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Hungary

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

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¹ For an introduction to the Semester process, see:
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1 Executive summary and recommendations

1.1 Key points and main challenges for Hungary in 2022

Disability and the labour market

While the labour market overall is in a good shape, the disability employment gap widened to 31.2 percentage points in 2020. Labour shortages provide a window of opportunity for increased recruitment of workers with disability. In addition to a tight labour market, this is also motivated by the economic benefits of employing persons with disability due to the raised rehabilitation contribution. In the midst of accelerating inflation and the unfolding energy crisis, this provides an incentive for increasingly cost-sensitive companies to consider expanding their recruitment beyond mainstream sources.

Disability, social policies and healthcare

Priorities have not changed in the field of social policies and healthcare in 2022 compared to 2021. In the social field deinstitutionalisation remains the key priority, especially in light of tangible problems with institutional care. Types of cash benefits remained the same, their amounts and the number of beneficiaries mostly stagnated which induces challenges in light of high inflation. Healthcare institutions are undergoing modernisation gradually and so accessibility is improving continuously, mainly due to an extensive EU funded project. The daily operation of healthcare institutions sometimes suffers from inadequate treatment of persons with disabilities.

Disability, education and skills

The number of special educational needs (SEN) students in Hungary increased, reaching almost 100 000 in 2022. In line with Country Specific Recommendation (CSR) 3, students with disabilities should be included in the effort to 'Improve education outcomes and increase the participation of disadvantaged groups'. Quality integration remains a big challenge for the Hungarian education system, which suffers from a scarcity of educational professionals and low wages. The main themes defining the strategies and actions connected to disability, education, and skills are inclusion and employability. Large-scale national programmes and strategies focus on different factors of employability like language skills, career guidance, and most importantly, strengthening of digital skills.

Investment priorities for inclusion and accessibility

There have been important positive steps in recent years to start the deinstitutionalisation process and to close down large-scale institutional care settings. Hungary began to use significant amounts of EU funding to move investments towards community-based solutions. The Recovery and Resilience Plan for Hungary has not yet been approved. The current draft plan does not contain any significant reference to persons with disabilities.

1.2 Recommendations for Hungary

Recommendation: Increase investment in targeted and tailored active labour market measures, in close cooperation with the business sector, in order to increase job opportunities for persons with disabilities in the open labour market. To this end progress should also be made in ensuring reasonable accommodation by providing adequate financial support.

Rationale: While the disability employment gap widened, there are quite a few job opportunities in the tight, open labour market. To improve the recruitment attitude among employers, developing a reasonably accommodated, inclusive work environment should become part of subsidised activating measures.

Recommendation: Define and award support for assistive technological devices for persons with disabilities.

Rationale: Persons with disabilities are entitled to cash benefits and medical devices but other supportive devices that help people with disabilities in their everyday life may be necessitated, following a need-based individual assessment. Creating the definition of the concept of supporting technological devices and developing the method and source of support would mainly be the responsibility of the social sector, with development input from the healthcare sector.

Recommendation: Increase the attention and resources directed to quality inclusive education of SEN students, including staffing resources. Investments and incentives should strongly support schools located in disadvantaged areas and schools with a majority of disadvantaged students, independent of the region.

Rationale: It is essential to ensure that a sufficient number of professionals are in place to meet students' individual requirements. Adequate resources should be allocated for the continued training of teachers and all other educational staff to enable them to work in inclusive educational settings in line with recommendation 41 of the United Nations Convention on the Rights of Persons with Disabilities (UN CRPD) Committee. Data shows that there is a severe need for more educational professionals, despite the Government's measures from previous years, especially in disadvantaged regions. As SEN students most often attend schools with high rates of disadvantaged students, supporting initiatives should focus on them in the future.

Recommendation: The amended Recovery and Resilience Plan should contain significant references and programmes in relation to persons with disabilities.

Rationale: The Recovery and Resilience Plan for Hungary has not been approved. The current draft plan does not contain any significant reference to persons with disabilities.

2 Mainstreaming disability equality in the 2022 Semester documents

2.1 Country Report (CR) and Country Specific Recommendation (CSR)

The following key points highlight where a disability perspective was considered, or should be considered, in the CR/CSR. We address the most relevant of these in the next chapters.

Employment

The Country Report (CR) for Hungary included the following references to disability issues in 2022:²

- ‘Hungary’s labour market is in a good shape overall, but significant challenges remain. These challenges include addressing the low employment rate [...] of disadvantaged groups. [...] There is significant room to increase the employment rate of certain disadvantaged groups, such as the low-skilled, the long-term unemployed, people with disabilities, and Roma. Joblessness is concentrated in Hungary’s less developed regions and in rural areas. [...] These disadvantaged groups could be better helped by equipping them with skills and actively helping them to find jobs.’
- Annex 12, related to the European Pillar of Social Rights reiterates these challenges in the light of the strongly recovering labour market and the well above than average employment rate of 78.8 % in 2021 pointing out the widened disability employment gap of 31.2 percentage points. As such, the latter falls into the ‘To watch’ category, i.e. it has to be followed with particular concern.³

The CSR for Hungary included the following references to disability issues in 2022, which are clearly reflected in the CR:⁴

- ‘(22) Hungary’s labour market is overall in a good shape, however, challenges remain in relation to the low employment rate of women and of disadvantaged groups. [...] There is significant room to increase the employment rate of certain disadvantaged groups, such as the low-skilled, long term unemployed, persons with disabilities and Roma. These groups could be better mobilised by equipping them with skills and actively helping them to find jobs.’
- As part of the labour and social policy related specific (3) recommendation Hungary is urged to take actions in 2022 and 2023 to: ‘Continue the labour market integration of the most vulnerable groups, in particular through upskilling [...].’

The lower employment of low-skilled people and people with disabilities is a long-standing feature of the Hungarian labour market, which is also concentrated

² See: 2022 European Semester Country Report – Hungary, p. 11, https://commission.europa.eu/publications/2022-european-semester-country-reports_en.

³ See: 2022 European Semester Country Report – Hungary, p. 48.

⁴ See: 2022 European Semester Country Specific Recommendations – Hungary, https://commission.europa.eu/publications/2022-european-semester-country-specific-recommendations-commission-recommendations_en, p. 9, p. 11.

geographically, in less developed regions and in rural areas. The reasons behind these structural challenges – as discussed the disability country fiche 2020-2021 – are mainly the outcomes of the inappropriate, centralised territorial development policy; the weak performance of scattered hardly existing public employment services (p. 11); poorly targeted active labour market measures (p. 48) and the below EU-average education outcome (p. 8). That is to name just a few of the persistent issues discussed in this year’s CR, and those of previous years.

No wonder that compliance with the country specific recommendation of integrating vulnerable groups into the labour market was limited, as this year’s CR reminds us in the summary table for the 2019, 2020 and 2021 CSRs.⁵ If the policy development outlined later (see Chapter 3) aimed at encouraging the increased integration of people with disabilities into the open labour market is strengthened, then compliance with the employment-related CSRs may be enhanced as well.

Education

Both the CR and the CSR highlight the need for more inclusive and higher quality education for disadvantaged students (however, SEN students are not mentioned as a distinct group).

According to the CR:

- ‘Strengthening the quality and inclusiveness of education and training at all levels is key for helping Hungary to reach the 2030 EU headline targets on skills and employment.’⁶
- ‘Socio-economic background is a strong predictor of pupil performance and there continue to be large differences between schools in Hungary. Schools in Hungary are characterised by the similar socio-economic background of their pupils, with concentrations of disadvantaged pupils in certain schools.’⁷
- ‘The concentration of disadvantaged pupils in certain schools and school types – especially vocational training schools – and pressing teacher shortages makes it difficult to keep pupils in school and give them the personalised support they need.’⁸
- CSR 3: ‘[...] Improve education outcomes and increase the participation of disadvantaged groups [...]’.⁹

2.2 National Reform Programme (NRP) and Recovery and Resilience Plan (RRP)

The following key points highlight where the situation of people with disabilities or disability policies are relevant to the NRP/RRP. We analyse the most relevant of these in the following chapters.

⁵ See: 2022 European Semester Country Report – Hungary, p. 30, https://commission.europa.eu/publications/2022-european-semester-country-reports_en.

⁶ [European Semester Country Report: Hungary, 2022](#), p. 49.

⁷ [European Semester Country Report: Hungary, 2022](#), p. 51.

⁸ [European Semester Country Report: Hungary, 2022](#), p. 51.

⁹ [CSR Hungary 2022](#), p. 12.

The 2021 [Recovery and Resilience Plan](#) for Hungary – finalised in August 2021 – did not address the situation of people with disabilities directly. The National Reform Programme of Hungary 2022 (NRP 2022) and its annex reflect upon employment, family policy, social inequalities, education and healthcare in detail, including enumerating the concrete interventions in a table format. Disability is referred to only regarding the 2018 partnership agreement with civil organisations.¹⁰ The NRP 2022 has been assessed by the Council. Hungary is recommended to take several actions in 2022 and 2023, but disability measures are not expressly mentioned, and are included only as part of measures in relation to vulnerable groups.¹¹

Employment

The NRP¹² includes a number of employment supporting measures, the primary purpose of which is the integration of vulnerable groups in the labour market. The target groups include young adults with lower-level education, youngsters who are not in education or employment (NEET), young mothers with children and public workers. Persons with disabilities with reduced working capacity are also included. The specific programme, which operated from the end of 2015 until the middle of 2022, was called ‘Support for people with altered working capacity’ and was outlined in the annex to the NRP of Hungary, 2022.¹³ A total of EUR 45 million (HUF 19 billion) in support provided through the EFOP 1.1.1. – VEKOP 7.1.3 programme has been targeted at promoting the open labour market integration and employment of people with altered working capacity and increasing their level of education by providing occupational rehabilitation services and active labour market tools. Furthermore, the programme aimed to change the attitude of employers in order to recruit persons with disabilities as well. In 2021, in the last full year of the programme, 2 600 people with disabilities were involved; 1 800 of them found a job, while 1 800 of them received 20 329 rehabilitation services. In addition, 11 874 instances of occupational rehabilitation counselling was provided to 4 000 employers. However, no information was available about the overall impact of this six-year long initiative.

In addition to the evaluation of the RRP in our disability country fiche for 2021, we provide the following supplementary information:

- While disability is not discussed specifically in the RRP, in connection with the allocation of intervention areas and funding opportunities, under the heading of labour market interventions, persons with altered working capacity are included very briefly. It is planned to provide HRDOP-EFOP support for them in several stages, with the aim of increasing their employability and improving their

¹⁰ See: https://commission.europa.eu/system/files/2022-09/nrp_2022_hu-magyar_en.pdf, p. 7.

¹¹ COUNCIL RECOMMENDATION on the 2022 National Reform Programme of Hungary and delivering a Council opinion on the 2022 Convergence Programme of Hungary: ‘3. Continue the labour market integration of the most vulnerable groups, in particular through upskilling, and extend the duration of unemployment benefits. Improve the adequacy of social assistance and ensure access to essential services and adequate housing for all. Improve education outcomes and increase the participation of disadvantaged groups, in particular Roma in quality mainstream education. Improve access to quality preventive and primary care services.’

¹² See: https://commission.europa.eu/system/files/2022-09/nrp_2022_hu-magyar_en.pdf, pp. 30-36.

¹³ See: https://commission.europa.eu/system/files/2022-09/nrp_2022_hu-magyar_en.pdf, p. 39.

integration into the labour market. No specific measures and/or budget are attached.

- Also under the heading of labour market interventions there is a fairly general and generous goal, namely to provide active labour market tools supporting employment on the open labour market for all inactive persons and jobseekers over the age of 30. Our understanding is that this measure should cover inactive persons and jobseekers with disabilities as well. No specific measures and/or budget are attached.
- Hungary is the only Member State that does not have an approved RRP yet. Hungary submitted its Recovery and Resilience Plan in May 2021. The plan amounted to EUR 7.17 billion in grants or 4.9 % of Hungary's GDP in 2019. Negotiations with the Commission regarding the Hungarian RRP are still ongoing (in September 2022).

Education

Hungary's 2022 National Reform Programme mentions one (EU-financed) programme connected directly to SEN students, which involves 37 educational institutions.¹⁴ It also refers to several programmes focused on supporting disadvantaged students participating in public education.

Two of the nine main components of the 2021 Hungarian Recovery and Resilience Plan¹⁵ build its reform and investment plans around different levels of education. No measures directly target SEN students, but some plans – for example the 'digital transformation of public education' could affect them positively.

2.3 Semester links to the UN CRPD and national disability action plans

It is important that Semester plans align with national disability strategy. In Hungary, this refers to the Implementation of the National Disability Programme 2022. The National Disability Programme (ONP) was developed for the decade 2015-2025. The current Action Plan was adopted in 2020 for the period until 2022. This national action plan is not mentioned in the 2022 NRP.

Relevant recommendations arising from participation in the United Nations Convention on the Rights of Persons with Disabilities (CRPD) are highlighted in the following chapters.

The last UN CRPD Committee recommendations to Hungary were in 2022, the most recent submission by Hungary was in 2018 and the most recent response from the Committee was the 2022 Concluding Observations.

¹⁴ [NRP, 2022](#), p. 42.

¹⁵ 2021 Hungarian Recovery and Resilience Plan: https://ec.europa.eu/info/business-economy-euro/recovery-coronavirus/recovery-and-resilience-facility/recovery-and-resilience-plan-hungary_en.

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

In 2022, the UN CRPD Committee made the following recommendations to Hungary:

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

‘53. The Committee recommends that in line with target 8.5 of the Sustainable Development Goals, the State party: (a) Revise the existing legislation and measures of support for the employment of persons with disabilities and take comprehensive measures aimed at effectively supporting the work and employment of persons with disabilities in the open labour market and in inclusive work environments; (b) Adopt legislative and policy measures to protect the rights of persons with disabilities to just and favourable conditions of work, and ensure that persons with disabilities are not paid below the minimum wage and are provided with work contracts and equal remuneration for work on an equal basis with others; (c) Redirect the allocations for the employment of persons with disabilities from sheltered employment to support the employment of persons with disabilities, including of persons who require higher levels of support and deinstitutionalized persons, and ensure that the right to seek reasonable accommodation in the workplace is recognized for employees in the public and private sectors; (d) Monitor, in close consultation with organizations of persons with disabilities, the accessibility of workplaces across the State party and adopt an action plan with the aim of outlining measures, with time frames and adequate budgets, to ensure reasonable accommodation in and the accessibility of workplaces, including access to transportation.’

The most recent CRPD development is the 2022 Concluding Observations based on the state’s submission in 2018.

3.1 Summary of the labour market situation of persons with disabilities

According to the Social Scoreboard indicator, cited in the Semester package, the disability employment gap in Hungary is considered to be in the ‘To watch’ category.

Data from European Union statistics on income and living conditions (EU-SILC) indicate an employment rate for persons with disabilities in Hungary of 47.8 % in 2020, compared to 78.8 % for other persons. This results in an estimated disability employment gap of approximately 31 percentage points (estimated EU27 average gap 24.5, see Tables 2-4) or an employment chances ratio of 0.6. Statistics published on the Eurostat database indicate a disability employment gap of 31.2 percentage points in 2020, using a slightly different methodology, and 28.8 points in 2021.¹⁶

The same data indicate unemployment rates of 11.6 % and 5.1 %, respectively in 2020 (see Tables 5-7) and the economic activity rate for persons with disabilities in Hungary was 54.1 %, compared to 83 % for other persons (see Tables 8-10). These indications are broken down by gender and age in the respective tables in the annex.

¹⁶ Eurostat, Disability employment gap by level of activity limitation and sex (source EU-SILC), 2022, https://ec.europa.eu/eurostat/databrowser/view/hlth_dpe010/default/table?lang=en.

Due to the impact of the COVID-19 crisis on employment in 2020-2021, some caution is needed when interpreting trend data.

The Hungarian labour market remained in a fairly good shape in 2022. The average number of those in employment was 4 674 million in the first quarter of 2022, 107 000 more than a year before.¹⁷ At the same time, we know practically nothing about changes in the employment of people with disabilities from the same Hungarian sources. There is still no coherent, meaningful, usable data on their employment, as we reported in the country fiche of 2021. Aside from the 150 000-160 000 working persons with altered work capacity, an estimate used by representatives of ministries responsible for disability policy at public events, there is no reliable data on their total number and their transition to, or participation in the open labour market. The integration of disability questions in the core of the EU labour force survey (EU-LFS) should be helpful in future years.

On employment of the target group, there is little and sporadic data collection providing at best a fragmented and snapshot picture. As an example, the results of a recent survey from 2022 published by the Institute for Economic and Enterprise Research (IEER)¹⁸ show that 33 per cent of companies employing at least 10 workers, employ persons with disabilities (altered working capacity), especially companies with 50-249 employees (62 %) and those with 250+ employees (80 %), mainly in the processing industry (49 %), followed by trade (33 %). According to this survey, only 0.8 % of the employees are persons with disabilities. Their proportion is the highest in smaller companies (2.7 %), while the lowest in the largest companies (0.7 %), see Section 7.1.3.

As to any more comprehensive analysis, the topics of the regular labour force survey – carried out by the Central Statistical Office – in every 2nd quarter are supplemented with two questions on health condition that constrains work. These serve as the basis of counting whether the respondent has limited work ability. The data is only rarely published on the website of the Central Statistical Office. Unfortunately, the data from the last such dataset, published in 2020, is unusable for various reasons, see Section 7.1.3.

Coherent data on the employment and general demographic characteristics of persons with disability can be expected in the near future as a result of the census to be held in autumn 2022. In the meantime, we can only assume that the employment rate of the target group is growing as a part of generally expanding employment and as a result of additional policy measures (see Section 3.2.) in support of the labour market participation of persons with disabilities. For the time being, however, this cannot be proved from evidence.

¹⁷ See (in Hungarian): <https://www.ksh.hu/s/kiadvanyok/munkaeropiacy-folyamatok-2022-i-nev/index.html#nttafoglalkoztatottakszma>.

¹⁸ See: The open labour market employment of persons with altered working capacity in Hungary, Economic and Enterprise Research, Budapest, February 2022, (in Hungarian), <https://gvi.hu/kutatas/664/megvaltozott-munkakepessegu-szemelyek-nyilt-munkaeropiacy-foglalkoztatasi-helyzete-magyarorszagon>.

3.2 Analysis of labour market policies relevant to the Semester

For reference, see the 2022 National Reform Programme (NRP), the Recovery and Resilience Plan for Hungary (RRP) and the Implementation of the National Disability Programme 2022.

The policy documents listed above support expectations of an anticipated increase in the employment of people with disabilities. The already discussed specific programme in the NRP (Section 2.1) and the planned measure in the RRP (briefly discussed in Section 2.2.) all point in the same direction, namely towards the open labour market. The situation is similar for the National Disability Programme (NDP): seven of its eight employment-related measures are most certainly intended to support the open labour market integration of people with disabilities.

With this clear priority in mind, one of the two most important new developments in 2022 is measure 4.7 of the NDP, to create a modern internet database integrated with various job portals in order to bring together would-be-employees with disabilities and the employers. The second decisive development of this year is the significant, close to 25 % increase in the rehabilitation contribution tax.

Starting with the latter, it is worth noting that it was not a clear-cut, policy intention, but rather a largely unforeseen consequence of a political decision. Prior to the parliamentary election held in April 2022, one of the strongest Government campaign promises was to raise the minimum wage to EUR 470 (HUF 200 000) – from EUR 377 (HUF 161 000) – as of 1 January 2022. The rehabilitation contribution paid by employers who do not meet the disability employment quota is nine times the minimum wage. From 2022 this became EUR 4 200 (HUF 1 800 000), close to 25 % higher than before. Employers with more than 25 employees must pay this amount per capita annually if the number of employees with disabilities does not reach the mandatory 5 %. This has increased the financial incentive for companies above this size to employ more workers with disabilities. As an additional element of the rehabilitation mathematics, there is a 13 % rebate on the social contribution tax payable on the gross salary of employees with disabilities. All in all, they can be employed under certain conditions almost for free.¹⁹

The Secretary of State responsible for this policy, claimed at a flagship event that:²⁰

‘Many companies do not take advantage of this opportunity, instead they pay EUR 234 million (HUF 100 billion) in rehabilitation contribution tax, thereby denying the employment to around 70 000 people with altered work ability.’

The event was held to present the new campaign built around an integrated service of various job portals and advocacy organisations that brings together would-be-employees with disabilities and business employers.²¹

¹⁹ Workers with disabilities can be employed for a minimum wage and part-time (4 hours a day), practically for free from the employer's point of view, https://ertekvagy.hu/hu/-/rehabilitacioshozzajarulas_2022.

²⁰ See (in Hungarian): <https://www.penzcentrum.hu/karrier/20220504/fontos-munkahelyi-szolgalatas-startol-magyarorszagon-erre-mar-sokan-vartak-1124532>.

Relevant companies can rely on assistance from the recently launched campaign to boost the labour market participation of persons with disabilities. In the capital city, the Budapest Chamber of Commerce and Industry²² is the base for the new consulting service to local businesses. The service aims to improve the labour market situation of people belonging to this target group by supporting interested companies and people with disabilities. In addition, while shaping attitudes, it can effectively alleviate the labour shortage currently afflicting businesses by involving the hitherto underutilised workforce. The basic screening and counselling required to participate in the programme (which shows what form of employment is profitable for businesses in the short term) is available free of charge to Budapest businesses. The Chamber of Commerce offers about a dozen further consulting services to companies.

The market-leading job portal [Profession.hu](https://www.profession.hu) actively supports its partners in finding workers and integrating the hired persons within the framework of the campaign. Together with the Hand in Hand Foundation,²³ [Profession.hu](https://www.profession.hu) helps employers and applicants with HUF 1 job advertisements, informative materials and advice.²⁴

The 'You are valuable!' – Rehabilitation Portal is outstanding at the national level with its information, support and advisory work. It has a special focus on rehabilitation cost calculations for employers, as well as an interactive service map, financed from EU support, developed for the entire target group, on which those concerned can assess the possibilities in their own region. Similarly, there is the Rehabjob portal,²⁵ which has designed a complex integration process for employers who want to employ people with disabilities and need help in order to do so.

The financial benefits of employing people with disabilities and the contribution of various professional agencies in the campaign to increase the labour market participation of the target group – together with additional support measures not yet discussed, such as EUR 117 000 (HUF 50.1 million) employment support programme in 2022²⁶ – are expected to result in a win-win situation in increasing the number of workers with disabilities and the improved economic results of cost-sensitive companies.

The results of a survey conducted by the Institute for Economic and Enterprise Research (IEER)²⁷ at the beginning of 2022 provide insight into some aspects of the employment of workers with disabilities, such as the size and sectoral character of

²¹ See (in Hungarian): <https://www.penzcentrum.hu/karrier/20220504/fontos-munkahelyi-szolgalatas-startol-magyarorszagon-erre-mar-sokan-vartak-1124532>.

²² See: <https://bkik.hu/hu/hirek/a-megvaltozott-munkakepessegeket-foglalkoztatasi-segito-uj-tanacsadasi-szolgalatost-indit-a-bkik>.

²³ See: <https://kezenfogva.hu/munkakozvetites>.

²⁴ See: <https://storeinsider.hu/cikk/szakmai-osszefogással-tamogatja-a-megvaltozott-munkakepessegu-emberek-foglalkoztatasi-a-profession-hu>.

²⁵ See: <https://www.rehabjob.hu/>.

²⁶ See: <https://www.origo.hu/gazdasag/20211125-a-megvaltozott-munkakepessegeket-foglalkoztatott-cegeket-tamogatna-a-kormany.html>.

²⁷ The open labour market employment of persons with altered working capacity in Hungary, Economic and Enterprise Research, Budapest, February 2022, (in Hungarian) <https://gvi.hu/kutatas/664/megvaltozott-munkakepessegu-szemelyek-nyilt-munkaeropiaci-foglalkoztatasi-helyzete-magyarorszagon>.

the employing company and the motivation of the employer. Data show that 33 per cent of companies employing at least 10 workers, employ persons with disabilities (altered working capacity), especially companies with 50-249 staff (62 %) and 250+ staff (80 %). Concerning economic sector, companies in the processing industry tend to employ such workers at the highest rate (49 %), followed by trade (33 %). According to this survey only 0.8 % of employees are persons with disabilities. Their proportion is the highest in smaller companies (2.7 %), and the lowest in the largest companies (0.7 %). Foreign-owned companies employ a significantly higher (1.4 %) proportion of workers with disabilities than fully domestic companies (0.5 %).

Companies generally quoted two motivations to employ workers with disabilities: social responsibility (67 %) and the avoidance of paying the rehabilitation contribution (54 %). The former was the stronger motivating factor for businesses with more than 250 employees and the latter was the stronger factor for small companies with staff of 26-49 people.

A significant proportion of the companies that currently do not employ people with altered working capacity (44 %) were of the opinion that in the future they were likely to employ such persons. More than half of the respondents said that increasing taxation incentives (55 %) and subsidising the costs of creating appropriate working conditions would be the most useful incentives to expand their share in this type of employment.

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

In 2022, the UN CRPD Committee made the following recommendations to Hungary:

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

‘55. The Committee recommends that the State Party take appropriate legislative steps to: (a) Recognize the right of persons with disabilities to an adequate standard of living for them and their families and to progressive improvement in their living conditions through decent disability allowances and benefits and accessible and available housing and services in the community; (b) Redress the negative impacts of the reform of the disability benefits schemes in 2012 and ensure that persons with disabilities are compensated for the damage caused by the reform; (c) Revise the disability entitlement system to make it accessible and easy to use for all persons with disabilities, through the provision of alternative and augmentative modes of information and communication.’

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

‘41. Recalling its general comment No. 5 (2017), the Committee reiterates the recommendations set out in its report on the inquiry concerning Hungary under article 6 of the Optional Protocol to the Convention, urging the State party to: (a) Discontinue the institutionalization of children with disabilities and ensure their right to a family life by redirecting investments from institutions into support measures for families and the provision of inclusive community services, such as inclusive early intervention, across the State party; (b) Ensure independent monitoring of the deinstitutionalization of children with disabilities and independent methodological support for that process, with the close involvement of disability rights organizations; (c) Revise its deinstitutionalization strategy with the aim of redefining its objectives; (d) Redesign its measures and redirect its efforts and budgets into community-based support services, including personal assistance, with the aim of providing for persons with disabilities to live independently in the community equally with others, regardless of their type of impairment, guarantee that community services and facilities for the general population are available for persons with disabilities and ensure that persons with disabilities have the opportunity and right to choose their place of residence on an equal basis with others in the community.’

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

‘51. Taking into account the links between article 25 of the Convention and targets 3.7 and 3.8 of the Sustainable Development Goals, the Committee recommends that the State party: (a) Develop action plans to ensure the accessibility and availability of healthcare facilities, services and equipment for persons with disabilities across the State Party, with a specific emphasis on the sexual and reproductive health of women with disabilities, as well as on accessible information and communication for autistic persons, persons with intellectual disabilities and persons with visual and hearing impairments in general treatment in the healthcare system; (b) Develop training programmes, including in universities and in-service training curricula, for healthcare professionals on the needs and rights of persons with disabilities.’

The most recent CRPD development is the 2022 Concluding Observations based on the state’s submission in 2018.

On 28 April 2020 – as a follow-up to the comments by the CRPD on Hungary’s disability policies²⁸ – an Action Plan for 2020-2022 was adopted by Hungary,²⁹ in which social policy and healthcare were specified areas. The areas of targeted intervention largely overlapped with those addressed by the CRPD. The National Disability Programme (NDP 2015-2025) also identified social inclusion, healthcare and independent living as areas for intervention.³⁰ In August 2021, Hungary pledged to ‘pursue an active role in the Human Rights Council, in particular by promoting minority rights, the rights of persons with disabilities, family and children’s rights, freedom of religion and belief’.³¹ The 2022 CRPD report, which contains concluding observations on the combined second and third periodic reports of Hungary, was published on 20 May 2022.

In July 2022, the Minister of Home Affairs submitted to the Parliament the Mid-term Report on the implementation of the National Disability Programme 2015-2025 (hereinafter Mid-term Report).³² The Mid-term Report provides for a detailed account of the achievements in the first period of the programme, including references to legislation, policies, concrete measures, and statistics (see Section 4.2 on the social and health aspects).

4.1 Summary of the social situation of persons with disabilities

Data from EU-SILC indicate the poverty risk rate for working age persons with disabilities in Hungary was 22.1 % in 2020, compared to 9.8 % for other persons of similar age – an estimated disability poverty gap of approximately 12 percentage points (see Table 14). For people aged over 65, the disability poverty gap was 5.2 points (17.3 % for older persons with disabilities and 12.1 % for other persons of similar age). The tables in the annex to this report also indicate the respective rates of risk of poverty or social exclusion and break these down by gender as well as age. Recently updated data from Eurostat indicates that this relative risk rose for the working age disabled population (22.9 %) and for the older age group (19.6 %) in 2021.³³

²⁸ The report was prepared on 13 September 2019, the Hungarian state comments were attached on 31 March 2020, and the complete set of documents was published on 16 April 2020. Press release:

<https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25799&LangID=E>;

UN documents:

https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRPD%2fC%2fHUN%2fIR%2f1&Lang=en.

²⁹ Official Journal 2020/90, pp. 2265-2277 (in Hungarian). Government Decision No. 1187/2020. (IV. 28.) on Implementation Plan of the National Disability Programme up to 2022.

³⁰ 15/2015 (of 7 April) OGY of the National Assembly on the National Disability Programme (2015-2025), https://www.un.org/development/desa/disabilities/wp-content/uploads/sites/15/2019/10/Hungary_National-Disability-Program-2015-2025.pdf.

³¹ National report submitted in accordance with paragraph 5 of the Annex to Human Rights Council resolution 16/21, A/HRC/WG.6/39/HUN/1, Hungary, p 3,

https://www.ecoi.net/en/file/local/2062062/A_HRC_WG.6_39_HUN_1_E.pdf.

³² See: <https://www.parlament.hu/irom42/00520/00520.pdf> B/520. BESZÁMOLÓ Az Országos Fogyatékosügyi Programban foglalt célok időarányos teljesítéséről (2015-2020).

³³ Eurostat, People at risk of poverty by level of activity limitation, sex and age, 2022, https://ec.europa.eu/eurostat/databrowser/view/hlth_dpe010/default/table?lang=en.

For persons with disabilities of working age (18 to 64) in Hungary, the risk of poverty before social transfers was 51.8 % and 22.1 % after transfers. The in-work poverty rate for persons with disabilities in this age range was 14 % in 2020, and 12.6 % in 2021.³⁴

Of interest to health policy are the data on self-reported unmet needs for medical examination (too expensive, too far to travel or waiting list). Disability equality gaps are evident here too and, on this basis, the rate for persons with disabilities in Hungary was 2.4 %, compared to 0.3 % for other persons.

4.2 Analysis of social policies relevant to the Semester

In 2021, the Equal Treatment Authority was merged with the Office of the Commissioner for Fundamental Rights as the Directorate-General for Equal Treatment. The Directorate-General for Equal Treatment was quite active in dealing with matters relating to disability. In March 2022, Ákos Kozma (Commissioner for Fundamental Rights since 2019) stated:

‘I have conducted authority proceedings in numerous cases, obliging the service providers targeted by the complaints to make their services accessible within a given time limit, or to ensure the accessibility of the buildings concerned’

and

‘I am examining *ex officio* to what extent equal access to care provided by general practitioners is ensured for persons with disabilities in towns with county rights.’³⁵

The case law of the Directorate-General for Equal Treatment is public; in 2022 most cases concerned disability.³⁶ The number of decisions ranges between 30-50 a year and to a high extent ends in favour of the claimants.

There will be a census in Hungary in 2022. Marcell Kovács, census project manager of the Hungarian Central Statistical Office stressed at the forum concluding the professional consultation with 10 domestic NGOs supporting people with disabilities and government partners, that ‘an important part of the October census are questions about the health status of the population and the situation of people with disabilities’.³⁷ It is to be hoped that valuable data will be obtained during the 2022 census on disability.³⁸

³⁴ Eurostat, In-work at-risk-of-poverty rate by level of activity limitation, sex and age, https://ec.europa.eu/eurostat/databrowser/view/hlth_dpe050/default/table.

³⁵ 10 March 2022, Closing statement from delegation Hungary (Ákos Kozma): https://tbinternet.ohchr.org/_layouts/15/TreatyBodyExternal/countries.aspx?CountryCode=HUN&Lang=EN. The *ex officio* examination has not yet been concluded and published.

³⁶ See: <https://www.ajbh.hu/ebff-jogesetek>.

³⁷ See: https://www.ksh.hu/hir_220725.

³⁸ See: <http://www.inclusion-europe.eu/hungary-replies-to-the-list-of-issues-raised-by-the-crpd-committee/>.

Social benefits

The Mid-term Report stressed that:

‘The amount of transport support for people with severe motor disability has increased several times, in addition, people with visual, hearing or mental impairment and people with autism now also have access to this form of support’.³⁹

The fee for caring for children at home, introduced in 2019, has been designed to help families raising children with disabilities, who are unable to support themselves as a result of severe disability, or long-term illness.⁴⁰ In the year of introduction the fee was paid to 20 000 beneficiaries.⁴¹ In 2021, the number of beneficiaries exceeded 22 000 and the amount per capita increased from EUR 276 (HUF 118 000) to EUR 327 (HUF 140 000).

Those who are in receipt of regular monthly benefits with annual adjustments, like disability allowance, rehabilitation benefit and disability benefit, are entitled to the 13th-month support.⁴² The 13th-month support was paid to the beneficiaries of these benefits in February 2021 and in February 2022.

There are several other forms of cash supports: (a) disability allowance (approximately 110 000 beneficiaries); (b) support for the elderly (6 700 beneficiaries), and (c) allowance for people of active age – which includes two types: the allowance to compensate health damage and the allowance to protect against job loss – benefiting 80 000 persons.⁴³ According to the data of the Hungarian Central Statistical Office there have been no remarkable changes in 2021, neither in the number of beneficiaries nor in the amount of benefits per person.⁴⁴ In turn, there are two types of invalidity benefits available for those with reduced working capacity and whose remaining health condition is only 60 % or less based on the complex assessment of the rehabilitation authority. These persons can apply for rehabilitation benefit or disability benefit.

The Commissioner of Fundamental Rights published a report on case AJB-1495/2022, on the inappropriate conditions in a social institution where children with disabilities were living.⁴⁵ A parent complained that the children with disabilities did not live in suitable conditions, the rooms were crowded, the children were neglected, caregivers did not cut the children’s hair and nails, and that there were too few caregivers in relation to the number of persons they served. The Commissioner confirmed that the conditions in the institution were inappropriate, and more generally, concluded that:

³⁹ Mid-term Report on the implementation of the National Disability Programme 2015-2025 (in Hungarian), p. 14, <https://www.parlament.hu/irom42/00520/00520.pdf>.

⁴⁰ Social Act III of 1993, Article 38 SA.

⁴¹ See: https://www.ksh.hu/stadat_files/szo/hu/szo0021.html (HSO).

⁴² Government Decree No 342/2020. (VII. 14.) on 13th-month support, Article 1.

⁴³ Social Act III of 1993, Articles 32/B and 33 SA.

⁴⁴ See: https://www.ksh.hu/stadat_files/szo/hu/szo0021.html (HSO).

⁴⁵ See: Commissioner of Fundamental Rights, 2022, [Report of the Commissioner of Fundamental Rights is AJB-1495/2022: Examination of the living conditions of persons with disabilities in a nursing home](#).

'The *raison d'être* of large institutions can no longer be justified: the fundamental right and legitimate interest of every person with disabilities is to live independently and to participate actively in community life'.⁴⁶

A tender was announced for the year 2022 entitled '*Biztos Kezdet Gyerekházak*' (Sure start children homes), developed in the context of the EFOP-1.4.3.-16 grant, in settlements participating in the social inclusion strategy programme.⁴⁷ The sure start initiative encompasses early childhood development (ECD) opportunities in segregated and disadvantaged micro-regions composed of Roma and non-Roma populations.⁴⁸

The Government has been supporting the work of several civil organisations specialised in helping people with disabilities. These organisations aim to create a more inclusive society that accepts and understands people with disabilities. The Kézenfogva Foundation and ÉFOÉSZ (National Association for the Protection of the Interests of People with Intellectual Disabilities and their Supporters) provide continuing programmes for people with disabilities.⁴⁹ The EFI (healthy disability information) portal supports people with disabilities to obtain updated, correct information.⁵⁰

Healthcare

The Mid-term Report dedicates a full chapter to healthcare.⁵¹ It refers to EFOP-2.2.19-17 'Development of outpatient specialist services' with a budget of EUR 55 million (HUF 23.35 billion), which is implemented in less developed regions, and encompasses the improvement of accessibility (access ramps, lifts), special screening measures and medical devices for persons with disabilities, as well as specially designed IT platforms.

The 2022 CRPD report addressed the accessibility and availability of healthcare facilities, services and equipment for persons with disabilities across the State Party.⁵² The Commissioner of Fundamental Rights published a report on case AJB-2878/2022, on maternity care for a person with disabilities and on contact with her child.⁵³ The child of the mother with intellectual disability was transferred to another hospital without a medical reason, thereby preventing the mother from forming a strong emotional bond with her child in the first days. The report concluded that the mother had not received individualised care adapted to her needs and demands

⁴⁶ [Report of the Commissioner of Fundamental Rights is AJB-1495/2022: Examination of the living conditions of persons with disabilities in a nursing home](#), p 12.

⁴⁷ See: <https://szocialisportal.hu/palyazati-felhivas-felzarkozo-telepulesek-programban-resztvevo-telepuleseken-az-efop-1-4-3-16-palyazat-kereteben-fejlesztett-biztos-kezdet-gyerek hazak-2022-evre-torteno-koltsegvetesi-tamogatasr/>.

⁴⁸ See: <https://epha.org/benefitting-children-parents-and-community-the-sure-start-programme-in-hungary/>.

⁴⁹ See: <http://www.kezenfogva.hu/ismerd-meg-munkankat> and *Értelmi Fogyatékosággal Élők és Segítőik Országos Érdekvédelmi Szövetsége (ÉFOÉSZ)* <https://efoesz.hu/magunkrol/>.

⁵⁰ See: www.efiportal.hu.

⁵¹ [Mid-term Report on the implementation of the National Disability Programme 2015-2025](#), pp. 20-28.

⁵² UN CRPD Concluding observations 2022, paragraph 51, <https://www.ecoi.net/en/file/local/2070611/G2234836.pdf>

⁵³ See: <https://www.ajbh.hu/documents/10180/b376209d-2fbc-132a-a664-9655dc7c6a76>.

during the hospitalisation and the guardianship proceedings, which could have provided her with supportive assistance during these extraordinary events. This inadequacy of care was revealed by the Commissioner and he initiated the setting up of a working group with the Minister of Home Affairs, responsible for healthcare, to map the practices, tools and methods available and to be developed, in order to help women with disabilities during pregnancy and childbirth.

The Directorate-General for Equal Treatment has dealt with access to healthcare in case 174/2021.⁵⁴ The authority argued that the hospital did not have enough information about the applicant's abilities, how much they decreased and to what extent this would have made the orthopaedic treatment more difficult (the patient had mental disability resulting from Down syndrome). That is, the hospital rejected the applicant due to his 'basic illness', i.e. his disability, without clarifying its extent and effect on the treatment. The authority therefore established that the hospital violated the requirement of equal treatment because it decided to reject his admission into the hospital without clarifying his condition, abilities and situation from the point of view of starting and conducting physiotherapy, i.e. the hospital decided on rejection prior to clarifying the reasonable grounds for the refusal.

The Directorate-General for Equal Treatment has also dealt with physical accessibility of services several times – mainly transport-related claims, like bus transport, high sidewalks, lack of proper parking spaces – and one case concerning access to public services.⁵⁵ In that case (which did not specify the type of public service), the Directorate-General for Equal Treatment found a violation of equal treatment because the public service building was not barrier-free, as it only has stairs for entering, there was no access ramp, there was limited space in the interior, and there was no parking lot for people with disabilities.

The Bethesda children's hospital operates a special dental clinic for SNI children (children with special needs), and a new book helps parents to prepare their children for the dental intervention.⁵⁶

Since mid-2022, the field of compulsory healthcare falls within the competence of the Ministry of Home Affairs. The new State Secretary announced that there are three main priorities: strengthening the prevention approach, strengthening the role of primary care and closer-to-home care, and the re-evaluation of the occupational health system. These objectives are in line with the needs of persons with disabilities and would contribute to the improvement of their health status.⁵⁷

⁵⁴ EBF-AJBH-174/2021.

⁵⁵ EBF-AJBH-251/2021.

⁵⁶ See: <https://www.bethesda.hu/hireink/sni-mesekonyv/>.

⁵⁷ See: <https://novekedes.hu/hirek/a-kormany-harom-fo-celt-akar-elerni-az-egeszsegugyben>.

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

In 2022, the UN CRPD Committee made the following recommendations to Hungary:

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

‘49. Recalling its general comment No. 4 (2016) and target 4.5 and indicator 4.a of the Sustainable Development Goals, the Committee recommends that the State party: (a) Revise its Public Education Act with the aim of eliminating all discriminatory provisions regarding the education of children with disabilities and explicitly provide for quality inclusive education to ensure that no child with disabilities is excluded from the general education system on the basis of impairment; (b) Ensure access to the general education system in the community and provide the necessary reasonable accommodations for all children with disabilities on an equal basis with other children; (c) Guarantee access to regular education facilities and transportation for children with physical disabilities in their communities across the State party; (d) Provide comprehensive and focused training for general education teachers and administrative staff on the principles and methods of inclusive education, the capacities of children with disabilities and the individualized support measures required by children with disabilities; (e) Provide access to the general education for deaf and hard-of-hearing children and promote bilingual education opportunities within an inclusive educational setting, particularly through quality sign language and other support that is required; (f) Ensure the accessibility of regular vocational education facilities and programmes for all children with disabilities, particularly for autistic children and children with intellectual disabilities, through measures of universal design and reasonable accommodation; (g) Take measures aimed at ensuring access to inclusive, high-quality and free primary, secondary and vocational education for children with disabilities, including Roma children, on an equal basis with others.

41. The Committee calls upon the State party to allocate sufficient resources for the development of an inclusive education system for children with disabilities. It reiterates that denial of reasonable accommodation constitutes discrimination and recommends that the State party significantly increase its efforts to: provide reasonable accommodation to children with disabilities based on the student’s individual requirements; provide students with disabilities with the required support within the general education system; and to continue training teachers and all other educational staff to enable them to work in inclusive educational settings.

42. The Committee urges the State party to develop programmes to ensure that Roma children with disabilities are included in mainstream education programmes, without disregarding the provision of reasonable accommodation that might be needed to obtain the desired outcome.’

The most recent CRPD development is the 2022 concluding observations based on the state’s submission in 2018.

5.1 Summary of the educational situation of persons with disabilities

The EU-SILC 2020 estimates concerning educational attainment should be treated with caution due to relatively wide confidence intervals but they consistently indicate disability equality gaps (an average of 2-3 years provides a more stable indication). Table 16 indicates early school leaving rates disaggregated by disability status in Hungary. Youths with disabilities (aged 18-24) are significantly more likely to leave school than non-disabled peers of the same age groups (and this is reinforced by

widening the sample size to age 18-29). Table 17 shows the completion rate of tertiary education disaggregated by disability and age group. Persons with disabilities (aged 30-34) are less likely to complete tertiary education than their peers (and this is reinforced in the wider age range 30-39).

The number of SEN students in the Hungarian education system has grown continuously in the last 20 years, with a remarkable increase in the most recent school year: the number of SEN students increased from 92 800 to 97 300⁵⁸ from school year 2020/21 to 2021/22. The growing number of SEN students is a big challenge for a school system already trying to operate with scarce human resources. The Hungarian Civil Liberties Union and its civil partner (CSEVE, bringing together parents of SEN students) receive a lot of complaints⁵⁹ from parents, whose children cannot fit in the school assigned for them, or do not get the prescribed developmental sessions in the school.⁶⁰

Integration

In school year 2020/21, 73 % (41 800) of primary school SEN students studied in an integrated educational setting.⁶¹ Of all special education institution students, 71 % live with mild or moderate intellectual disability, and 10 % live with autism spectrum disorder.⁶² Of those who attend secondary education, most SEN students go to special education secondary schools (6 900 students), and 3 400 students learned in regular secondary schools.⁶³

The rate of integrally educated SEN students increases in schools from grades 1-6, stagnates in the 7th grade and decreases in grades 8-9.⁶⁴ The number of SEN students in special education is significantly more stable in grades 1-8, increases by 0.7 % in grade 9, and decreases afterwards.⁶⁵ The increase in the 9th grade is probably caused by formerly integrally educated SEN students transferring to special schools after elementary education.

Regional differences are high in the proportion of integrally educated SEN students among all students.⁶⁶ SEN students tend to attend schools with high rates of disadvantaged students (independent of the region); in schools where the rate of disadvantaged students is high or very high, the rate of SEN students is around

⁵⁸ Central Statistical Office, 2022: https://www.ksh.hu/stadat_files/okt/hu/okt0006.html.

⁵⁹ Hungarian Civil Liberties Union, 2018: <https://tasz.hu/cikkek/kisokos-az-en-fogyatekossaggal-elo-gyerekeknek-is-jar-oktatas>.

⁶⁰ More anecdotal evidence on this topic: <https://telex.hu/belfold/2022/09/03/tobb-mint-ket-tucatskola-utasitotta-el-az-sni-s-ikerlanyokat-mire-egy-tanintezmeny-vegul-befogadta-oket>.

⁶¹ Central Statistical Office, 2021: <https://www.ksh.hu/docs/hun/xftp/idoszaki/oktat/alt-iskola2021/index.html#asajtosnevelsiignytanulkszmasarnyatovbbemelkedett>.

⁶² Central Statistical Office, 2021: <https://www.ksh.hu/docs/hun/xftp/idoszaki/oktat/alt-iskola2021/index.html#asajtosnevelsiignytanulkszmasarnyatovbbemelkedett>.

⁶³ Central Statistical Office, 2021: <https://www.ksh.hu/docs/hun/xftp/idoszaki/oktat/kozepiskola2021/index.html>.

⁶⁴ The Indicator System of the Hungarian Public Education 2021, p. 213, https://kti.krtk.hu/wp-content/uploads/2022/02/A_kozoktatas_indikatorrendszer_2021.pdf.

⁶⁵ The Indicator System of the Hungarian Public Education 2021, p. 213, https://kti.krtk.hu/wp-content/uploads/2022/02/A_kozoktatas_indikatorrendszer_2021.pdf.

⁶⁶ From the database: 'Statistical Data of Institutions of Public Education'. The database was provided by the Educational Authority of Hungary, calculations of the author.

13 % and only 6.2 % in schools with a student population from a more advantaged background.⁶⁷

Quality

According to a 2021 study⁶⁸ funded by the European Commission, there is a significant shortage in the number of school professionals caring for and educating SEN students. More than 60 % of participating schools stated that they need more special education teachers, psychologists, or pedagogical assistants.⁶⁹

The number of special education teachers (and conductors), and psychologists employed in public education institutions has doubled from 2010 to 2020, but regional differences remain high.⁷⁰ The most significant shortage of professionals is evident in disadvantaged regions compared to the national average (13.4 students per special education teacher in primary schools): in Szabolcs-Szatmár-Bereg county, the average is 39.6 students per special education teacher.⁷¹

Hungary's Public Education Strategy for the European Union 2021-2030 highlights SEN status as one of the most critical risk factors in early school leaving (besides disadvantaged background and regular nonattendance).⁷² This statement became increasingly true during the digital learning phase of the COVID-19 pandemic. One of the ways the COVID-19 pandemic affected SEN students was through the shortage of digital devices or skills⁷³ (not only on the students' but also on the teachers' side). According to a non-representative survey⁷⁴ by a public benefit association with 770 respondents from parents with SEN children, 8.2 % of the students did not have an opportunity to participate in distance learning, and 15.1 % of the students had only one school day per week.

In the current situation, where the supply of SEN students is steadily increasing, but the supply of teachers and other special education staff is decreasing,⁷⁵ it would take significant investment to turn things around and meet the goal set in the 2022 Council Recommendation: 'Improve education comes and increase the participation

⁶⁷ The Indicator System of the Hungarian Public Education 2021, p. 34, https://kti.krtk.hu/wp-content/uploads/2022/02/A_kozoktatasi_indikatorrendszer_2021.pdf.

⁶⁸ Scarcity of Human Resources in the Hungarian Public Education System, 2021, https://www.t-tudok.hu/files/2/kutatasi_zarjelentes_t-tudok_magyar_210x297mm.pdf.

⁶⁹ Scarcity of Human Resources in the Hungarian Public Education System, 2021, https://www.t-tudok.hu/files/2/kutatasi_zarjelentes_t-tudok_magyar_210x297mm.pdf, p. 54.

⁷⁰ Scarcity of Human Resources in the Hungarian Public Education System: https://www.t-tudok.hu/files/2/kutatasi_zarjelentes_t-tudok_magyar_210x297mm.pdf, p. 54.

⁷¹ From the database: 'Statistical Data of Institutions of Public Education'. The database was provided by the Educational Authority of Hungary, with calculations of the author.

⁷² Hungarian Government (2020): *Az Európai Unió számára készített Köznevelési Stratégia (2021-2030)*, p. 50, <https://2015-2019.kormany.hu/download/d/2e/d1000/K%C3%B6znevel%C3%A9si%20strat%C3%A9gia.pdf>.

⁷³ Hungarian Recovery and Resilience Plan, 2021, p. 45, https://commission.europa.eu/business-economy-euro/economic-recovery/recovery-and-resilience-facility/recovery-and-resilience-plan-hungary_en#hungarys-recovery-and-resilience-plan.

⁷⁴ 'Step by step!' Association (2020), https://lepjunkhogylephessenek.hu/kerdoivunk-a-sajatos-nevelesi-igenyu-tanulok-helyzeterol-a-tavoktatásban/?fbclid=IwAR1Q5zYis9z291dU7d8v9OJbtodMq_F-shUSUexWKze8mj7methe_accessibility_of_digitalsbrnxRBgIKY.

⁷⁵ *CSR Hungary, 2022*, p. 9.

of disadvantaged groups, in particular Roma in quality mainstream education. Improve access to quality preventive and primary care services.⁷⁶ Data from the Convergence Programme of Hungary 2022-2026 is not convincing that there will be solid financial background for this kind of development; it predicts education expenditure to decrease from 3.4 % of GDP in 2020 to 3 % in 2030.⁷⁷

5.2 Analysis of education policies relevant to the Semester

For reference, see the 2022 National Reform Programme, the Recovery and Resilience Plan for Hungary and the Implementation of the National Disability Programme 2022.⁷⁸

Hungary's Public Education Strategy for the European Union 2021-2030 marks out nine general areas of development⁷⁹ for inclusive education and the education of SEN students:

- supporting inclusive education for SEN children;
- providing professional support to some non-inclusive yet modern ways of educating SEN children;
- the development of the service provided to children with severe or multiple disabilities in public education;
- supporting the education of children undergoing long-term treatment;
- supporting the exploration of talents and helping students to capitalise on that talent;
- provide career guidance for students, with special attention to orienting girls towards STEM areas;
- supporting the use of ICT tools and digital pedagogical solutions in the development of SEN students' skills;
- the development of the human resources and material conditions essential for inclusive education in educational institutions;
- the development of the service of pedagogical service institutions (*pedagógiai szakszolgálat*).

The National Disability Programme 2022⁸⁰ contains 13 goals related to early intervention, education, and training of people with disabilities. There is some overlap with the goals of the Public Education Strategy (e.g. the support of inclusion, the strengthening of career guidance services, and the support of pedagogical service institutions).

Other goals include theoretical ones that aim to create a more transparent basis for further developments and investments in the sector, such as:

⁷⁶ [CSR Hungary, 2022](#), 3. action, p. 12.

⁷⁷ Convergence Programme of Hungary 2022-2026, p. 72, https://commission.europa.eu/system/files/2022-07/convergence_programme_of_hungary_2022_en.pdf.

⁷⁸ Government Decision No. 1187/2020, in Hungarian, <https://njt.hu/jogszabaly/2020-1187-30-22>.

⁷⁹ *Magyarország Kormánya (2020): Az Európai Unió számára készített Köznevelési Stratégia (2021-2030)*, pp. 57-58, <https://2015-2019.kormany.hu/download/d/2e/d1000/K%C3%B6znevel%C3%A9si%20strat%C3%A9gia.pdf>.

⁸⁰ See: <https://njt.hu/jogszabaly/2020-1187-30-22.1>.

- harmonisation of different definitions used for people with multiple disabilities;
- reflection on the relationship between psychosocial disabilities and SEN status; and
- revision of the development pedagogy's professional content and legal status.

There are also structural goals, such as:

- the harmonisation of the working processes of different diagnostic forums;
- the introduction of bilingual education (sign language); and
- the introduction of content about disability, equal access, and rehabilitation into relevant higher education studies.

In addition, there are goals connected directly to higher education and employability, such as:

- strengthening SEN students' foreign language skills;
- the review and cataloguing of services provided for SEN students in tertiary education; and
- development of ways to include SEN students in healthcare vocational training.

Two of the nine main components of the 2021 Hungarian Recovery and Resilience Plan⁸¹ build their reform and investment plans around different levels of education. Component 'A' is Demography and public education, and component 'B' is Highly qualified, competitive workforce. No measures directly target SEN students, but some plans could affect them positively. Component 'A' incorporates multiple aims to support the digital transformation of public education. One goal is to have 50 % of pedagogues use ICT tools in at least 40 % of their lessons by 2030.⁸² This goal is supported by an investment plan that aims to provide 615 000 notebooks to pedagogues and students by 2025, deliver creative and problem-solving ICT programmes to 3 100 schools by 2024,⁸³ and involve 30 000 pedagogues⁸⁴ in training programmes encouraging the use of digital educational tools and methods. As persons with disabilities in Hungary tend to be poorer than the average population,⁸⁵ digital technology can represent an important opportunity for SEN students and adults with disabilities to participate in quality education and training in a relatively cost-effective way. For SEN students to be able to enjoy this opportunity, access to digital devices and acquiring basic IT skills should be supported.

⁸¹ 2021 Hungarian Recovery and Resilience Plan, https://ec.europa.eu/info/business-economy-euro/recovery-coronavirus/recovery-and-resilience-facility/recovery-and-resilience-plan-hungary_en.

⁸² 2021 Hungarian Recovery and Resilience Plan, pp. 53-54, https://ec.europa.eu/info/business-economy-euro/recovery-coronavirus/recovery-and-resilience-facility/recovery-and-resilience-plan-hungary_en.

⁸³ 2021 Hungarian Recovery and Resilience Plan, pp. 55-56, https://ec.europa.eu/info/business-economy-euro/recovery-coronavirus/recovery-and-resilience-facility/recovery-and-resilience-plan-hungary_en.

⁸⁴ 2021 Hungarian Recovery and Resilience Plan, p. 60, https://ec.europa.eu/info/business-economy-euro/recovery-coronavirus/recovery-and-resilience-facility/recovery-and-resilience-plan-hungary_en.

⁸⁵ Hungarian Central Statistical Office (2015): http://www.ksh.hu/docs/hun/xftp/idoszaki/nepsz2011/nepsz_17_2011.pdf.

Hungary's 2022 National Reform Programmes mentions one (EU-financed) programme connected directly to SEN students: an on-going project involving 37 special education institutions. The programme aims to support inclusive education through the development of pedagogical methods, and their quality assurance and dissemination.⁸⁶

In addition to established nationwide programmes such as *Tanoda Program*⁸⁷ or *Arany János Program*,⁸⁸ 'Let's Teach for Hungary' is a relatively new initiative to reduce the drop-out rate of disadvantaged children by pairing university and secondary school mentors with 7th and 8th grade primary school students. There is no publicly available report on the results, or the number of SEN students included.

⁸⁶ [NRP, 2022](#), p. 42.

⁸⁷ [NRP, 2022](#), p. 42.

⁸⁸ [NRP, 2022](#), p. 42.

6 Investment priorities in relation to disability

Recovery and Resilience Plan for Hungary

The EU budget has an additional layer of protection in cases in which breaches of the rule-of-law principles affect or risk affecting EU financial interests. This general conditionality regime to protect the EU budget⁸⁹ has been in force since January 2021.⁹⁰ It allows the Commission to suspend disbursement of EU funds to a given state if it is adjudged to have violated the rule of law. The European Commission sent a letter to the Hungarian Government to start the conditionality mechanism on 5 April 2022. At the same time, the European Commission has not given the greenlight to Hungary and Poland for the Next Generation EU fund.⁹¹ So currently, the Recovery and Resilience Plan for Hungary has not been approved.

Hungary submitted its Recovery and Resilience Plan on the use of Recovery and Resilience Facility funds on 12 May 2021, after it was revealed that the country would forgo the significant EUR 9.1 billion credit line of the recovery package, and only take the grants, worth EUR 7.2 billion.⁹² On 18 March 2022, the Hungarian Government requested the immediate provision of the allocated loan facility under the Recovery and Resilience Facility for defence and border control, as well as humanitarian and other acute crisis management tasks. In his letter, the Hungarian Prime Minister explained this changed position in terms of the adjustment required by the crisis situation related to the Ukrainian war.⁹³ There is no information available on the Government's amended plans.

Therefore, the following comments are based on the Recovery and Resilience Plan for Hungary submitted on 11 May 2021.⁹⁴ There is no information about an amended plan.

The only mention of disability concerns the horizontal measures of the Recovery and Resilience Plan,⁹⁵ where the text simply refers to the European Pillar of Social Rights concerning social inclusion of persons with disabilities. There is no other mention of specific programme related to persons with disabilities.

Persons with changed ability to work are mentioned only *once* in the text:⁹⁶ they are part of the target group of the *EFOP Plusz Program* aimed at the social inclusion of persons with cumulated disadvantages.⁹⁷

⁸⁹ Regulation (EU, Euratom) 2020/2092 of the European Parliament and of the Council of 16 December 2020 on a general regime of conditionality for the protection of the Union budget.

⁹⁰ European Commission, Rule of law conditionality regulation, https://ec.europa.eu/info/strategy/eu-budget/protection-eu-budget/rule-law-conditionality-regulation_en.

⁹¹ Tamma P., Brussels holds up Hungary's recovery plan ... but for how long?, Politico, 7 July 2021, <https://www.politico.eu/article/brussels-holds-up-hungarys-recovery-plan-but-for-how-long/>.

⁹² Liboreiro J., Hungary left waiting as 12 EU states have spending plans for COVID recovery approved, in Euronews, 26 August 2021, <https://www.euronews.com/2021/07/13/hungary-left-waiting-as-12-eu-states-have-spending-plans-for-covid-recovery-approved>.

⁹³ See: <https://cdn.kormany.hu/uploads/sheets/8/86/86a/86ade12ca394e1244d5ea5dd51e1b85.pdf>.

⁹⁴ See: <https://www.palyazat.gov.hu/helyreallitasi-es-ellenallokepessegi-eszkoz-rrf#>.

⁹⁵ *Magyarország Helyreállítási és Ellenállóképességi Terve (RRP)*, <https://www.palyazat.gov.hu/helyreallitasi-es-ellenallokepessegi-eszkoz-rrf>, p. 31.

⁹⁶ *Magyarország Helyreállítási és Ellenállóképességi Terve (RRP)*, <https://www.palyazat.gov.hu/helyreallitasi-es-ellenallokepessegi-eszkoz-rrf>, p. 338.

Relevant projects and investment priorities

There have been important positive steps in recent years to start the deinstitutionalisation process and to close down large-scale institutional care settings. Hungary began to use significant amounts of EU funding to move investments towards community-based solutions. The European Strategic and Investment Funds (ESIF) support two operational programmes to transform institutional care to community-based services (deinstitutionalisation) in Hungary. The programmes aim to ensure the deinstitutionalisation of 10 000 persons with disabilities through the ESIF funds between 2017 and 2023.⁹⁸

While acknowledging that a network of community-based services must be developed and that such services are preferable to institutions,⁹⁹ Hungary is launching projects aimed at reducing the number of beneficiaries of large-scale institutional social care.¹⁰⁰ At the same time, the purpose of the TÁRS (Partner) project is to provide professional and methodological background and coordination for deinstitutionalisation in Hungary – for social residential institutions providing long-term care for persons with disabilities in the entire country, in accordance with the provisions of the National Disability Programme and other relevant legislation.¹⁰¹

In the field of employment, the main priority is unchanged, namely to step up the labour market integration of people with disabilities in particular by providing upskilling and offering any necessary occupational rehabilitation services. As a continuation of the 2015-2022 completed programme of ‘Support for people with altered working capacity’, a further labour market intervention programme as planned in the RRP should be launched in order to increase the employability of people with disabilities. However, measures to address accessibility and reasonable accommodation are missing from the RRP.

⁹⁷ See: https://www.palyazat.gov.hu/emberi_eroforras_fejlesztési_operatív_program_plusz#.

⁹⁸ See: <https://fszk.hu/english/deinstitutionalization/role-of-fszk-within-the-deinstitutionalisation-process-in-hungary/>.

⁹⁹ National Disability Programme between 2015 and 2018 (No: 1653/2015. (IX. 14.), available (in Hungarian) at: http://njt.hu/cgi_bin/njt_doc.cgi?docid=177684_298372.

¹⁰⁰ Government Decree 1023/2017, Paragraph 7(5): Long-term concept on deinstitutionalisation for the term 2017-2036.

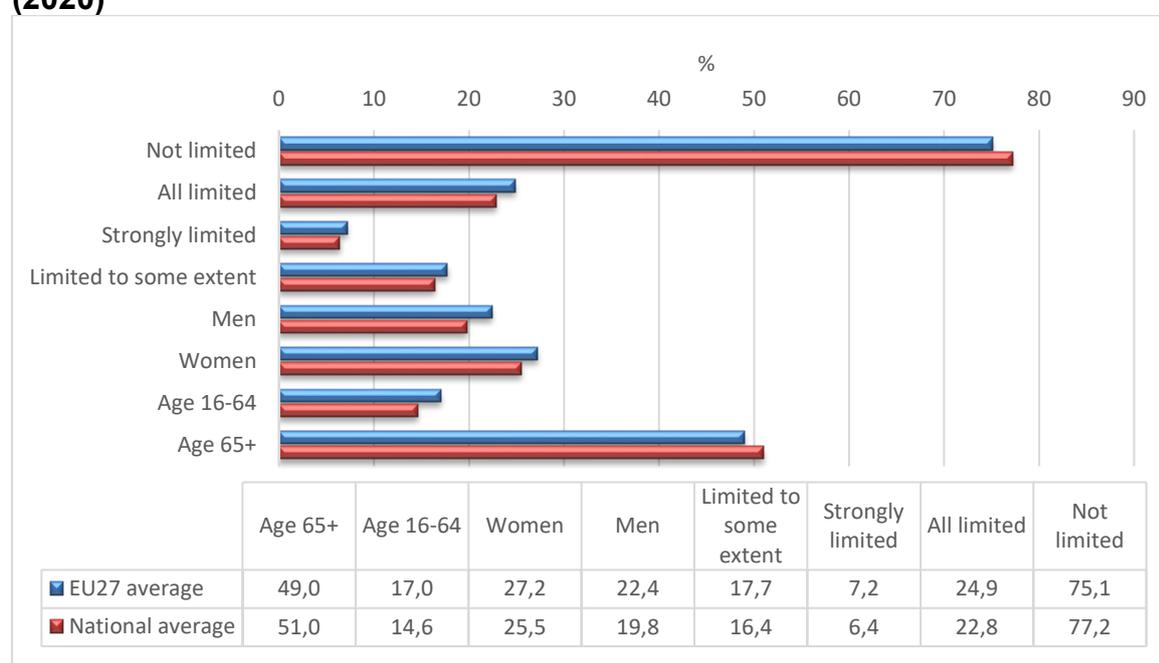
¹⁰¹ See: <https://fszk.hu/english/deinstitutionalization/project-facts/>.

7 Annex: disability data relevant to the Semester

See also disability data published in the Eurostat database¹⁰² and statistical reports.¹⁰³

Unless specified, the summary statistics are drawn from the most recent EU-SILC data available to researchers from Eurostat. The EU-SILC sample includes people living in private households and does not include people living in institutions (congregative households). The sampling methods vary somewhat in each country. The proxy used to identify people with disabilities (impairments) is whether ‘for at least the past 6 months’ the respondent reports that they have been ‘limited because of a health problem in activities people usually do’.¹⁰⁴

Table 1: Self-reported ‘activity limitations’ as a proxy for impairment / disability (2020)



Source: EU-SILC 2020 Release April 2022

In subsequent tables, these data are used to indicate ‘disability’ equality gaps and trends relevant to the analytical chapters – for the labour market, social policies and healthcare, and education – by comparing outcomes for persons who report and do not report ‘activity limitations’.¹⁰⁵ National estimates for Hungary are compared with EU27 mean averages for the most recent year.¹⁰⁶

¹⁰² Eurostat Health Database: <https://ec.europa.eu/eurostat/web/health/data/database>.

¹⁰³ Eurostat (2019) Disability Statistics: https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Disability_statistics.

¹⁰⁴ The EU-SILC survey questions are contained in the Minimum European Health Module (MEHM), [https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Special:WhatLinksHere/Glossary:Minimum_European_Health_Module_\(MEHM\)](https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Special:WhatLinksHere/Glossary:Minimum_European_Health_Module_(MEHM)).

¹⁰⁵ This methodology was developed in the annual statistical reports of ANED, available at: <http://www.disability-europe.net/theme/statistical-indicators>.

¹⁰⁶ The exit of the United Kingdom from the EU changed the EU average. EU27 averages have been affected also by time series breaks in other large countries, such as Germany.

7.1 Data relevant to disability and the labour market

Table 2: EU and Hungary employment rates, by disability and gender (aged 20-64) (2020)

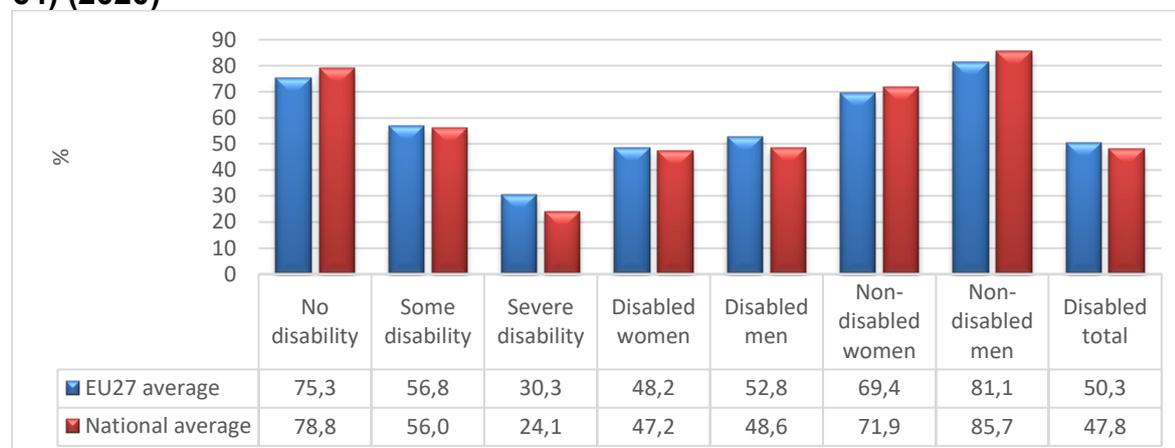


Table 3: Employment rates in Hungary, by disability and age group (2020)

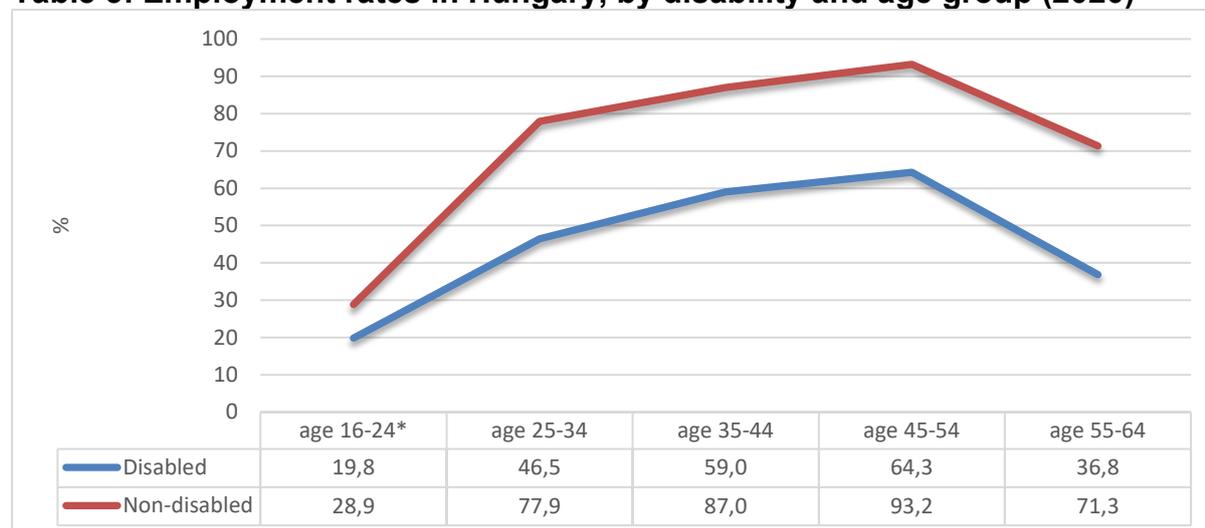
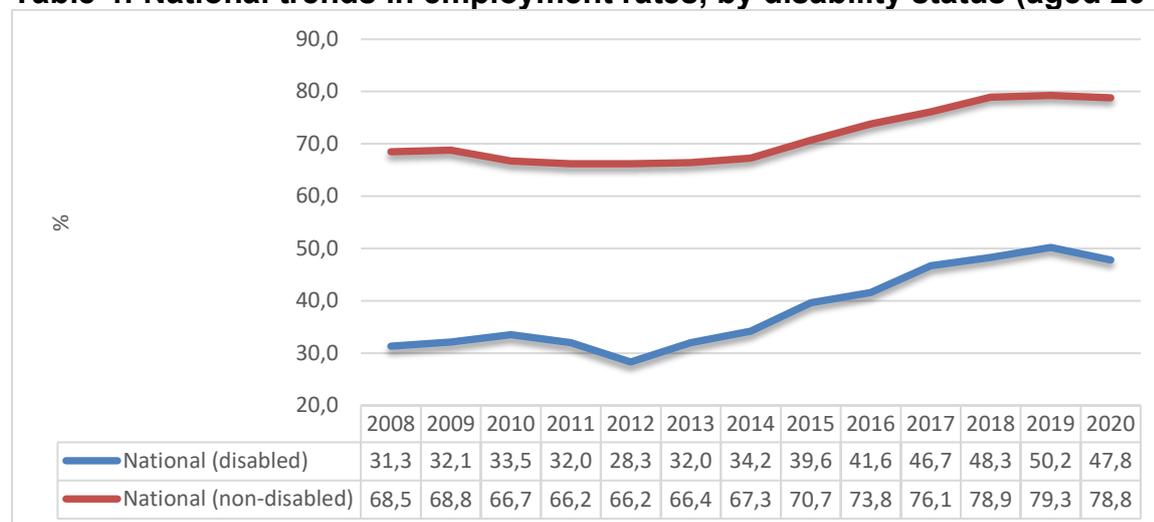


Table 4: National trends in employment rates, by disability status (aged 20-64)



Source: EU-SILC 2020 Release April 2022 (and preceding UDBs)

Note: Microdata concerning employment status was not available for Germany and Italy in this data release, which affects the EU27 average (which is therefore estimated).

7.1.1 Unemployment

Table 5: Unemployment rates by disability and gender (aged 20-64) (2020)

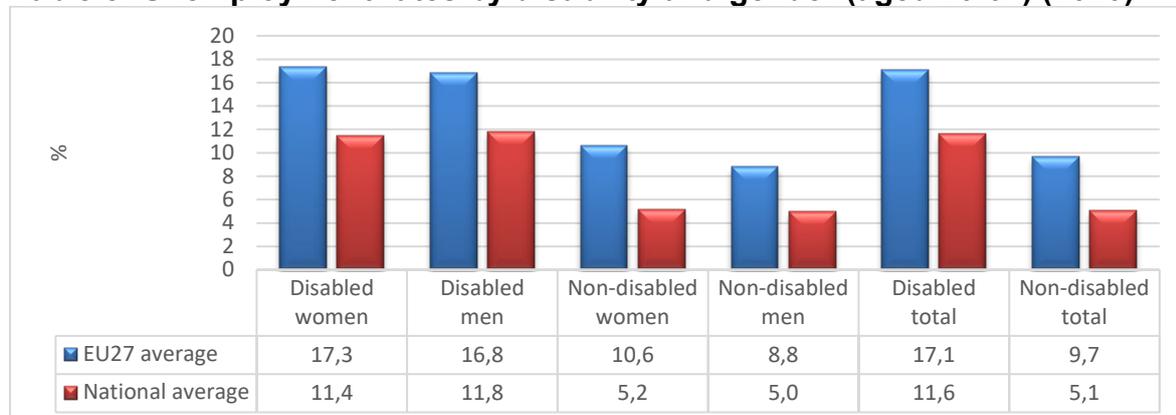


Table 6: Unemployment rates in Hungary, by disability and age group (2020)

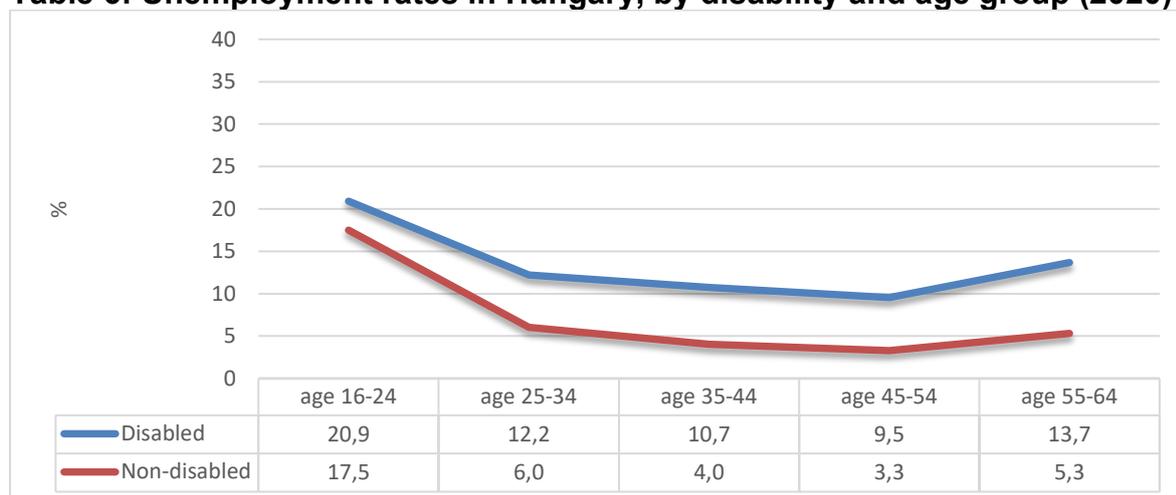
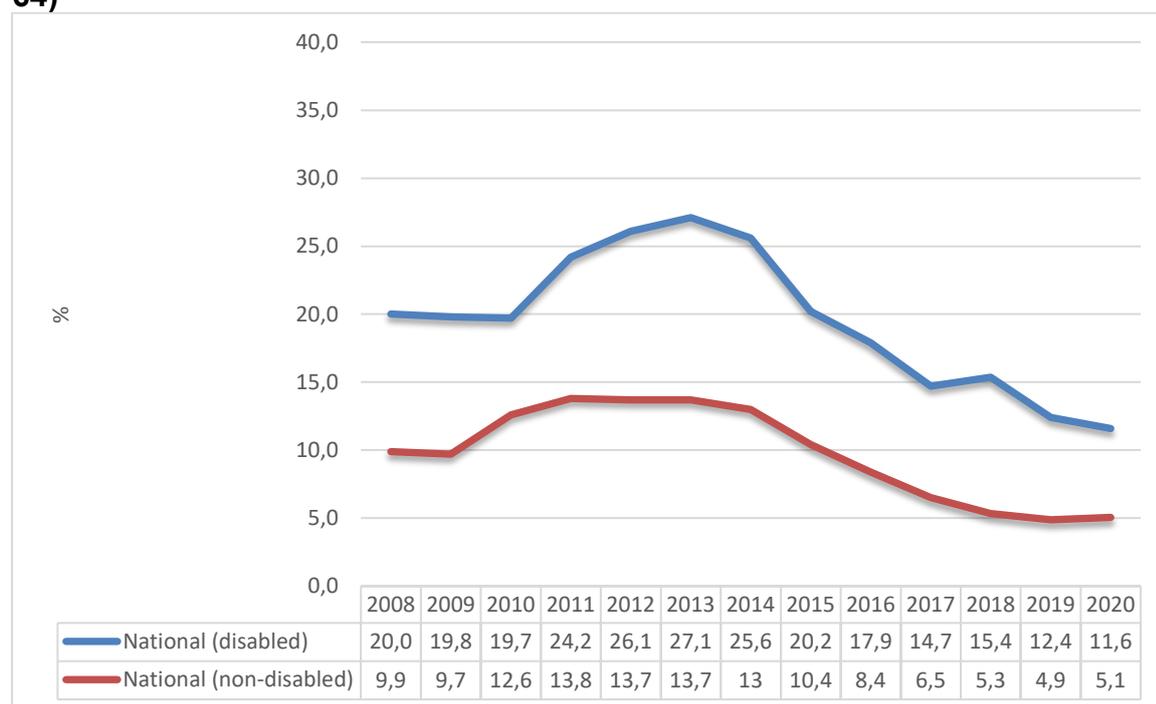


Table 7: National trends in unemployment rate, by disability status (aged 20-64)


Source: EU-SILC 2020 Release April 2022 (and preceding UDBs)

7.1.2 Economic activity

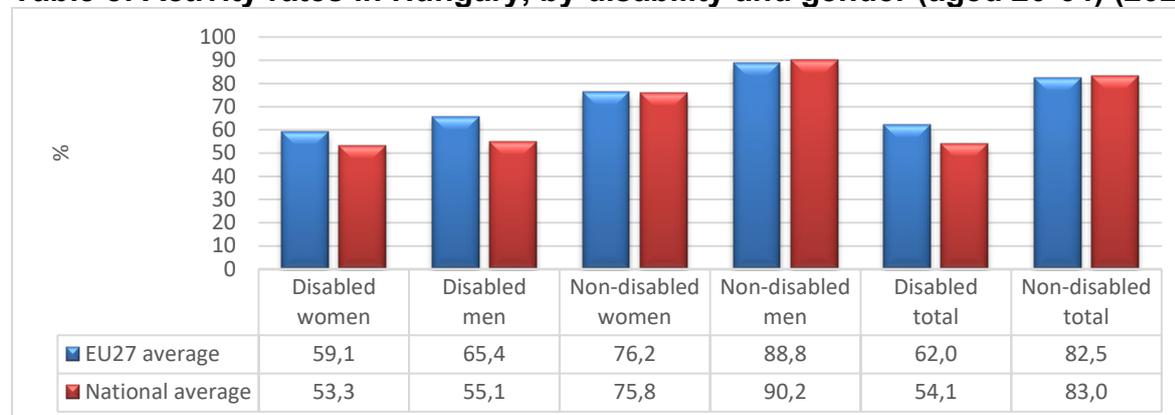
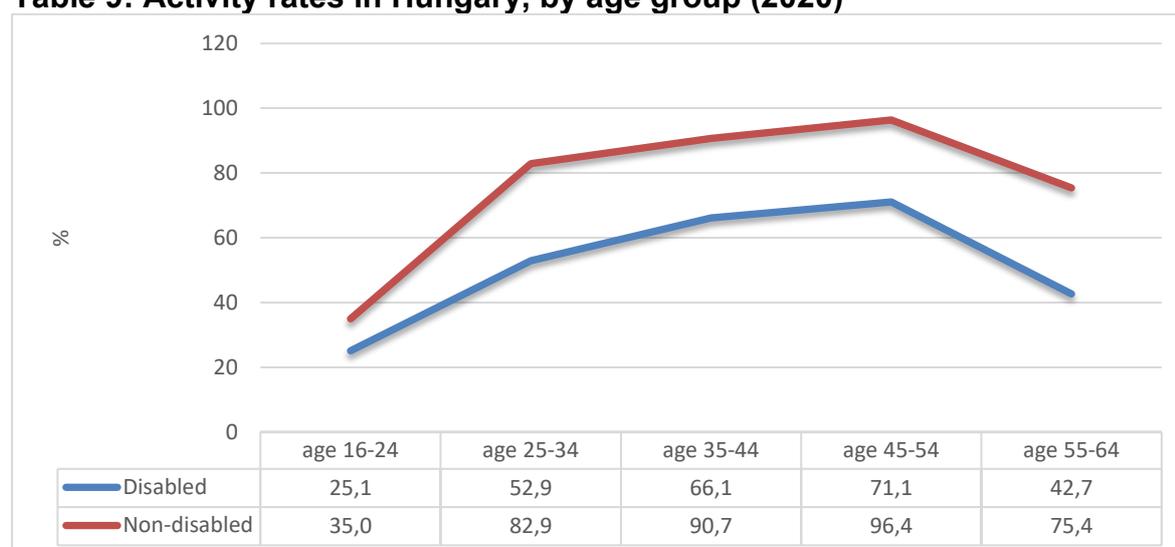
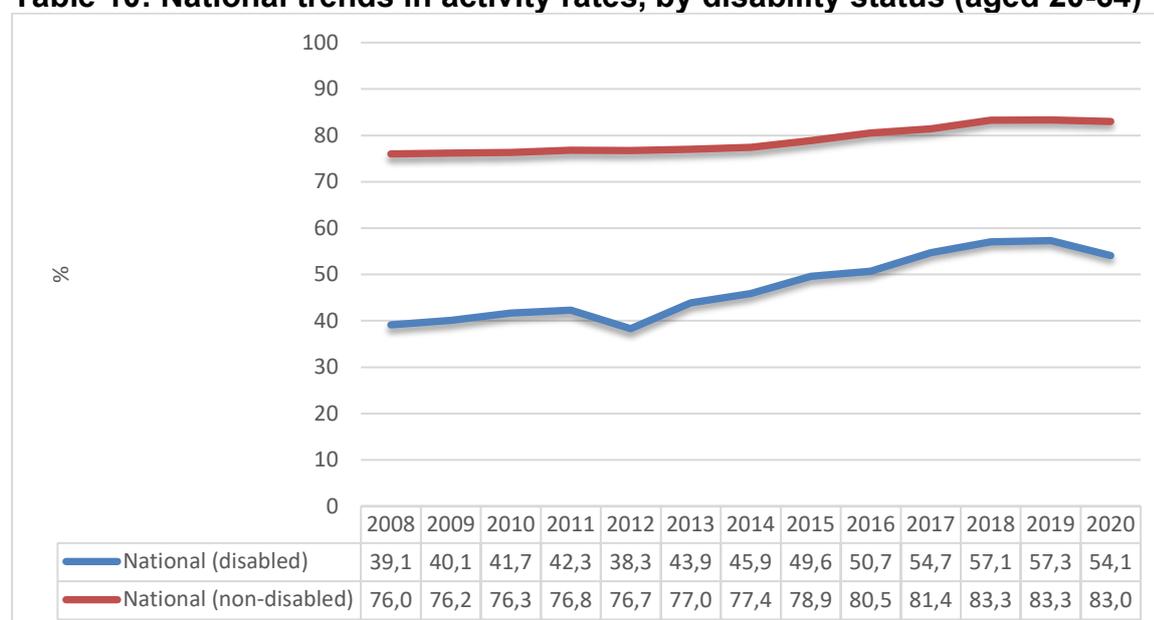
Table 8: Activity rates in Hungary, by disability and gender (aged 20-64) (2020)


Table 9: Activity rates in Hungary, by age group (2020)**Table 10: National trends in activity rates, by disability status (aged 20-64)**

Source: EU-SILC 2020 Release April 2022 (and preceding UDBs)

7.1.3 Alternative sources of labour market data in Hungary

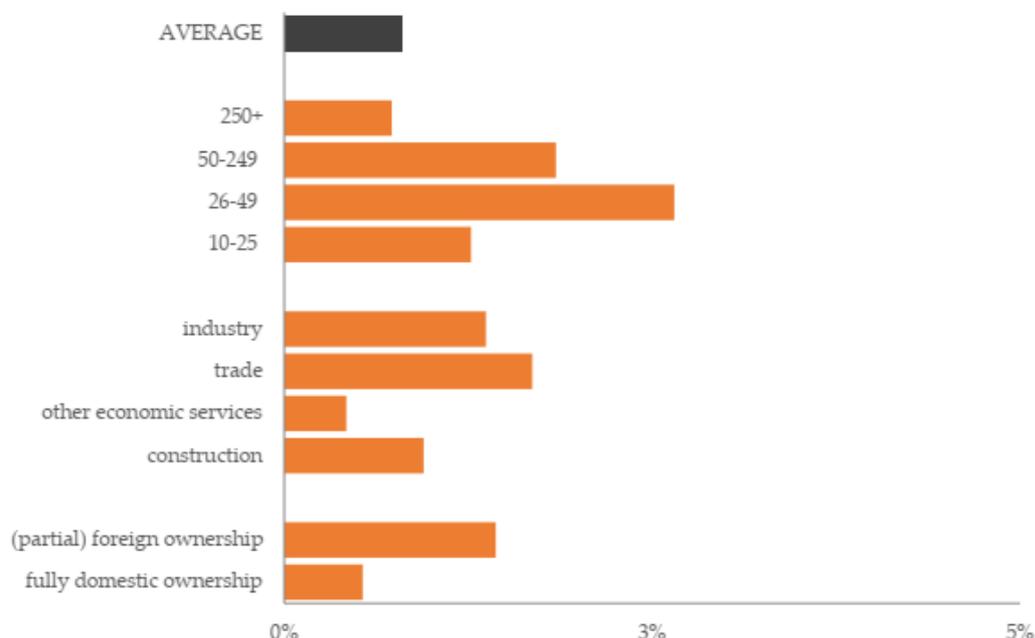
Disability data is not yet available from the core European Labour Force Survey but labour market indicators for Hungary were disaggregated from ad hoc modules conducted in 2001 and 2011. These can be found in the Eurostat disability database.¹⁰⁷

The Hungarian Labour Force Survey is carried out by the Central Statistical Office according to the well-known standards of the ILO and the EU (Eurostat). People with disabilities are still not part of the regular survey (as discussed in the ANED country fiche of 2018-2019). However, the topics of the Labour Force Survey are

¹⁰⁷ Eurostat Health Database: <https://ec.europa.eu/eurostat/web/health/data/database>.

supplemented in every second quarter with two questions regarding a health condition that constrains work,¹⁰⁸ based on which the respondent is counted as having limited work ability. The last available data obtained in this way comes from the second quarter survey of 2020 and is summarised in the following table:

Figure A: Employment of workers with disabilities relative to total employment



Source: IEER 2021

Table A: Labour market characteristics of employed persons aged 19–64 with and without disability

Characteristics	Quarter 2, 2020		
	With disability	Without disability	Population
Number of employed	126,106	4,184,172	4,310,278
Status in employment			
Employee	112,567	3,701,985	3,814,552
Not employee	13,539	482,187	495,726
Duration of labour contract (employees)			
Contract of indefinite duration	97,596	3,507,281	3,604,877
Fixed-term contract	14,971	194,704	209,675
Reason of fixed-term contract (employees)			
Could not find other job/business	4,025	35,243	39,268
Does public employment	5,861	70,503	76,364
Other reason	3,046	71,805	74,851
No specific reason	2,039	17,153	19,192
Part- or full-time employment			
Part-time	50,436	187,968	238,404
Full-time	75,670	3,996,204	4,071,874
Reason of part-time employment			
Due to own illness	42,487	5,296	47,783
Due to other reason	7,949	182,672	190,621
Work at home			

¹⁰⁸ 1) A health problem, illness, or limitation lasting for at least six months, 2) hindrance in employment or work due to personal health condition. The two conditions must exist together in order for the respondent to be included in the statistics as having a limited (altered) ability to work.

European Semester 2022-2023 country fiche on disability equality – Hungary

Mostly works at home	7,062	222,139	229,201
Occasionally works at home	4,700	476,158	480,858
Never works at home	114,344	3,485,875	3,600,219
Telework			
Regularly or occasionally do telework	8,835	671,312	680,147
Doesn't do telework	117,271	3,512,860	3,630,131
Number of persons working at the local unit			
1–10 persons	27,094	990,436	1,017,530
11–19 persons	13,779	492,750	506,529
20–49 persons	25,755	669,471	695,226
50–299 persons	27,324	880,562	907,886
300 persons or more	15,344	671,700	687,043
does not know but it is more than 10 persons	14,568	390,107	404,675
does not know but it is less than 11 persons	2,243	89,147	91,389
Ownership of the enterprise or business			
State, municipal	40,920	1,157,470	1,198,390
Private, mixed	76,455	2,847,863	2,924,317
Other	5,505	100,244	105,749
Cannot say	3,226	78,596	81,822
Ownership of the enterprise or business (of private or mixed)			
Entirely in foreign ownership	9,029	497,871	506,900
Majority foreign ownership	4,211	292,250	296,461
National ownership	62,514	2,008,758	2,071,272
Cannot say	700	48,985	49,685
Economic activity of employer by industries			
A – Agriculture	8,793	194,430	203,223
B–F – Industry	42,762	1,339,950	1,382,712
Of which:			
C – Manufacturing	33,919	901,917	935,836
G – U Services	74,551	2,649,792	2,724,343
Of which:			
G – Wholesale and retail trade; repair of motor vehicles and motorcycles	13,449	522,769	536,218
H – Transportation and storage	7,563	275,116	282,680
I – Accommodation and food service activities	3,045	147,974	151,019
N – Administrative and support service activities	6,290	122,707	128,997
O – Public administration and defence; compulsory social security	10,401	377,416	387,817
P – Education	6,247	320,632	326,879
Q – Human health and social work activities	15,345	294,963	310,308
S–U – Other Services	3,935	86,546	90,481
Major occupational groups – HSCO'08			
HSCO 1	2,093	153,414	155,507
HSCO 2	8,858	830,739	839,597
HSCO 3	12,161	674,895	687,057
HSCO 4	8,403	286,426	294,829
HSCO 1–4 Non-manual workers	31,515	1,945,59475	1,976,990
HSCO 5	15,789	580,793	596,582
HSCO 6	5,726	110,816	116,542
HSCO 7	16,989	626,422	643,411
HSCO 8	23,278	575,028	598,307
HSCO 9	32,809	329,157	361,966
HSCO 5–9 Manuel workers	94,591	2,222,217	2,316,808
HSCO 0 – Armed forces

Source: Hungarian Central Statistical Office

https://www.ksh.hu/docs/hun/xstadat/xstadat_evkozi/e_megvamk9_16_02b.html (in Hungarian)

It should be noted that, unfortunately, the above data seem very unrealistic, even unusable, likely because of the time and the method of data collection – the questionnaire was a phone poll carried out during the pandemic lockdown – and, as we were told informally, the size of sample became rather small. The comparison of the main data with the results of 2019 (see the country fiche 2020-2021) shows a picture rather alien to reality: in addition to a 2.5 % drop in overall employment and a 3 % fall in the employment of non-disabled people, at the same time it appears that the employment of the group with disabilities increased by 7 % – in the time of the

widened disability employment gap. For the reasons detailed, we have refrained from using this data in the country fiche.

7.2 EU data relevant to disability, social policies and healthcare (2020)

Table 11: People at risk of poverty or social exclusion, by disability and risk (aged 16-64)¹⁰⁹

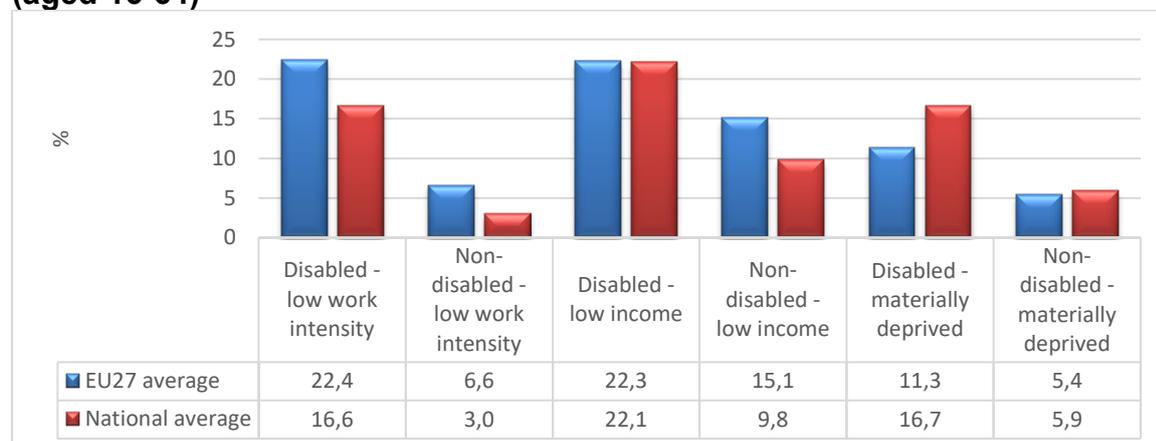


Table 12: People at risk of poverty or social exclusion, by disability and gender (aged 16+)

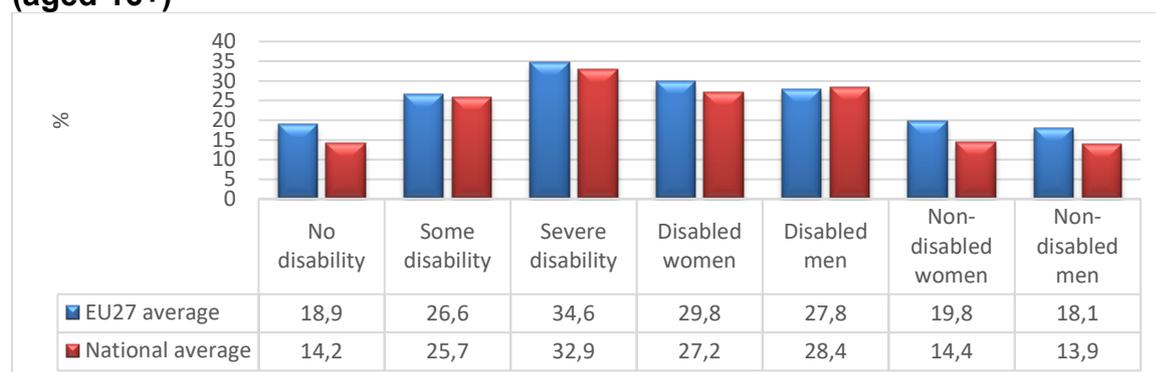
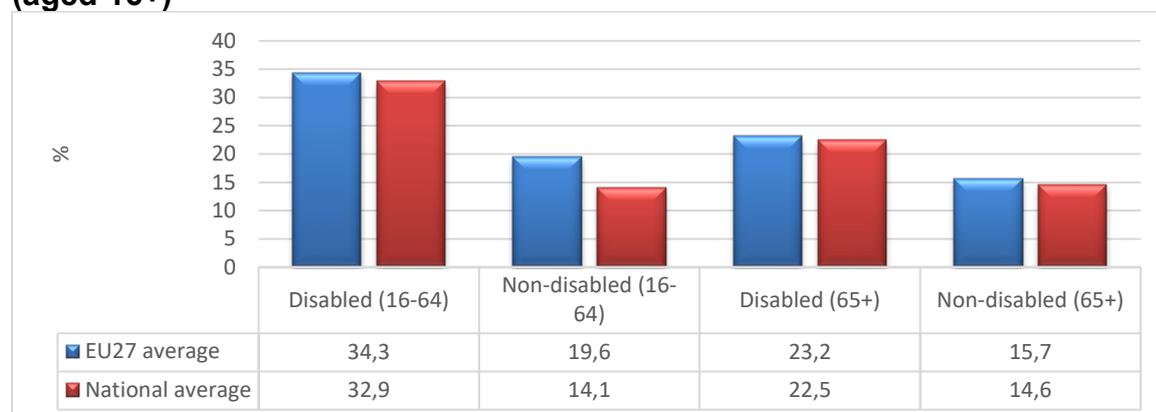
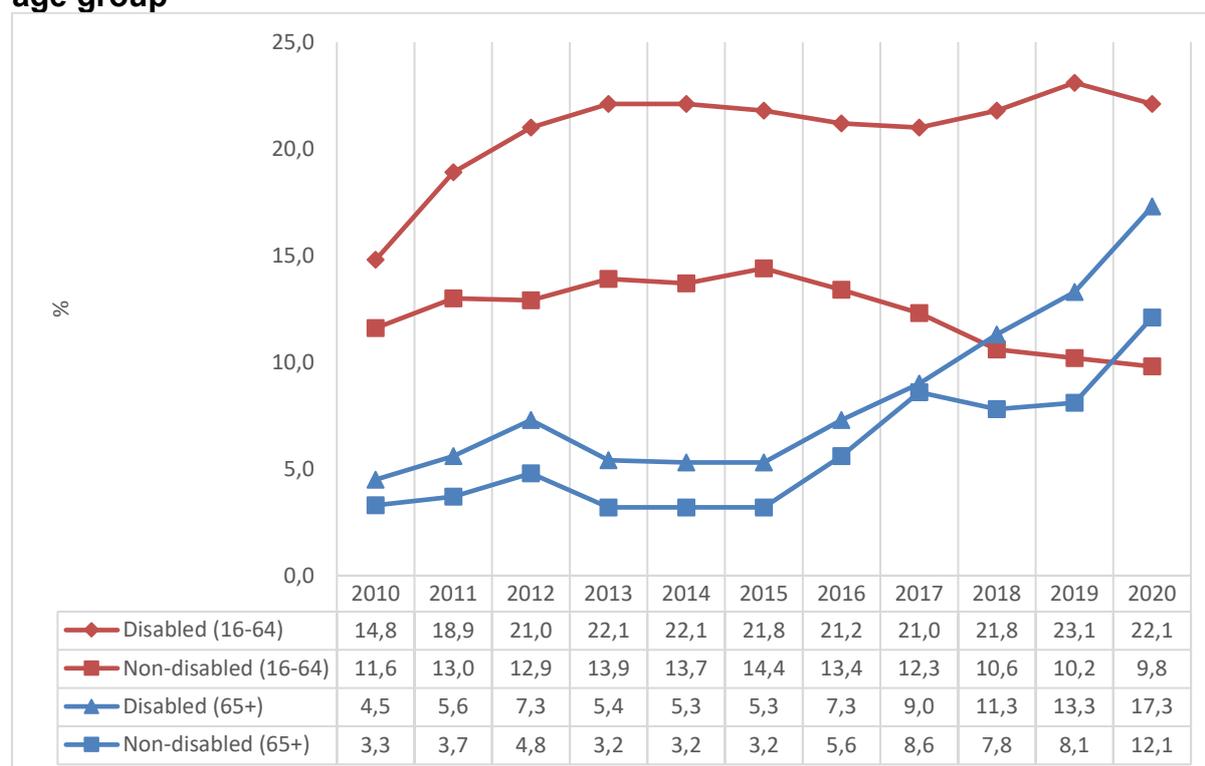


Table 13: Overall risk of household poverty or exclusion by disability and age (aged 16+)



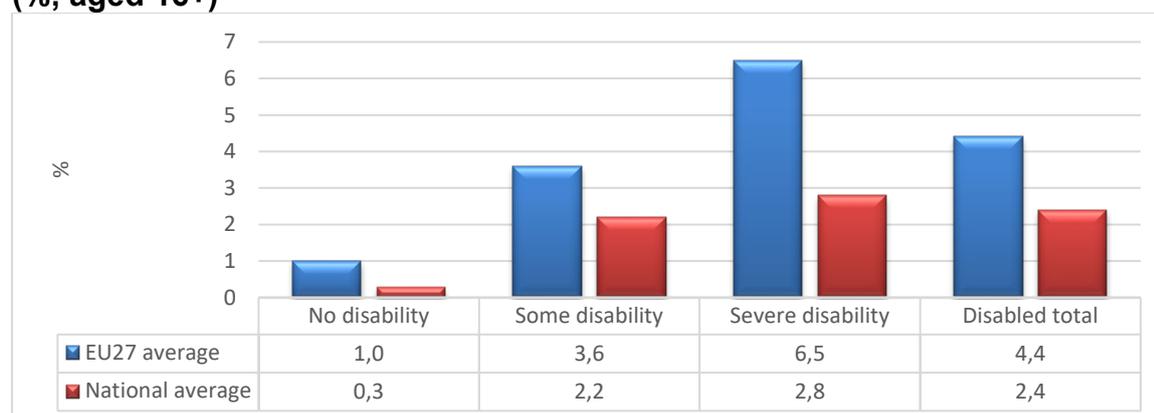
Source: EU-SILC 2020 Release April 2022 (and previous UDB)

¹⁰⁹ Aged 16-59 for Low work intensity.

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


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

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

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


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

Note: EU mean averages are also skewed by high values in a minority of countries within disability groups but median averages for the total disability and no disability groups in 2020 are consistent with the 3-year mean values.

7.2.1 Alternative sources of poverty or healthcare data in Hungary

The EU-SILC data provides a comprehensive and reliable source concerning poverty or social exclusion rates. In addition to the summary tables presented so far, the Eurostat disability database also contains breakdowns concerning disability and poverty before and after social transfers, as well as in-work poverty.¹¹⁰

National surveys or studies do not offer additional information.

7.3 EU data relevant to disability and education

Table 24: Early school leaving rates, by disability status (aged 18-24 and 18-29)¹¹¹

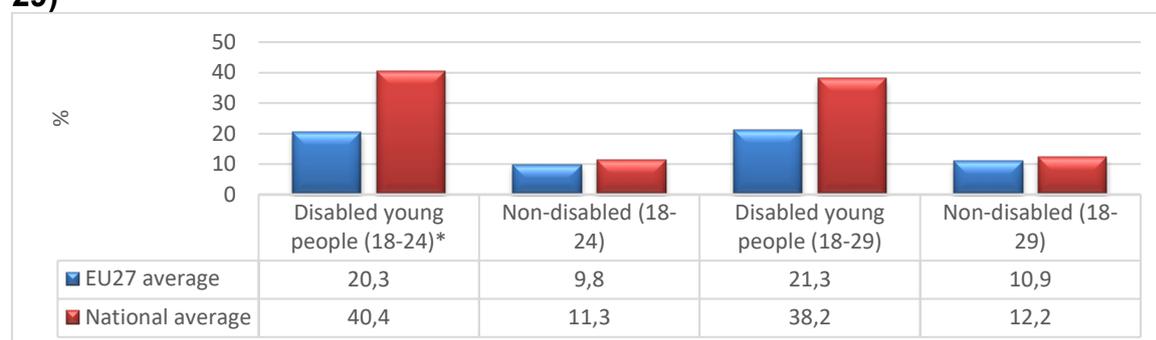
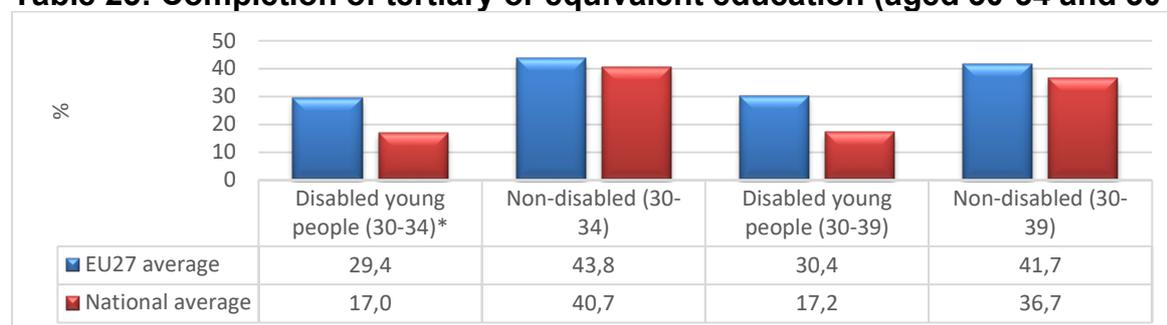


Table 25: Completion of tertiary or equivalent education (aged 30-34 and 30-39)



Source: EU-SILC 2020 Release April 2022 (and preceding UDBs)

Note: Confidence intervals for the disability group are large and reliability low (due to the small sample size in the target age group). An average of several years may be needed to establish trends or to compare breakdowns by gender. There were fewer than 50 observations in the youngest disability groups, which should be treated with some caution.

¹¹⁰ Eurostat Health Database: <https://ec.europa.eu/eurostat/web/health/data/database>.

¹¹¹ There was a change from ISCED 1997 to ISCED 2011 qualification definitions in 2014 although some Member States continued to use the older definition after this time.

7.3.1 Alternative sources of education data in Hungary

There are two studies from 2021 that put great effort into gathering/creating usable data on public education – including SEN students.

*The Indicator System of the Hungarian Public Education 2021*¹¹² creates indicators from publicly available data to describe the developments in the Hungarian education system. Indicators about SEN students are included, such as ‘proportions of SEN students receiving special and mainstream education’ and participation ratios.

The research *Scarcity of Human Resources in the Hungarian Public Education System* analyses international and national-level databases and also creates new evidence on the shortage of teaching staff by conducting surveys and interviews with prospective teachers, teachers, principals, and other education experts. The research includes topics on special education teachers (and conductors), pedagogues, and teaching assistants. The results and publications are available online.¹¹³

¹¹² The study is available here, with an English summary and table of contents: https://kti.krtk.hu/wp-content/uploads/2022/02/A_kozoktatasi_indikatorrendszer_2021.pdf.

¹¹³ T-TUDOK 2022, Research on human resource scarcity in Hungarian public education 2021: <https://www.t-tudok.hu/oktataskutatas/pedagogusok/kutatas-az-emberieroforas-szukossegekrol-a-magyar-kozoktatásban-2021/>.

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