

c) Ensure that persons with disabilities are able to exercise their labour and trade union rights on an equal basis with others;

d) Enable persons with disabilities to have effective access to general technical and vocational guidance programmes, placement services and vocational and continuing training;
e) Promote employment opportunities and career advancement for persons with disabilities in the labour market, as well as assistance in finding, obtaining, maintaining and returning to employment;

f) Promote opportunities for self-employment, entrepreneurship, the development of cooperatives and starting one’s own business;

g) Employ persons with disabilities in the public sector;

h) Promote the employment of persons with disabilities in the private sector through appropriate policies and measures, which may include affirmative action programmes, incentives and other measures;

i) Ensure that reasonable accommodation is provided to persons with disabilities in the workplace;

j) Promote the acquisition by persons with disabilities of work experience in the open labour market;

k) Promote vocational and professional rehabilitation, job retention and return-to-work programmes for persons with disabilities.

2. States Parties shall ensure that persons with disabilities are not held in slavery or in servitude, and are protected, on an equal basis with others, from forced or compulsory labour.

Article 6 – Women with disabilities

1. States Parties recognize that women and girls with disabilities are subject to multiple discrimination, and in this regard shall take measures to ensure the full and equal enjoyment by them of all human rights and fundamental freedoms.

2. States Parties shall take all appropriate measures to ensure the full development, advancement and empowerment of women, for the purpose of guaranteeing them the exercise and enjoyment of the human rights and fundamental freedoms set out in the present Convention.
The Treaty on the Functioning of the European Union

In more general terms, the aim of fighting against social exclusion and ensuring high employment levels and adequate social protection are enshrined in Article 9 of the Treaty on the Functioning of the European Union. Article 19, for its part, talks about ensuring non-discrimination in the area of disability.

Article 9 of the Treaty on the Functioning of the European Union

In defining and implementing its policies and activities, the Union shall take into account requirements linked to the promotion of a high level of employment, the guarantee of adequate social protection, the fight against social exclusion, and a high level of education, training and protection of human health.

Article 19 of the Treaty on the Functioning of the European Union

1. Without prejudice to the other provisions of the Treaties and within the limits of the powers conferred by them upon the Union, the Council, acting unanimously in accordance with a special legislative procedure and after obtaining the consent of the European Parliament, may take appropriate action to combat discrimination based on sex, racial or ethnic origin, religion or belief, disability, age or sexual orientation.

2. By way of derogation from paragraph 1, the European Parliament and the Council, acting in accordance with the ordinary legislative procedure, may adopt the basic principles of Union incentive measures, excluding any harmonisation of the laws and regulations of the Member States, to support action taken by the Member States in order to contribute to the achievement of the objectives referred to in paragraph 1.

European Pillar of Social Rights

The European Pillar of Social Rights was proclaimed by EU leaders in 2017. It is a pillar of 20 principles that the EU and Member States have signed up to in order to give more emphasis to the social dimension of the EU. By signing up to the Pillar of Social Rights, the EU and Member States have agreed to act on these principles. The following principles are particularly relevant to reducing poverty and social exclusion for persons with disabilities.
1. Education, training and life-long learning
Everyone has the right to quality and inclusive education, training and
life-long learning in order to maintain and acquire skills that enable
them to participate fully in society and manage successfully transitions
in the labour market.

3. Equal opportunities
Regardless of gender, racial or ethnic origin, religion or belief, disability,
age or sexual orientation, everyone has the right to equal treatment
and opportunities regarding employment, social protection, education,
and access to goods and services available to the public. Equal
opportunities of under-represented groups shall be fostered.

6. Wages
Workers have the right to fair wages that provide for a decent standard
of living. Adequate minimum wages shall be ensured, in a way that
provide for the satisfaction of the needs of the worker and his / her
family in the light of national economic and social conditions, whilst
safeguarding access to employment and incentives to seek work. In-
work poverty shall be prevented.

All wages shall be set in a transparent and predictable way according to
national practices and respecting the autonomy of the social partners.

12. Social protection
Regardless of the type and duration of their employment relationship,
workers, and, under comparable conditions, the self-employed, have
the right to adequate social protection.

14. Minimum income
Everyone lacking sufficient resources has the right to adequate
minimum income benefits ensuring a life in dignity at all stages of
life, and effective access to enabling goods and services. For those
who can work, minimum income benefits should be combined with
incentives to (re)integrate into the labour market.

17. Inclusion of people with disabilities
People with disabilities have the right to income support that ensures
living in dignity, services that enable them to participate in the labour
market and in society, and a work environment adapted to their needs.
18. **Long-term care**
Everyone has the right to affordable long-term care services of good quality, in particular home-care and community-based services.

19. **Housing and assistance for the homeless**
   a. Access to social housing or housing assistance of good quality shall be provided for those in need.
   b. Vulnerable people have the right to appropriate assistance and protection against forced eviction.
   c. Adequate shelter and services shall be provided to the homeless in order to promote their social inclusion.

20. **Access to essential services**
Everyone has the right to access essential services of good quality, including water, sanitation, energy, transport, financial services and digital communications. Support for access to such services shall be available for those in need.

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**Sustainable Development Goals**

The Sustainable Development Goals consist of 17 goals to end poverty, foster peace, safeguard the rights and dignity of all people, and protect the planet. There are 11 references to persons with disabilities in the SDGs. They were adopted on the 25th of September 2015 and have been signed up to by all EU Member States. The following goals are particularly significant for persons with disabilities experiencing poverty.

- **Goal 1. End poverty in all its forms everywhere**
- **Goal 8. Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all**
- **Goal 10. Reduce inequality within and among countries**
The Europe 2020 Strategy

The Europe 2020 Strategy is the EU's agenda for growth and jobs for the current decade. It is used as a reference point for activities at EU, national and regional levels. EU Member States have set national targets to help achieve the overall goals and report on them as part of their annual national reform programmes\textsuperscript{142}. Importantly, the 2020 Strategy contains targets for poverty reduction that the EU has set itself the goal of achieving by 2020. The key targets are as follows:

### Poverty, employment and education targets within the Europe 2020 Strategy

- 75\% of people aged 20–64 to be in work
- Rates of early school leavers below 10\%
- At least 40\% of people aged 30–34 having completed higher education
- At least 20 million fewer people in – or at risk of – poverty/social exclusion

EU Disability Strategy 2010-2020

The EU has adopted a Disability Strategy for the period 2010-2020\textsuperscript{143}. Among the Disability Strategy’s eight “Areas for Action” there are two that are particularly important for reducing the risk of poverty and social exclusion.

### 4. Employment

EU action will support and supplement national efforts to: analyse the labour market situation of people with disabilities; fight those disability benefit cultures and traps that discourage them from entering the labour market; help their integration in the labour market making use of the European Social Fund (ESF); develop active labour market policies; make workplaces more accessible; develop services for job placement, support structures and on-the-job training; promote use of the General Block Exemption Regulation\textsuperscript{144} which allows the granting of state aid without prior notification to the Commission.

**Aim:** Enable many more people with disabilities to earn their living on the open labour market.
6. Social protection

Lower participation in general education and in the labour market lead to income inequalities and poverty for people with disabilities, as well as to social exclusion and isolation. They need to be able to benefit from social protection systems and poverty reduction programmes, disability-related assistance, public housing programmes and other enabling services, and retirement and benefit programmes.

The Commission will pay attention to these issues through the European Platform against Poverty. This will include assessing the adequacy and sustainability of social protection systems and support through the ESF. In full respect of the competence of the Member States, the EU will support national measures to ensure the quality and sustainability of social protection systems for people with disabilities, notably through policy exchange and mutual learning.

**Aim: Promote decent living conditions for people with disabilities.**
Policy Recommendations

In line with the areas of EU competence, our recommendations are split into two sections. On the one hand you will find recommendations for responses at EU level and on the other hand for responses at national level.

Recommendations for EU level

1) Follow-up the European Disability Strategy 2010-2020 with an ambitious European Disability Rights Agenda (2020-2030):

Create a Strategy, or a “Disability Rights Agenda” for 2020-2030. It should outline specific actions to be taken at EU level to address poverty and social exclusion. It should also highlight actions to ensure the mainstreaming of disability in the European Pillar of Social Rights and in the EU's actions to achieve the Sustainable Development Goals.

2) Facilitate the freedom of movement of persons with disabilities and the portability of services in the EU:

- Harmonise recognition of disability assessment in all Member States through EU legislation and create a standard format of disability certification.
- Create an accessible online information platform giving persons with disabilities information on the services to contact when moving to different Member States in order to receive the support they are entitled to.
- Adopt the EU Disability Card in all Member States and include in its scope the ability to access disability-related support and services without discrimination across the Union.

3) Fully implement the European Pillar of Social Rights:

- Create an action plan to implement the European Pillar of Social Rights.
- Act on Principle 17, “Inclusion of Persons with Disabilities”, by creating detailed guidance on making the Pillar inclusive and accessible to persons with disabilities.
- Harmonise requirements across the EU for reasonable accommodation in the workplace (including both what governments and employers are obliged to offer).
- Act on Principle 12, “Social Protection”, by adopting a Directive outlining minimum acceptable levels of financial support and service provision for persons with disabilities.
4) Create a new European Strategy on Growth and Jobs:

Create a follow-up Strategy post 2020, with specific provisions for poverty and social exclusion. It should take into account the particular challenges of persons with disabilities and include specific targets and indicators with regards to women and men with disabilities.

5) Foster job creation and the protection of workers’ rights:

- Establish a Disability Rights Guarantee, similar to the Youth Guarantee. It should ensure that all persons with disabilities who wish to work receive an offer of either employment, an apprenticeship, a traineeship or continued educational progression. This should be open to persons receiving disability allocations and enable them to continue receiving their allocations when employed.
- Use collective bargaining at EU and national level as a means of protecting the rights of workers with disabilities and their families and relatives, as well as to promote the implementation of the Equal Treatment Directive.

6) Collect quality data on persons with disabilities:

- Collaborate with Eurostat and National Statistics Offices to ensure the collection of data disaggregated by type of disability (for example by using the Washington Group short-set of questions)[45]. Data collected in all fields, from education, to employment, from homelessness to migration should be disaggregated by age, gender and type of disability.
- Develop statistical indicators sensitive to the poverty and social exclusion of persons with disabilities, taking fully into account the extra cost of living for persons with disabilities.

7) Intelligent, CRPD-compliant and targeted investment of EU funds:

- Support investment in accessible, community-based services across the EU, favouring the independence of persons with disabilities, and taking the gender perspective into account.
- Enforce the ban on using EU funds to build or renovate institutions that segregate persons with disabilities and deny their right to independent living[46].
- Invest in access to inclusive education, vocational training, support in job-seeking and supported employment for persons with disabilities, to facilitate access to employment.
8) Include Country-Specific Recommendations (CSRs) on disability within the European Semester:

Analyse data related to persons with disabilities within the Semester process and develop appropriate CSRs to stimulate action at national level to promote social inclusion, fight poverty, and increase labour market participation of persons with disabilities and their families.

9) Ensure non-discrimination against persons with disabilities in all areas of their lives:

Extend EU protection against discrimination against persons with disabilities beyond the field of employment and vocational training. This could be done, for example, by adopting a comprehensive anti-discrimination Directive. This Directive should include protection against multiple and intersectional discrimination and include the refusal to provide reasonable accommodation as a form of discrimination.

Recommendations for national level

1) Provide a supportive and flexible approach to assisting people into work:

- Facilitate entry to work by offering person-centred and flexible support to persons with disabilities to enable them to take up work. Persons with disabilities should not lose their entitlement to future disability allocations if they have been in work. When in employment, persons should be permitted to continue receiving disability allowances needed to compensate for extra disability-related costs.
- Ensure fair wages and access to trade unions for workers with disabilities.
- Facilitate access to sign language interpreters and personal assistants for persons with disabilities, both in their professional and home lives.
- Ensure that public funds are available to contribute to covering disability-related costs.

2) Reform disability assessment:

- Follow a holistic approach that looks at a combination of impairment and functional considerations while also having a focus on the person’s support requirements.
- Provide opportunities for the individual with a disability to offer their insights and evaluations of their disability and their support needs,
whether through a face-to-face meeting with the assessor or via a self-assessment that they complete.

• Involve persons with disabilities and their representative organisations in developing and changing the systems and processes of disability assessment.

3) Prevention of extreme poverty and homelessness:

• Emphasise housing-first solutions, investing in housing in the community for vulnerable persons with disabilities in accordance with their individual needs.
• Do not push persons with disability into employment by reducing disability allowance, using so-called “incentives to work”.
• Fund training for workers in homelessness services to be able to offer tailored support to persons with disabilities (this report discovered specific risks facing people on the autism spectrum, those with mental health issues or intellectual disabilities.)
• Invest in identification of conditions such as autism or mental health conditions to ensure persons with disabilities get access to CRPD-compliant support from the youngest age possible, as appropriate\textsuperscript{148}. Offer CRPD-complaint support for persons at risk to maintain employment, links with their families and their community, as well as to avoid/manage addiction.
• Make all initiatives in the fields of extreme poverty and homelessness, from data gathering to programmes and funding, inclusive of persons with disabilities.

4) Invest in accessible services for all:

Ensure that support services in all areas, available to the general population, are accessible for persons with disabilities. Ensuring access to these mainstream services will reduce the need to turn to specialised services (such as specialised adapted transport) and will minimise disability-related costs.
CONCLUSION

Poverty and social exclusion are a threat to the wellbeing and the enjoyment of human rights of persons with disabilities throughout the EU. It is alarming that persons with disabilities in every single Member State face a far higher risk of poverty than those without disabilities, and that women with disabilities are even more likely to experience poverty. Furthermore, in a number of countries, the risk faced by persons with disabilities continues to grow.

Although the risk of poverty and social exclusion for persons with disabilities has marginally decreased across the EU as a whole over the past decade, the rate of recovery from the levels reached during the depth of Europe’s economic crisis is still far slower for persons with disabilities than it is for those without. This indicates that while the EU claims to be recovering from the economic crisis, persons with disabilities are among the last to feel the benefits. It is also important to note that women with disabilities have consistently been at greater risk of precarious employment, losing their jobs and enjoying lower levels of social protection during the financial crisis.

The fact that several of the countries where persons with disabilities were the worst hit by austerity were those that remained largely unscathed by the crisis (Sweden, Luxembourg, Germany, etc.) is an indication that policy choices and not economic hardship might have been to blame for the fate suffered by persons with disabilities. However, it is also an indication that positive policies can in turn reverse the trend.

Despite the adoption of Equal Treatment Directive (Council Directive 2000/78/EC), persons with disabilities still fare far less favourably than their non-disabled counterparts in joining the labour market. All over Europe persons with disabilities are less likely to be employed, and those who find a job too often face poor working conditions and a lower salary. We have seen that not only are there insufficient opportunities for quality inclusive education prior to reaching working age, but there is also a general lack of understanding of how to provide reasonable accommodation for an employee with a disability. To this, we need to add the inflexibility of disability benefits and the fact that in most Member States it is impossible for a person with disabilities to retain financial aid when they enter the labour market.

This poses a huge risk for persons with disabilities, many of whom forgo any future entitlement to disability allocations, or risk being worse off once they start working because they no longer receive support to cover disability-related costs. Despite evidence that disability benefits are themselves often
far below minimum wage, taking up paid work as a person with a disability can often leave you worse off and at risk of in-work poverty.

It has also been shown that disability assessment methods are often ill-adapted to gage the reality of the barriers faced by persons with disabilities. Furthermore, the lack of harmonised disability assessments, including the need for re-assessment when moving, denies many persons with disabilities their right to freedom of movement in the EU.

However, we needn’t end on a negative note. The current situation is one we cannot accept and need to fight against with innovation and perseverance. Policies, legislation, governance and investment can reverse these trends. It is our sincerest hope that EU, national and local policy makers will take note of the recommendations given in this publication and will act upon them if they are serious about ensuring no one is left behind in the EU.
2 In line with Article 1 of the United Nations Convention on the Rights of Persons with Disabilities.
3 EU SILC calculates 99 million persons with disabilities in the EU, to which we add the more than one million persons with disabilities living in institutions who are excluded from the survey https://deinstitutionalisationdotcom.files.wordpress.com/2017/07/guidelines-final-english.pdf
4 EU SILC 2018 except for Slovakia, Ireland and the UK for which that data is from 2017.
6 EU SILC calculates 99 million persons with disabilities in the EU, to which we add the more than one million persons with disabilities living in institutions who are excluded from the survey https://deinstitutionalisationdotcom.files.wordpress.com/2017/07/guidelines-final-english.pdf
7 EU SILC 2016. Available at: https://www.disability-europe.net/theme/eu2020
9 EU SILC 2018, except for Slovakia, Ireland and the UK for which that data is from 2017.
10 Including the United Kingdom at the time of creating this report.
11 According to the data from official Statistics of Lithuania in the year 2018 this figure is 35,9%.
12 EU SILC 2018, except for Slovakia, Ireland and the UK for which that data is from 2017.
13 According to the data from official Statistics of Lithuania in the year 2018 the difference is 18 percentage points.
14 EU SILC 2018, except for Slovakia, Ireland and the UK for which that data is from 2017.
15 Ibid.
16 Ibid.
European Human Rights Report 2020

21 Available at: https://ec.europa.eu/eurostat/web/products-eurostat-news/-/DDN-20190221-1?inheritRedirect=true
24 Ibid
26 Study conducted in 2008.
29 Ibid.
31 Available at: https://www.cermi.es/sites/default/files/docs/novedades/Nota_OED_Especial_Pobreza.pdf
32 Translated from French by the EDF secretariat.
34 Ibid.
35 Eurostat 2017. Figures provisional only for Denmark, Germany, Greece, Spain, Italy, Latvia, Lithuania, Hungary, Slovenia, Sweden and the UK: https://ec.europa.eu/eurostat/web/social-protection/data/database
36 Academic Network of European Disability Experts. Available at: https://www.disability-europe.net/
37 Examples given from the English Barema system: Available at: https://rm.coe.int/16805a2a27
38 https://handicap.belgium.be/fr/reconnaissance-handicap/evaluation-handicap.htm
39 Finland uses a system of assessment of need (e.g. for help / support).
40 The Netherlands uses a mixture of assessment of economic loss (e.g. loss of...
income related to disability) and assessment of need.

41 Italy uses both Barema and a holistic approach for its two primary disability assessment systems.

42 Denmark uses a mixture of the medical and functional approach to disability assessment.

43 Croatia uses a mixture of the Barema and the functional method of assessment.

44 Not the person’s real name. The individual has asked to remain anonymous.

45 Translated from Swedish by the EDF secretariat.

46 Available at: https://europa.eu/euandme/passion/work-and-live-abroad_en

47 Available at: https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex%3A12012M%2FTXT

48 Available at: https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex:12012E/TXT

49 Out of a pool of 387 participants observed.


52 Available at: https://www.autismeurope.org/about-autism/prevalence-rate-of-autism/

53 Available at: https://www.feantsa.org/download/homeless_in_europe_summer_20138191538203323085145.pdf

54 Homeless Link. (2014). The unhealthy state of homelessness: Health audit results 2014. Available at: homeless.org.uk/sites/default/files/site-attachments/The%20unhealthy%20state%20of%20homelessness%20FINAL.pdf


57 EU SILC 2010 and EU SILC 2018, except for Slovakia, Ireland and the UK for which that data is from 2017.

58 Except for Slovakia, Ireland and the UK for which that data is from 2017

59 EU SILC 2010 and EU SILC 2018, except for Slovakia, Ireland and the UK for which that data is from 2017.

61 The Health and Social Care Inspectorate (IVO), report about decisions that were not executed within 3 months according to the Social Service Act (SoL) and the Law regulating Support and Service to Persons with certain functional disabilities (LSS), 2017 https://www.ivo.se/om-ivo/statistik/nej-verkstallda-beslut/  

62 The Swedish National Audit Office has started an investigation that should be ready in September 2019, as the number of decisions granting support has increased with 44 percent from 2013 to 2016 https://www.riksrevisionen.se/nu-granskas/pagaende-granskningar/statens-atgarder-nar-rattighetslagar-inte-foljs.html  


67 Understood as a field of action that helps to define the level of quality of life of citizens and of the nation.  

68 In Italy the total expenditure for pension is 16.5% of GDP and the 26.4% of total population. The majority of pension beneficiaries are old age pension (26.4 total pension of which 19.5% old-age pension, 22% +65 age). https://ec.europa.eu/eurostat/statistics-explained/index.php/Social_protection_statistics_-_pension_expenditure_and_pension_beneficiaries  

69 Available at: http://www.condicio.it/allegati/109/Rapporto2014.pdf  

70 Available at: https://ec.europa.eu/eurostat/cache/infographs/cofoq/  

71 Available at: https://www.istat.it/it/files/2019/01/Report-spesa-sociale-2016.pdf  

72 Available at: https://www.disability-europe.net/search?searchword=italy&searchphrase=all&areas[0]=documents_search  


81 Translated from Spanish and summarised by the EDF Secretariat.
82 Available at: https://www.cermi.es/sites/default/files/docs/novedades/Nota_OED_Especial_Pobreza.pdf
83 note that figures for Spain in Chapter one refer to ‘poverty’ only and not ‘extreme poverty’.
84 EU SILC 2017. Percentages are given according to sex, which we have added together and divided by two to estimate the employment rate for both men and women with and without disabilities.
85 Ibid.
86 Ibid.
87 Ibid.
88 EU SILC 2017.
89 Ibid.
90 Translated from Romanian by EDF.
91 (2019). Informe 4 del Observatorio sobre Discapacidad y Mercado de Trabajo de la Fundación ONCE. Available at: http://odismet.es/es/informes/
92 Ibid.
An issue with the right to sign language interpreters varies greatly in different EU countries. The United Kingdom provides individualized interpretation services per week, from a few hours to full time, under the Access to Work programme (Department for Work and Pensions 2014). “Access to Work is a specialist disability service delivered by Jobcentre Plus, which gives practical advice and support to disabled people, whether they are working, self employed or looking for employment. Access to Work is provided where someone needs support or adaptations beyond the reasonable adjustments which an employer is legally obliged to provide under the Equality Act.” (Department for Work and Pensions 2014). Belgium, by contrast, provides interpreting for only 10% of an individual’s total weekly working hours; i.e. 4 hours for a full-time position (CAB Vlaams Communicatie Assistentie Bureau voor Dooven vzw 2014).

Based on respondents aged 18-24. EU SILC 2017.

Based on respondents aged 30-39. EU SILC 2017.

Information taken from ANED reports on the European Semester and complemented by information provided by the national members of the European Disability Forum.


During the first 24 months of employment. In Cyprus the financial incentive scheme for employers in the open labour market does not include any reasonable accommodation measures.

In Greece the OAED (Manpower Employment Organisation), since 2017, has implemented a programme to support employers for the recruitment and employment of 2000 unemployed persons from vulnerable groups, including persons with disabilities. This programme subsidises the employment of these people first for twelve (12) months, with the possibility of two more extensions of the total twenty-four months (twelve months plus twelve months). Additionally,
the beneficiary bodies that will hire persons with disabilities can be included in a programme for reasonable accommodation in the workplace. OAED contributes 90% of the total cost of the expenditure for reasonable accommodation in workplaces. This programme concerns 50 job positions.

108 In Latvia wage subsidies can only be received at certain times and a small number of people for a fixed period.

109 In Lithuania there are different subsidies and incentives for open labour market and social enterprises. Lithuanian disability organisations point this out as being discriminatory as far more subsidies and privileges are given to social enterprises running sheltered workshops. This is also mentioned in CRPD Committee’s Concluding Observations for Lithuania.

110 In 2019 the Netherlands is in the process of debating whether or not to continue its policy of wage subsidies, but as of the time of the completion of this report, the practice still exists.

111 only for enterprises made up of at least 25% persons with disabilities.

112 Cash subsidies.


114 In social security payments

115 In Ireland extra tax credits are given to blind people in employment.

116 In Malta companies employing persons with disability can apply for refund of National Insurance payments for the first three years of employment of each employee with disabilities.

117 In social security payments.

118 Ibid.

119 In Romania, employers can benefit from a deduction from the tax base, but only for expenses with workplace accessibility, transportation of the disabled person and vocational training of the disabled person.

120 In social security payments.

112 Ibid.


124 There is a new law in Germany called Bundesteilhabegesetz (Federal Participation Law). This law provides Personal Budgets. If persons with disabilities who, for instance, work in sheltered workshops want to work on the open labour
market they can apply for such a budget. It includes parts of the costs necessary to equip the disabled person with a job coach, but by now only a few persons with disabilities applied for a personal budget as the amounts of money offered to balance the expenses for a job coach are too low.

125 Again in Greece this is done through the OAED (Manpower Employment Organisation).

126 In Italy there is a partial contribution of the costs of the adaptation of the work space to the needs of the persons with disabilities with up of 50% impairment. There was a ruling against Italy by the Court of Justice of the European Union in the field of employment (CJEU, Case C-312/11 European Commission v Italian Republic) on the 4 July 2013 for the inadequate transposition of the reasonable accommodation obligation. The Legislative Decree 216/2013 (transposing the EU Directive 78/2000) introduces an explicit reference to reasonable accommodation. Nevertheless in the article 3 there is a reference to “available resources”. This means that the Legislative Decree 216/2013 justifies the denial of reasonable accommodation and the resulting discrimination of persons with disabilities based on economic reasons invoked by the employer. After this Court of Justice sentence, Italy has approved National guidelines ex art.1, decree no. 151/2015, regulating the principle of reasonable accommodation, limited to the field of employment, but these guidelines are not a legally binding instrument. For the other fields of daily life of persons with disabilities, you must bear in mind that the anti-discrimination law 67/2006, “Measures for the legal protection of persons with disabilities victims of discriminations” but lacks a definition of reasonable accommodation and fails to recognise the denial of reasonable accommodation as a form of discrimination.

127 corporate income tax relief for amounts spent on this.

128 Through the Access to Work scheme, if the employee with a disability makes an application for support within three months of starting the new job.


130 Partially.

131 In Cyprus persons with disabilities can receive either a Minimum Guaranteed Income (MGI) of around €480/month, or get the MGI combined with an additional disability allowance, coming to a total of around €830. If a person receives the MGI and the disability benefit combined, they can earn up to €512 per month before their allocations are reduced or stopped.

132 up to 737.45 euro/month.

133 In Greece only some disability categories can retain benefits while in employment, such as persons with visual disability, persons with paraplegia or
tetraplegia, persons with some chronic diseases.

134 In Ireland people can retain part of their disability allowance and their medical card for a period of time after they enter employment.

135 Disability pension and contribution for personal assistance are retained without any limitation depending on income or employment.


137 Only for certain types of disability.


140 Available at: http://www.edf-feph.org/sites/default/files/edf_-_sdgs_human_rights_report_final_accessible_0.pdf

141 Available at: https://sustainabledevelopment.un.org/memberstates

142 A written plan for reforms Member States submit to the Commission as part of the European Semester process.

143 Available at: https://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=COM:2010:0636:FIN:en:PDF

144 Available at: https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:02014R0651-20170710


146 The European Expert Group on the Transition from institutional to Community-based Care defines an institution, in its guidelines, as a facility where “residents are isolated from the broader community and/or compelled to live together; residents do not have sufficient control over their lives and over decisions which affect them, and the requirements of the organisation itself tend to take precedence over the residents' individual needs.

147 Devised by guest author Lillie Heigl.
