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Belgium

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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 <https://www.consilium.europa.eu/en/policies/european-semester/how-european-semester-works/>.

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1 Executive summary and recommendations

1.1 Key points and main challenges for the European Semester in 2021

If we evaluate the situation of citizens with disabilities in Belgium the same main issues recur again and again. For example, it is striking that the fragmented policy leads to an inextricable tangle for the citizens. For example, it is striking that many well-intentioned measures (e.g., in the field of employment) create more barriers for specific target groups than they lead to more participation. For example, it is noticeable that the situation of persons with a disability is often (certainly in metropolitan areas) complicated by other dangers such as poverty and mental health problems. For example, it is noticeable that structurally installed changes (such as the personal budgets, the M-Decree or '*les classes inclusives*') threaten to miss their target. For example: it is noted that Belgium lacks a real transversal policy in which different policy areas such as mobility, education, employment, sports, culture, leisure ... are linked with each other. Finally: it remains worrying that some of the citizens with a disability are left out of the picture within the collected statistics: namely those who stay in a residential facility. Given the failure of governments to successfully implement a deinstitutionalization policy, this group remains at greatest risk of discrimination and low QOL.

1.2 Recommendations for Belgium

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

- **Recommendation:** It is important to achieve efficient coordination between the government levels and a transversal policy coordination.
Rationale: The ineffective coordination between the federal, regional and local policy /governmental levels is one disturbing factor. The insufficient - transversal - alignment of policy domains (as becomes especially more and more evident in the sectors Employment, Social Security & Poverty) makes the situation of citizens with disabilities even more complex.
- **Recommendation:** Better monitoring is needed. Belgium is urged to make special efforts to map the quality of life of citizens with disabilities living in residential facilities.
Rationale: Citizens with disabilities living in a residential facility are missing from most statistical overviews.
- **Recommendation:** It is urgent that the different communities in Belgium, responsible for education, take essential measures in relation to inclusive education. The frameworks for inclusive education introduced so far (M-Decree) or the tools set up to realise inclusion (*les classes inclusives*) appear to have only marginal effects.
Rationale: the continued educational segregation of large groups of students has a devastating effect on early leaving school without diploma's, leading to precarious jobs.
- **Recommendation:** Belgium is urged to introduce field tests as a tool to test discrimination on the labour market based on ableism.
Rationale: Taking into account the low percentage (5.5 %) of unemployment in Belgium, citizens with disabilities continue to experience major barriers to participate on the labour market.
- **Recommendation:** if Belgium is allowed to benefit from European investment funds in function of, among other things, the pursuit of sustainable transport, the requirement of accessible public transport should be included in the negotiations on those Funds.
Rationale: Belgian citizens with a disability report that the inaccessibility of public transport is one of the biggest bottlenecks to participate in society.

2 Opportunities to mainstream disability equality in the Semester documents

2.1 [Country Report](#) for Belgium (Staff Working Document)

In 2020, the Country Report for Belgium included the following direct references to disability issues:

- ‘p. 5 Compared to other countries, people with disabilities are more at risk of poverty or social exclusion.
- p. 5 The employment rate is particularly low for some groups such as low-skilled, older workers, people with a migrant background (in particular non-EU born women) and people with disabilities.
- p. 36 The employment rate of people with disabilities remains well below the EU average.
- p. 36 beneficiaries living in a single household receiving disability income support, unemployment (at the minimum level) and minimum income benefits face financial disincentives to increase their hours worked.
- p. 36 In contrast, there are no financial disincentives for the beneficiaries of disability social insurance benefits to take up part-time employment after the 2018 reform of the benefit system.
- p. 42 The tertiary attainment gap between people with disabilities and those without far exceeds the EU average.
- p. 44 People with disabilities face challenges with respect to poverty, educational attainment and employment outcomes. The transition to a more rights-based approach is slow. There is no coordinated de-institutionalisation strategy, although increased autonomy for people with disabilities is included in the reform agenda of every federated entity.
- p. 49 In particular, low-skilled people, older workers, people with a migrant background and people with disabilities are under-represented on the labour market.
- p. 75 Brussels plans to introduce several measures to support the integration of vulnerable jobseekers, including older unemployed (55+) and people with disabilities.’

It is particularly welcome that the 2020 Belgian NRP includes the opinion of the National Higher Council for Disabled Persons in annex, and this should be noted in the Commission’s analysis.

The disability policy of Belgium is characterised by a slow transition from a traditional welfare approach to a human rights-based approach.

The systems of disability allowances in Belgium continue to pose a marked risk of exclusion and poverty.

In Belgium, the lack of an unambiguous definition of disability remains a major stumbling block.

2.2 [Country Specific Recommendation](#) for Belgium (CSR)

In 2020, the Country Specific Recommendation for Belgium included the following direct references to disability issues:

- ‘19. Particular attention should be paid to ensuring a comprehensive approach for those furthest from the labour market that are likely to be the most affected by the negative socio-economic consequences of the crisis. Vulnerable groups include in particular the low-skilled, people with a migrant background and people with disabilities.’

Belgium should focus even more on ‘handi-streaming’ or on a more transversal approach to the participation of people with disabilities (e.g., concerning the labour market).

Using positive actions for the benefit of people with disabilities in terms of employment will provide many opportunities in the future.

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

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

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

'39. The Committee recommends that the State party take all necessary regulatory measures and incentives to guarantee the right of persons with disabilities to employment, in both the private sector and the public sector. It should ensure that they have effective protection against discrimination, vocational training, adequate accessibility and the necessary reasonable accommodation.'

In 2019, the Committee raised a further List of Issues, including requests for information concerning measures taken to:

(a) enhance programmes to increase the employment rate of persons with disabilities, particularly women with disabilities, in both the private and the public sectors;
(b) facilitate the transition of persons with disabilities from unemployment or from employment in sheltered workshops to employment in the open labour market;
(c) tackle barriers and discrimination against persons with disabilities in the recruitment process and the workplace, including instances involving a lack of reasonable accommodation;
(d) adhere to the Convention when implementing target 8.5 of the Sustainable Development Goals.

And in relation to Article 19, to:

(a) Steps taken to implement disability action plans at the federal, regional and community levels to ensure that persons with disabilities enjoy the right to independent living and to be included in the community, and to implement plans to eliminate waiting lists for access to personal assistance budgets and other services and support.
(b) Steps taken to implement an effective deinstitutionalisation strategy, with a clear time frame, for all persons living in institutions. Please include the number of persons with disabilities who have been deinstitutionalized so far, and provide details of their current situation.
(c) Measures taken to enable all persons with disabilities to enjoy their right to freely choose their residence on an equal basis with others, and to access a full range of in-home and other community services for day-to-day living, including personal assistance.
(d) The use of European Structural and Investment Funds and national funds for personal assistance and independent living. Please include precise data, in absolute and relative numbers, on the funds provided.

The opinion of the National Higher Council for Disabled Persons, annexed to the 2020 NRP, also highlights the need to 'Effectively increasing the employment rate of persons with disabilities and sick people'.²

3.1 Summary of the labour market situation of persons with disabilities

Data from EU-SILC indicate an employment rate for persons with disabilities in Belgium of 43.8 % in 2018, compared to 75.6 % for other persons and approximately -7.0 points below the EU27 average - resulting in an estimated disability employment gap of approximately 32 percentage points (EU27 average gap 24.2, see Tables 2-4). The same data indicate unemployment rates of 17.5 % and 5.7 %, respectively in 2018 (see Tables 5-7) and the economic activity rate for persons with disabilities in Belgium was 53.1 %, compared to 80.2 % for other persons (see Tables 8-10). These indications are broken down by gender and age in the respective tables in annex (Tables 2-10).

In all age groups (see Table 3) from the age of 25, we see a particularly large gap in employment rates between people with and without disability. While the gap between 25 and 44 years is approximately 30 points, we see a widening to around 40 points in the age group 45-54 years.

Over a period of 10 years (2008-2018), the national trends in employment rates (aged 20-64) show a stability in the difference between groups of people with and without disability. If the percentage of employed citizens without disability fluctuates between 71 and 75 % during this period, people with disability usually lag behind by around 30 points. This gap is not closing, despite a slightly increasing trend in employment rates for people with disabilities in recent years.

Concerning unemployment rates (Table 5), it is striking that Belgian men with a disability rate slightly higher than the EU27 averages (20.5 % Belgium, 18.9 % EU27) while all other groups, including disabled women, rate lower than the average.

Across all age groups (Table 6) there is a noticeably higher proportion of unemployed disabled people compared to non-disabled people (the largest differences can be found in the age group 25-34 years (19.5 % compared to 5 %) and the age group 55 to 64 years (21 % compared to 7.4 %). Over a period of 10 years (Table 7), we see that despite the reduction of the % of persons with disabilities who are unemployed (from 26.7 % in 2008 to 17.5 % in 2018), there is still a persistent gap compared with persons without disabilities. Despite the rate reduction, this gap remains in recent years around 11 to 12 %.

Similar patterns are noticeable when analysing the economic activity rates. Table 8 shows that in Belgium disabled men and women rate considerably less well in economic activity rates (women: 47.2 % men: 60.0 %) compared to the EU27 averages (women 58.5 % men: 66.9 %). Disabled people aged 25-64 rate significantly less well on economic activity rates than their non-disabled peers but the difference in the age group 45-54 is striking (55.7 % compared to 92.7 %, Table 9). Coupled with

² https://ec.europa.eu/info/sites/info/files/2020-european-semester-national-reform-programme-belgium_en_0.pdf, p. 304.

the data on unemployment, this suggests that the participation of older (male) workers with disability remains very weak in Belgium. Over a 10-year period (2008-2018) shows that the overall gap in economic activity rates between disabled and non-disabled citizens, in recent years, has been just below 30 percentage points (Table 10).

Alternative estimates are available from Statbel data³ concerning the most recent local statistics based on the Labour Force Survey (EAK) data. This also indicates that, for the Flemish speaking part of the country, a very low employment rate for people reporting difficulties due to a disability or long-term health problem. In 2019, the employment rate for people for this group was 45.6 %, compared to 37.5 % in 2009. For those without disability, the employment rate rose from 76.0 % in 2009 to 81.2 % in 2019. The disability employment gap narrowed slightly on this measure (from around 40 points during the crisis to around 36 points in the most recent year).

In 2017 UNIA⁴ (the Interfederal Centre for Equal Opportunities) opened a total of 2,017 cases of situations where people felt they were the subject of discrimination. This represents a 6 % increase over 2016 (1,907 cases). Instances of employment discrimination were the most frequently opened cases (572 cases, an increase of 13.5 %) Most of these cases of employment discrimination concerned 'racial' criteria (27 %), followed by disability (20.7 %) and age (15.7 %). This trend suggests that the labour market continues to reflect inequalities in society as a whole (and that more workers are making claims of discrimination).

3.2 Analysis of labour market policies relevant to the Semester

For reference, see also the 2020 [National Reform Programme](#) for Belgium.

Introduction.

It is clear that people with a disability do not appear to benefit sufficiently from the economic growth in Belgium to achieve a better position on the labour market. We are aware of the fact that the labour market position of persons with disabilities takes place in a broader labour market arena, which is outlined as follows in the most recent OECD assessment report:⁵

- Over the past five years, economic growth averaged around 1.7 % and it was accompanied by strong employment growth (unemployment rate of 5.5 %).
- Despite recent strengthening of the labour market participation is especially low for low-skilled, migrant and older workers. The long-term unemployed and inactive population face a number of barriers, which require tailored measures.
- Existing labour activation policies are less effective for (e.g.) the long-term unemployed and job seekers with a non-EU background.
- The current design of the unemployment benefit system provides good income support but may discourage job search.

³ <https://www.statistiekvlaanderen.be/nl/werkzaamheidsgraad>.

⁴ <https://www.unia.be/en/articles/more-employment-discrimination-cases-reported-to-unia-in-2017>.

⁵ OECD, Economic Surveys, Belgium, 2020.

Since disabled people are over-represented among the unemployed, and as users of the public employment services and support systems, they are disproportionately affected by these inadequacies.

The Belgian labour market and its support measures: some specific characteristics.

The Belgian labour market and its support measures are characterized by a number of characteristics that do not always appear to be equally effective. On the one hand, we will discuss below the typical fragmentation of support measures that lead to people not being sufficiently aware of and able to take up their rights. On the other hand, the target group policy that, for example, characterizes the Flemish approach, does not always appear to have the effect for which it is intended.

Fragmentation as a barrier

Fragmentation, and segmentation, of labour market policies remain major obstacles to progress in the Belgian context. The federal government, the regions and the communities each play their role at different levels. For example, a person with a disability may receive an allowance from the federal government, but not know that he or she is also eligible for subsidies from the region or the communities.

Disability policy falls within the competence of the regions and communities - Flemish Community, the Walloon Region, the French Community Commission of the Brussels-Capital Region and the German-speaking Community. This means that the employment of people with a disability, vocational training, reception and accommodation, the granting of interventions with regard to technical aids, and so on, are the competence of these four entities.

The four institutions that are mainly competent for such disability policy are therefore the Flemish Agency for Persons with a Disability (VDAB), the Agence wallonne pour l'intégration des personnes handicapées (AWIPH), the Service bruxellois francophone des personnes handicapées (Phare), and the Dienststelle für Personen mit Behinderung of the German-speaking Community (DPB).

A target group policy with limited effectiveness.

The VDAB⁶ e.g. (Flemish public service for Employment and Formation) focuses on specific target groups.

The Flemish regional target group policy started on 1 July 2016. It includes:

- target group reductions for people over 55;
- target group reductions for low and medium-skilled young people;
- the Flemish Support Bonus for people with a 'work disability'.

One of these groups are young adults under the age of 25 who are not in education or employment. The focus of the VDAB is on personal support, and on internships and training in function of strengthening competencies of the youngsters. Young people

⁶ <https://www.vdab.be/jaarverslag/#bemiddelen-text>.

with a 'work disability' receive more personal support than other young people, and yet this group appears to have more difficulties to find a stable job: 57 % of the total group of young people find work after 4 months compared to 44 % of young people with a work disability.

Another target group in the Flanders strategy concerns 'people with health problems', which is likely to include many people identified as disabled in the survey data outlined earlier. The NRP notes agreement on an 'annual follow-up and monitoring report which maps the employment rate, the number of people in work, unemployment and the quality of employment', including for 'people with a work-limiting disability' (this is reflected for 2019 in the Statbel data summary presented earlier, which is also tacked in the NRP).

The NRP also notes pilot project employment training activities by partners in the Bruxelles Formation, including for (French-speaking) disabled jobseekers.⁷ This includes, for example, training in sign language or Braille skills as well as support for people with intellectual or learning difficulties. This project is partly supported by the European Social Fund.

The labour market and its support measures: some examples of new policy.

Examples of new policy are gradually becoming visible. The responsibility to close the gap with the labour market is no longer placed solely on the shoulders of individuals with a disability. Much more campaigns are being set up that also target potential employers. We successively discuss the VOP, the integration protocol and the positive actions as three examples of employer-oriented approaches.

The VOP: the Flemish Support Premium.

The Government of Flanders wants to further strengthen its policy from 1 January 2019⁸ by specifically increasing its implementation of the VOP. For people with disabilities more specific measures concerning the VOP are taken. The VOP is a wage premium for employers who recruit or employ people with a disability and for self-employed persons. In order to broaden the reach of the VOP, this measure will be expanded / improved in a number of areas. The most important novelties are:

- extension via a VOP with a temporary character;
- making the VOP more attractive for self-employed people in their main or secondary occupation.

According to the 2020 NRP, 'a specific bonus scheme will be implemented to support employers in recruiting people with disabilities' in order to target this group within measures concerning jobseekers 'furthest from the labour market' (p. 55). This might respond, in part, to the Opinion of the National High Council for Persons with disabilities 'there is an urgent need for the government to establish, in a concrete way, a social responsibility of private sector employers' (NRP, p. 304). The scope, take-up

⁷ <https://www.bruxellesformation.brussels/trouver-une-formation/formation-et-handicap/>.

⁸ https://www.vdab.be/sites/web/files/in-de-kijker/VDAB_Jaarverslag_2019.pdf.

and effectiveness of this proposed scheme would need to be monitored in the next Semester cycle.

The integration protocol as another example of 'new policy'

The Federal Royal Decree of March 2007 concerning the recruitment of persons with disabilities states that a quota of 3 % of all federal employees should be persons with disabilities in all federal departments. A recent evaluation⁹ of this policy plan for the Flemish speaking part of Belgium shows that at the end of 2018, 678 registered persons (1.8 %) with a disability or chronic illness were employed within the Flemish administration (compared to 585 at the end of 2017). The proportion of employees with a disability or chronic illness grows to 2.2 % after several years stagnating at around 1.4 %. It is positive that this increase in share coincides with a rise in the number of disabled employees. The increase in the number and share of registered persons with a disability or chronic illness can be explained by inflow, increased disclosure of self-registration, increased commitment to integration protocols (agreements between employees with a disability or chronic illness and their supervisors to organise work arrangements with reasonable accommodations making sure employees can (continue) to work in the best conditions) and the implementation of the leave system for part-time disability benefits. Although, the target of 3 % by 2020 remains far away, the importance and the effectiveness of this 'integration protocol' should not be underestimated.

In the evaluation report (2018)¹⁰ of the '*Commission d'accompagnement pour le recrutement des personnes avec un handicap dans la fonction publique Fédérale*' we learn that in the Federal institutions 1.25 % of the civil servants have a disability (corrected to 1.31 % taking into account the police services). This is a downward trend since 2012 when the highest percentage ever (1.54 %) was established. Of the 45 different federal administrations, only 5 (e.g., Directorate of Buildings, e.g. Institute for equal opportunities for women and men) hired three or more percent of employees with a disability. It is striking that 44 % of the civil servants with a disability are older than 55 years and that 56 % of those civil servants are men (this while more women are employed in the civil service overall).

Positive actions as third example of new policy.

The Royal Decree defining the conditions for positive actions was published in the Belgian Official Journal of 1 March 2019.¹¹ It applies to the private sector and creates a framework for positive action in the workplace.

Positive action is an exception to the prohibition of discrimination. In positive action measures, equal treatment is given way to a higher social goal, mainly the elimination of social disadvantages. Positive actions then refer to measures aimed at a

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<https://overheid.vlaanderen.be/sites/default/files/media/diversiteitsscans/VR%202020%200702%20DOC%20GKDplan2020%20%20actieplan.pdf?timestamp=1582875893>.

10 <https://fedweb.belgium.be/sites/default/files/annual%20report%20BCAPH%20CARPH%202018%20fr%20final.pdf>.

11 http://www.ejustice.just.fgov.be/cgi_loi/change_lg.pl?language=nl&la=N&cn=2019021109&table_name=wet.

'disadvantaged' group, the members of which carry a well-defined protected criterion, and which aim to reduce the disadvantages suffered by the group and related to the protected criterion. reduce, eliminate or compensate, so that this group can participate fully in the labour process. Positive action measures are thus aimed at obtaining a more balanced distribution among the members of the different population groups.

A positive action measure can only be taken if the following conditions are met:

- there must be manifest inequality;
- the disappearance of this inequality must be identified as an objective to be promoted;
- the affirmative action measure must be of a temporary nature and such that it disappears once the intended objective has been achieved;
- the measure of affirmative action must not unduly restrict other people's rights.

Positive actions can take different forms. Here are some type examples for clarification:

- recruitment campaigns for specific target groups;
- support programs for applicants to go through an application process. this could mean, for example, that a company offers the possibility to provide candidates from a certain target group with information or prior training explaining how to successfully apply for a job at the company;
- stimulate training with a view to career development opportunities with a view to breaking through a glass ceiling.

The Federal Public Service Employment, Labour and Social Dialogue will draw up an evaluation report every two years, in collaboration with the National Labour Council. This evaluation will be performed at meta level.

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

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

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

‘39. The Committee recommends that the State party take all necessary regulatory measures and incentives to guarantee the right of persons with disabilities to employment, in both the private sector and the public sector. It should ensure that they have effective protection against discrimination, vocational training, adequate accessibility and the necessary reasonable accommodation.’

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

‘33. The Committee recommends that the State party work towards deinstitutionalisation by reducing investment in collective infrastructure and promoting personal choice. The Committee urges the State party to implement a disability action plan at all levels of the State to guarantee access to services and an independent life for persons with disabilities so that they are able to live in the community. The action plan must eliminate current waiting lists and ensure that persons with disabilities have access to sufficient financial resources and that communities are accessible for persons with disabilities. The Committee recommends that the State party devise international cooperation programmes that respect the right of persons with disabilities to live in the community and involve disabled persons’ representatives and their families in their preparation.’

In 2019, the Committee raised a further List of Issues, including requests for information concerning measures taken to:

- (a) Mainstream disability in poverty and homelessness reduction strategies. Please focus in particular on the situation of women, children and older persons with disabilities;
- (b) Ensure that social protection and support services are provided to persons with disabilities, taking into account additional costs related to disability;
- (c) Eliminate the current backlog of applications for social protection measures to the Directorate-General for Persons with Disabilities of the Federal Public Service for Social Security.

The opinion of the National Higher Council for Disabled Persons annexed to the 2020 NRP also contains relevant priorities, such as reform of the disability benefits, access to transport, access to care, and the use of EU structural funds. It also ‘calls for an inter-federal strategy to combat poverty and social exclusion’.¹²

¹² https://ec.europa.eu/info/sites/info/files/2020-european-semester-national-reform-programme-belgium_en_0.pdf.

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 Belgium was 25.1 % in 2018, compared to 13 % 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 7.4 points (20.7 % for older persons with disabilities and 13.3 % for other persons of similar age). The tables in annex also indicate the respective rates of AROPE and break these down by gender as well age. This statistical data with regard to disability, social policies and healthcare can be found in Tables 11 to 15.

For Belgian citizens older than 16 years, we see a higher risk of poverty and social exclusion compared to the EU27 averages for both people with 'some disability' (27.4 %) and people with 'severe disability' (39.0 %). It is noticeable that disabled women run a higher risk than men (see Table 12).

In the age group 16-64 we also see a rising trend from 17.7 % in 2010 to 25.1 % in 2018 for the risk of poverty after social transfers (Table 14) The disabled group rates about twice as high as the non-disabled group. For the elderly (age 65+), we see in a projection over time an increase in the risk of poverty after social transfers (20.7 % in 2018) after showing a downward trend for three years (2015-2017). Here too, people with a disability score 7 % higher than non-disabled citizens.

The impact of this risk of poverty is readily apparent, for example in the overview of the self-reported unmet needs for medical examination. People with disability in Belgium report more unmet need than the EU27 averages (Table 15), despite a very well-developed healthcare system in the country.

Much poverty research in Belgium has only recently discovered 'disability' as a phenomenon and important factor. The presence of a family member with a disability in a family appears to play a major role in families ending up in poverty. Table 13 indicates families with a disabled family member in Belgium run a higher risk of poverty or social exclusion than the EU27 averages. Moreover, Belgian 'HANDILAB research'¹³ has shown that the objective poverty risk rises higher than the EU-SILC data suggests when we take the cost of disability in account for a family.

4.2 Analysis of social policies relevant to the Semester

For reference, see also the 2020 [National Reform Programme](#) for Belgium.

Adequacy and take up of benefits

In its Opinion annexed to the 2020 NRP, the National Higher Council for Disabled Persons (NHCPD/ CSNPH) calls for a reform of the regulatory framework of disability benefits in Belgium, considering the existing framework to be inadequate and below the poverty line. This appears to be confirmed by the data presented earlier concerning the high risk of poverty for disabled people after social transfers published by Eurostat. They draw attention also to inefficiencies in the system, including long waiting times.

¹³ Hermans, K., Dubois, J.M., Vanroose, A. (2019). Armoede en Handicap in België, FOD Sociale Zekerheid en POD Maatschappelijke Integratie: Brussel.

In a 2019 Memorandum,¹⁴ aimed at Belgium's political parties, NHCPD highlight the need for:

- income replacement allowances that reach at least the level of the poverty line and ideally the level of the guaranteed minimum wage;
- stop taking into account the Integration Allowance (AI) or the Assistance to the Elderly (APA) in the framework of the granting of the Social Integration Income (RIS) and other social assistance;
- recasting the legislation on allowances;
- strengthen the employment of people with disabilities.

In an in-depth study, researchers from the Health and Welfare Observatory of Brussels-Capital¹⁵ have analysed the different causes of the non-take-up of benefits by people with disabilities living in risk for poverty in the Brussels Region. The degree of disability considerably increases the risk of non-take-up, but material circumstances (e.g., housing situation, income) and relational circumstances (network) also strongly influence whether or not entitlements are exercised. A major aggravating factor appears to lie in groups of people where different vulnerabilities are identified that occur together: disability, lack of financial resources, limited knowledge of national languages, limited internet access etc. It is also clear that administrative follow-up is of great importance given the complexity and mismatch between different systems. The creation of specific systems for specific groups leads to more exclusion of people and a higher non-take up.

Child and family risk

Research by Vinck and Van Lancker (2019)¹⁶ shows that children with disabilities are significantly over-represented in families with a vulnerable social background. They more often live with single parents, parents with a low and average educational level, and with other family members who also have a disability. Parents of children with disabilities work less than parents of children without disabilities. Having a child with a disability lowers the employment opportunities of the parents regardless of the social background of the parents.

It also appears that families with children with disabilities make less use of formal and informal childcare. These childcare opportunities therefore only play an additional role in solving the increased 'burden of care' they are confronted with. The problematic situation of the parents in these families on the labour market thus does not seem to be resolved with the standard activation policy. Facilities that increase the possibilities of combining work and care are crucial.

A new system of family allowances was introduced in Brussels in January 2020, which the NRP claims 'pays particular attention to vulnerable families'.

Since the start of the new law in the Brussels Region parents can receive a supplement to their basic child benefit until the month in which a child with a disability turns 21.

¹⁴ http://ph.belgium.be/media/static/files/import/themes/memorandum_csnph_2019.pdf.

¹⁵ Noël, L. (2019), pp. 195-230, in Hermans et. al.

¹⁶ Vinck, J. & Van Lancker, W. (2019), pp. 231-247 in Hermans et. al.

This allowance is in addition to the basic child benefit supplemented with any allowances.

A doctor from the FPS Social Security determines whether a child is entitled to a supplement. These three pillars are taken into account:

- the physical and mental consequences of the condition;
- the consequences for participation in daily life (mobility, learning ability, body care, ...);
- the consequences for the family (medical treatment, travel, adaptation of the living environment, ...).

Points are awarded to each of these pillars. A child will receive a supplement if:

- it obtains at least four points in the first pillar;
- or get at least six points in the three pillars together.

The FPS evaluates a child's disability.

Children are invited to a medical examination where a doctor determines the disability on the basis of established criteria.

The doctor informs the family and the child benefit fund of his decision. The supplement is paid monthly with the ordinary child benefit from the month following the date stated on the decision by the FPS Social Security.

Mental health

We observe an alarming increase of citizens with mental health problems in the social security statistics.¹⁷ The number of suicides is equal to 17, 24 and 14 suicides per 100,000 inhabitants in Flanders, Wallonia and Brussels respectively. There is a clear link between mental health problems and socio-economic status: 72 % of the people who make use of public social-financial care systems experience a state of psychological unwellness, 58 % of them have mild depression, 36 % have already attempted suicide, and 20 % make use of mental health care facilities. These are much higher figures than for people who do not rely on social support. Overall, 27 % of absenteeism over 15 days has a mental health related cause and psychological unwellness is indicated in 25 % of all disability benefits claims.

In Belgium, 46 % of people with a serious mental health condition see a doctor but receive no medication or therapy, 25 % receive only medication and 3.8 % only therapy. The preference for medication over therapy is also partly cost-driven. The approach to medication and therapy, which should be the norm, does not match reality. The long waiting times, which can range from a month to a year, are also confirmed by the government.

¹⁷ https://www.itinerainstitute.org/wp-content/uploads/2016/10/pdfs/20120701_geestelijke_gezondheidszorg_pvh.pdf.

Institutional long-term care and housing

For the Mental Health Care sector,¹⁸ real plans to deinstitutionalize are starting in 2010 when a new mental health care reform phase was launched in the form of experimental projects. For the completion of certain new initiatives became 'Section 107', an article of the Hospitals Act used. This Article 107 gave its name to the 'Reform 107' and also 'the projects 107'. The aim of the 'Reform 107' is the integration of mental health care in the community. This goal should be achieved with the 'projects 107'. Out of the reform flowed also the 'Article 107 networks', formal collaborations between care providers to provide care to a specific target group. These are financed temporarily, mainly from the financing of the psychiatric hospitals, through voluntary 'freezing' of beds.

The basic philosophy of this reform is built around the following five attainment targets:¹⁹

1. Deinstitutionalization: intensive and specialised outpatient forms of care as an alternative to hospitalisation.
2. Inclusion: rehabilitation and rehabilitation assignments involving collaboration with education, culture, labour, social housing, ... is necessary.
3. Decategorization: collaboration through care circuits and networks realisation between and with elderly care, mental health care, the sector persons with disabilities and justice.
4. Intensification: intensification of care within hospitals.
5. Consolidation: regularization of the various pilot projects, both federal and of the communities and regions, in the global mental health care concept.

Despite all the initiatives already taken 80 % of the financial resources for mental health care to residential care and Belgium still has 1.37 psychiatric hospital beds per 1,000 inhabitants, the second highest share within the OECD.²⁰

Concerning persons with disabilities in Flanders²¹ the concept of personal budget was developed. At the end of 2019, 25,299 adult persons with a disability had a personal budget available. A personal budget is intended for adults who need intensive or frequent support due to their disability. This concerns a tailor-made budget with which care and support can be purchased within the own network, from voluntary organizations, from individual counsellors, professional care providers or from care providers licensed by the Flemish Agency²² for Persons with a Disability (VAPH). The personal budget was introduced in 2016. First evaluations of this project do not show significant signs of de-institutionalization. The 'old institutions' seized the opportunity to transform themselves into social enterprises that try to provide further care based on personal budgets.

¹⁸

https://kce.fgov.be/sites/default/files/atoms/files/KCE_318A_Mentale_gezondheidszorg_Synthese.pdf.

¹⁹ Inter-ministerial Conference, 2010.

²⁰ OECD, 2019.

²¹ <https://www.statistiekvlaanderen.be/personen-met-handicap-met-persoonsvolgend-budget>.

²² https://www.vaph.be/sites/default/files/documents/4570/nota_realisaties_afgelopen_legislaturen.pdf.

In principle, the 2020 NRP commits to the concept of autonomy (e.g. in the Policy Statement of Brussels-Capital Region and the Government Agreement of the French Community Commission) but much needs to be done on this issue. Belgium has a high rate of institutionalization in long-term care, which has been recently exposed in the excessive risk of infection and death in care facilities during the COVID-19 crisis.

There is a lack of reliable data on this. The last estimates submitted to the OECD (in 2014) indicated that 182,840 long-term care recipients received care in institutions other than hospitals (the vast majority aged over 65 but with no data concerning children).²³ The same data reports a slight increase in the number of residential long-term care beds.

The 2020 NRP commits to additional investment in 'residential care', 'rest and care homes' and other 'accommodation for people with disabilities'. It is vital that these investments are monitored for compliance with the UN CRPD and principles of support for independent living. These arguments are summarised also in the 2018 NHCPD Position Paper on Deinstitutionalisation of people with disabilities, which sets out the necessary criteria for transition.²⁴

²³ https://stats.oecd.org/Index.aspx?DataSetCode=HEALTH_LTCR.

²⁴ <http://ph.belgium.be/fr/m-ecoute-morandums-et-notes-de-position/la-d%C3%A9sinstitutionnalisation-des-personnes-en-situation-de-handicap.html>.

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

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

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

‘37. The Committee requests that the State party implement a coherent inclusive education strategy for children with disabilities in the mainstream system and ensure the provision of adequate financial, material and human resources. It recommends that the State party ensure that children with disabilities receive the educational support they need, in particular through the provision of accessible school environments, reasonable accommodation, individual learning plans, assistive technology in classrooms, and accessible and adapted materials and curricula, and guarantee that all teachers, including teachers with disabilities, receive comprehensive training on the use of Braille and sign language with a view to improving the education of all children with disabilities, including boys and girls who are blind, deaf-blind, deaf or hard of hearing. The Committee also recommends that inclusive education should form an integral part of teacher training at university and during continuing professional development.’

In 2019, the Committee raised a further List of Issues, including requests for information concerning measures taken to:

- (a) ... to adopt and implement a coherent and inclusive education strategy, in all communities of the State party, to transform the parallel-track education system....
- (b) The financial, material and human resources available to provide individualized support for students with disabilities, and on the applicable accessibility standards within the framework of inclusive education.
- (c) Measures taken to promote and encourage the training and hiring of teachers with disabilities.

5.1 Summary of the educational situation of persons with disabilities²⁵

The analysis of the data from tables 16 and 17 (with additional analysis of figures in Flanders) shows the devastating effect of segregating children with a disability in a special educational circuit.

Leaving school too early and not obtaining a diploma, together with almost no participation in tertiary/higher education, means that many young adults with disabilities end up in precarious jobs.

Table 16 indicates early school leaving rates disaggregated by disability status. Youth with disabilities (aged 18-24) tend to leave school significantly more than non-disabled peers of the same age groups (and this is reinforced by widening the sample size to age 18-29). From Table 17 we learn that disabled young people (aged 18-24) are more

²⁵ The EU-SILC estimates concerning educational attainment should be treated with some caution due to variable confidence levels, but they consistently indicate disability quality gaps.

likely to leave school without a diploma (24.9 %) than the EU27 average (20.3 %). This trend becomes even more striking in the wider 18-29 year group, where 34.9 % left school without a diploma (EU27 average 21.3 %). However, it is relevant to note the high rate in young people without a disability.

An additional analysis²⁶ of the data for Education in Flanders shows large differences in the different streams of education. If only 2.7 % of the students leave general secondary education early, we see figures of early school leaving of 36.4 % in OV3 (the stream in special education to prepare students for society and the regular labour market) and 20.4 % in OV4 (stream in special education organised to follow the regular curriculum in a special school environment)

Table 17 shows completion rate of tertiary education disaggregated by disability and age group. Persons with disabilities (age 30-34) are less likely to complete tertiary education than their peers (and this is reinforced in the wider sample for age 30-39). The Flemish press²⁷ also reports on the participation of students with disabilities in higher education. An increase was observed among new students from 0.96 % in 2012-2013 to 1.46 % in 2016-2017. For non-generation students (Non-generation students are students who already have work experience and further training, or students who have already completed a higher education track and are reorienting), an increase is observed in University Colleges from 0.70 % to 1.12 % and at Universities from 0.46 % to 0.70 %. It is clear that with these statistics we are in danger of witnessing a very modest participation of students with a disability in higher education for years to come

After following the full path of segregation we see that people with a work limiting disability often find themselves in precarious jobs. (just as people with a migration background) It is often in these jobs that there are fewer opportunities and opportunities for growth, education and training.²⁸

Participation in lifelong learning initiatives is low especially for disadvantaged groups.²⁹ Despite great interest in one-off initiatives, a structural solution for non-participation in lifelong learning still seems a long way off.³⁰

5.2 Analysis of education policies relevant to the Semester

For reference, see also the 2020 [National Reform Programme](#) for Belgium.

In the recommendations of the European Council to Belgium we can learn that Belgium should take action in 2019-20 to improve the performance and the inclusiveness of the educational and training systems.

²⁶ <https://www.statistiekvlaanderen.be/nl/vroegtijdige-schoolverlaters-op-basis-van-administratieve-data#grote-verschillen-tussen-de-onderwijsvormen>.

²⁷ <https://www.knack.be/nieuws/belgie/aantal-studenten-met-beperking-in-het-hoger-onderwijs-sterk-gestegen/article-normal-1174983.html>.

²⁸ <https://www.vrt.be/vrtnws/nl/2020/01/10/hoer-krijgen-we-mensen-met-eeen-migratieachtergrond-of-eeen-handica0/>.

²⁹ OECD, Economic Surveys, Belgium 2020.

³⁰ <https://www.thomasmore.be/pers/levenslang-leren-ook-voor-mensen-met-eeen-beperking>.

In Flanders, that has a new Government since 2019, little concrete action has been taken to adjust the M-Decree (one of the government's major action points in the field of education). Till now only special initiatives are only announced for 'gifted students'. The Flemish Minister of Education³¹ has therefore earmarked half a million euros each time for this and next school year to analyse good practices from a number of exemplary schools in primary and secondary education and then disseminate it to other schools.

In an announcement to the Flemish Government the Minister announces the replacement of the M-Decree with a system that will be developed connected to the statement: 'Inclusive education if possible, special education if necessary'.

Situation (This is stated in the Flemish coalition agreement 2019-2024).

The current model for supporting pupils with special educational needs in mainstream education will remain in effect through the 2020-2021 school year. In the meantime, a new support model is being prepared that will take effect from 1 September 2021 at the earliest.

The Flemish Government states that it continues to support the principle of inclusion but wants to work step by step. She fulfils the objectives in a pragmatic and realistic manner. It is crucial to create sufficient social support and pedagogical guidance.

With the "support decree", the government does not want to take steps back, but to continue to work on the basis of support with a view to a more gradual realization of inclusive education.

The aim of the new decree is not less, but more social inclusion:

- keeping as many pupils as possible in mainstream education through the best possible education and thus not referring more pupils to special education;
- referring fewer students to external services for tutoring;
- basic care aimed at creating learning gains at school will be further elaborated.

To this end, the Flemish government is looking for inspiration from foreign models and examples, such as 'response to instruction' (RTI). This RTI model is tailored to the student's care needs and tries, through an ever-increasing intensity of remediation, to ensure that as many students as possible meet the general curriculum goals. This is achieved through permanent screening, intervention and monitoring in the classroom or in a task class. It is checked whether the capacity of school teams is not exceeded and whether the pupils involved achieve sufficient learning gains.

Special education also retains its full place and is qualitatively enhanced where necessary.

In the French speaking part of Belgium a lot of energy is given to an intermediate formula, that of the so-called 'inclusive' classes.³² This project has seen the light of

³¹ <https://www.projecttalent.be/>.

³² <https://www.gamp.be/2018/10/10/les-classes-inclusives-2018-2019/>.

day since the 2016-2017 school year, these classes have been welcoming pupils with disabilities in mainstream schools. These students benefit from special education in their class, but they work alongside ordinary students at specific times of the day (recess and other activities). Each year, new inclusive classes are born. For the year 2018-2019, to our knowledge, three new classes have emerged (in addition to the existing ones).

In its response to the UN CRPD's 2019 List of Issues, the state drew attention to a number of developments in the regions and communities.³³ For example:

- In Brussels, COCOF has strengthened its support services in the area of inclusive education for people with disabilities. These measures relate to specific 'school inclusion' actions by approved support services, the strengthening of inclusion assistance in mainstream schools and an increase in educational support interventions for higher and university studies.
- In the German-speaking Community, the emphasis was placed more on individual support for pupils during the last legislature. Since 01 September 2017, the 'disadvantage compensation' has been introduced and allows the compensation of a specific and individual deficit of the pupil by material, immaterial, methodical, didactic or organisational measures. Many students have already benefited from compensation for disadvantages. Non-assessment of the student in one or more sub-areas of the curriculum or school setting due to deficiencies that cannot or cannot yet be fulfilled was introduced since the beginning of the schoolyear 2018-2019.
- In the Walloon Region, the AVIQ provides, within the framework of Individual Assistance, the financial support of a maximum of 450 hours / year of educational support for students enrolled in higher education or following adult training. A protocol between AVIQ and the General Administration of Education, updated in 2019, aims to promote collaboration between the two sectors, taking into account their specificity, in the interest of students and their families.

³³ https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRPD%2fC%2fBEL%2f2-3&Lang=en.

6 Investment priorities in relation to disability

6.1 Updates on use of existing EU funds (to 2020)

From the European Commission Staff Working Document, country report Belgium, we learn that Belgium has significant investment needs in e.g., education, sustainable transport, digital infrastructure and social housing.

Concerning Country Specific Recommendation 3: Focus on sustainable transport we can make following statement: one of the most frequently heard complaints from persons with disabilities is that they are limited in their participation due to the inaccessibility and poor organization of public transport.³⁴

Many measures are taken to meet the structural shortages. The different levels at which these measures are situated mainly cause confusion. In addition, some measures (e.g., school transport for children in special schools) cause more problems than solutions; This was recently denounced in a number of press releases.³⁵

6.2 Priorities for future investment (after 2020)

For the future, it is very important to solve the existing waiting lists in Flanders for people with a disability through extra budgets. The 20,000 people on the waiting list are dependent on themselves, their families and other informal carers. Moreover, informal carers are not trained as caregivers and often have to take all care on their shoulders, without any prospect of professional support. This makes them overloaded.

Because the government does not allocate enough money for people with disabilities, the budget that is available goes primarily to emergencies, such as people with disabilities whose carers suddenly die. Those who take care of a loved one themselves will therefore remain longer on the waiting list. About 600 budgets will be allocated this year. That is less than 4 % of the people on the waiting list. At that rate, it will take 33 years to budget for everyone on the waiting list today. It is important that solutions for those waiting lists do not lead to the further development of institutions. Precise actions could give a huge boost to a deinstitutionalisation process.

Future investments in digital infrastructure should be weighed against the availability and accessibility of this infrastructure for citizens with disabilities. The recent COVID-19 pandemic has further emphasised the lack of access to the digital parts of our society for citizens with a disability.

In the 'school buildings monitor' 2018-2019,³⁶ the precarious situation of Flemish school buildings with regard to accessibility is discussed (again): Although there is a clear improvement in the evaluation concerning accessibility compared to the measurement in 2013 (+10 %), we note that accessibility measures are often still absent in 2018-2019.

³⁴ See e.g.: <http://sgkb.zondergrenzen.be/>.

³⁵ E.g. see: <https://www.standaard.be/>.

³⁶ <https://www.agion.be/de-schoolgebouwenmonitor-2018-2019>.

Barrier-free entrances and access paths (55 %) adapted parking space (53 %) and adapted toilets at the front pupils with a disability (53 %) are the most frequent implemented measures. Elevators, adapted toilets for staff and accessible headways for wayfinding are less or not available.

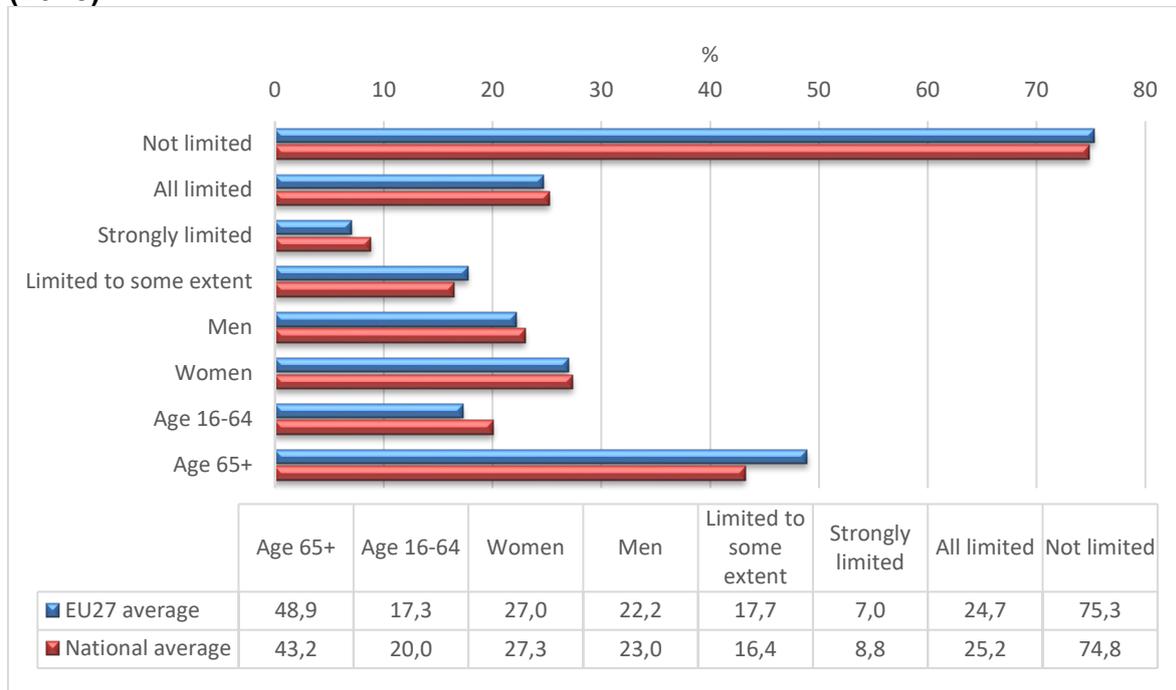
7 Annex: disability data relevant to the Semester

See also disability data published in the Eurostat database³⁷ and statistical reports.³⁸

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 six months’ the respondent reports that they have been ‘limited because of a health problem in activities people usually do’.³⁹

Table 1: Self-reported ‘activity limitations’ as a proxy for impairment/disability (2018)



Source: EU-SILC 2018 Release 2020 version 1

In subsequent tables, these data are used to indicate ‘disability’ equality gaps and trends relevant to the analytical chapters – for the labour market, social policies and healthcare, and education – by comparing outcomes for persons who report and do

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

³⁸ Eurostat (2019) *Disability Statistics* https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Disability_statistics.

³⁹ The SILC survey questions are contained in the Minimum European Health Module (MEHM) [https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Special:WhatLinksHere/Glossary:Minimum_European_Health_Module_\(MEHM\)](https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Special:WhatLinksHere/Glossary:Minimum_European_Health_Module_(MEHM)).

not report 'activity limitations'.⁴⁰ National estimates for Belgium are compared with EU27 mean averages for the most recent year.⁴¹

7.1 EU data relevant to disability and the labour market (2018)

Table 2: Employment rates, by disability and gender (aged 20-64)

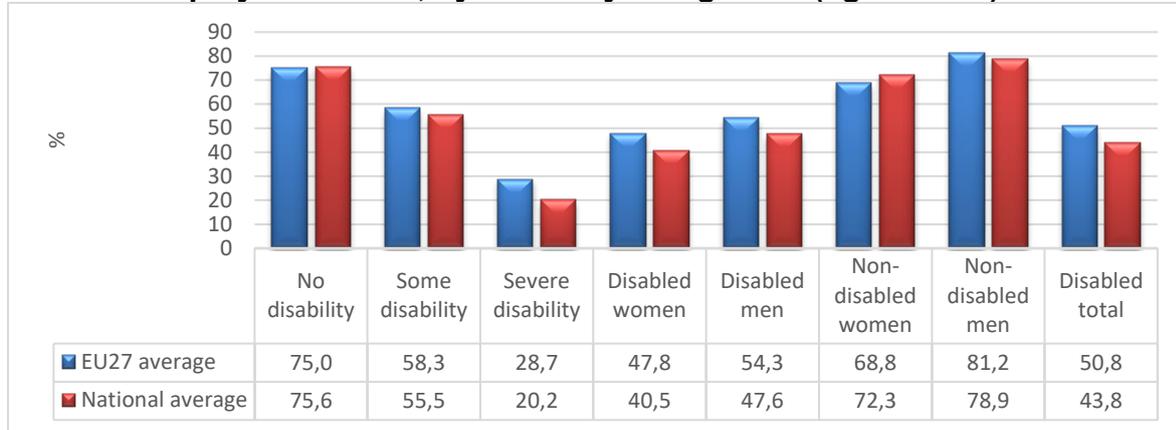
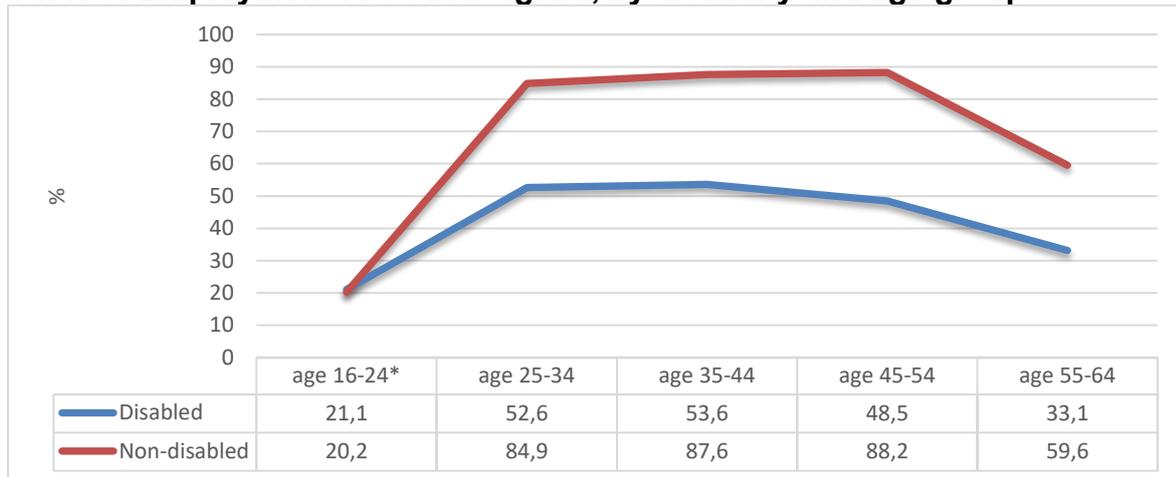
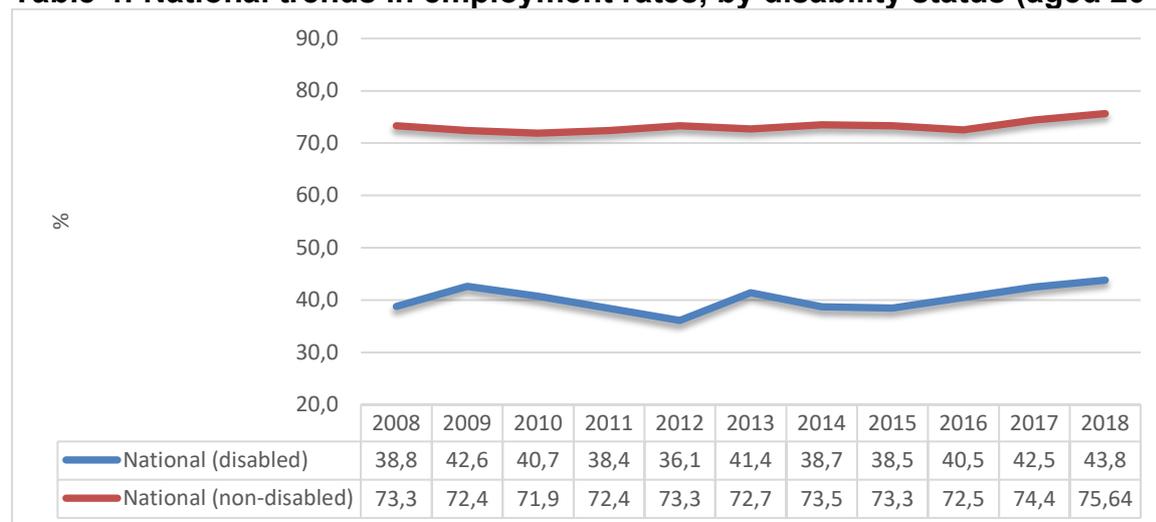


Table 3: Employment rates in Belgium, by disability and age group



⁴⁰ This methodology was developed in the annual statistical reports of ANED, available at <http://www.disability-europe.net/theme/statistical-indicators>.

⁴¹ The exit of the United Kingdom from the EU changes the EU average. Averages were also affected in 2015 by a discontinuity in the German disability data due to a definitional change.

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


Source: EU-SILC 2018 Release 2020 version 1 (and preceding UDBs)

7.1.1 Unemployment

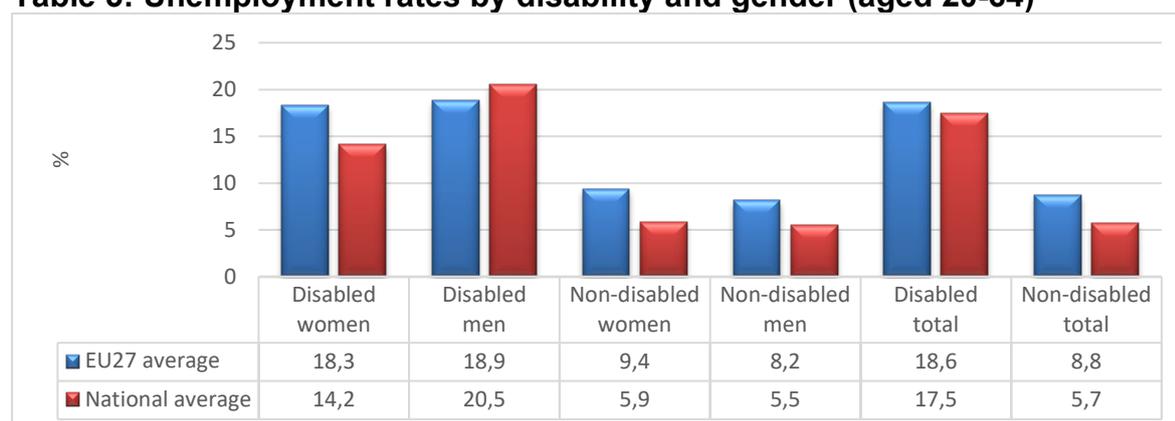
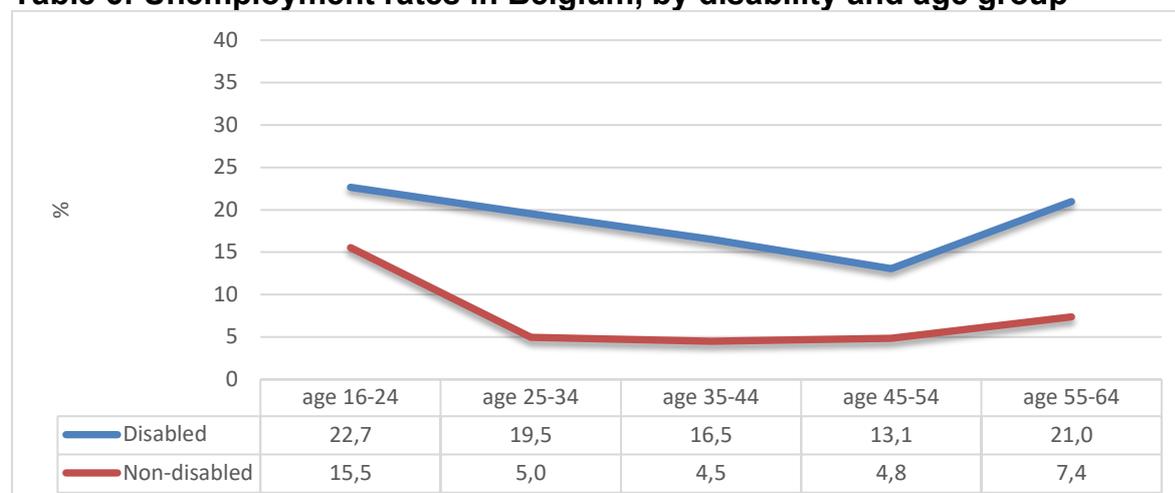
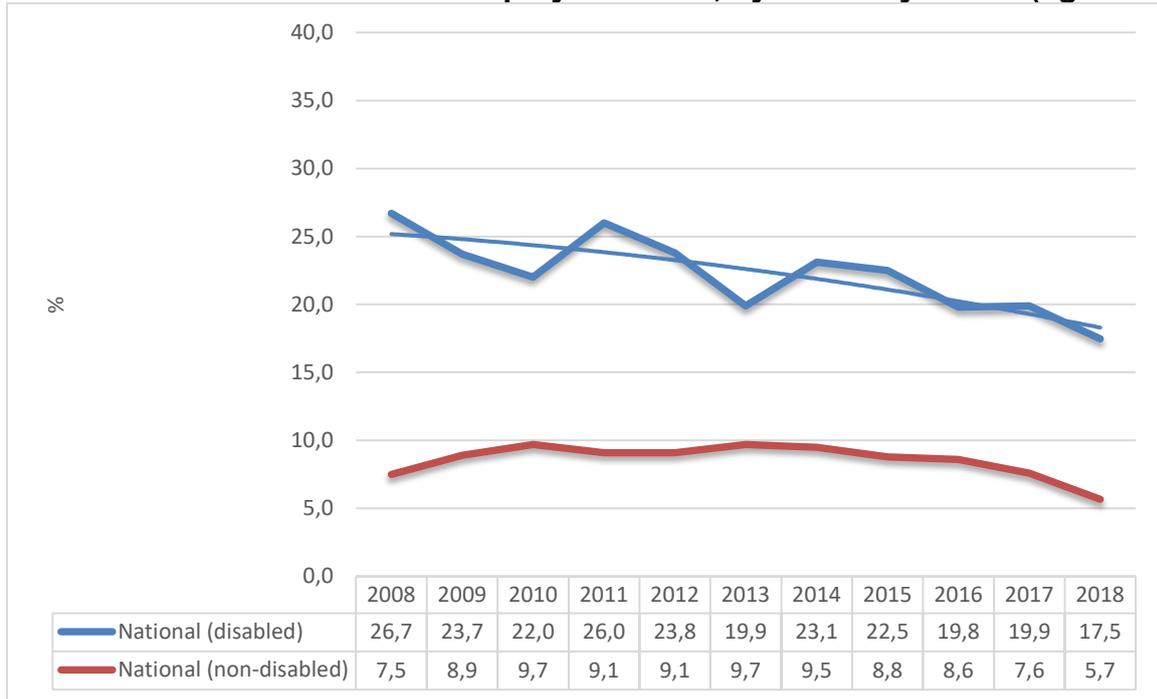
Table 5: Unemployment rates by disability and gender (aged 20-64)

Table 6: Unemployment rates in Belgium, by disability and age group


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



Source: EU-SILC 2018 Release 2020 version 1 (and preceding UDBs)

7.1.2 Economic activity

Table 8: Economic activity rates, by disability and gender (aged 20-64)

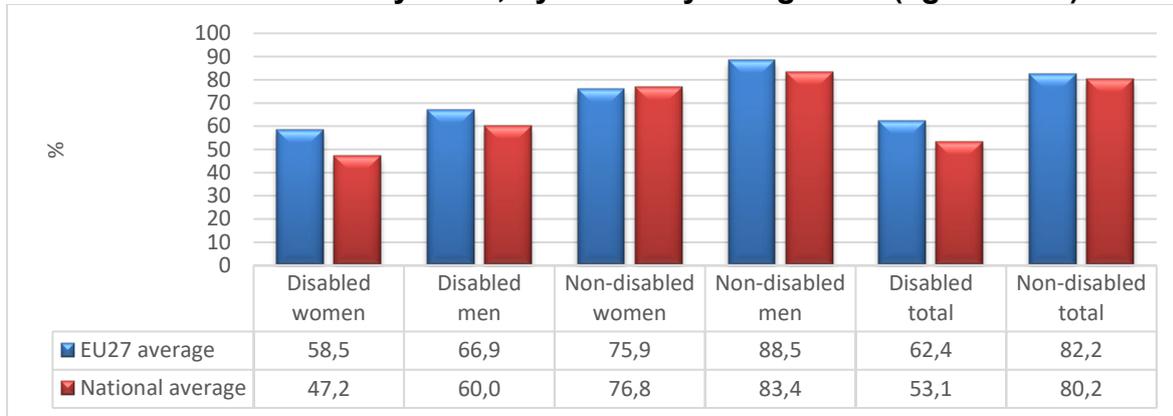
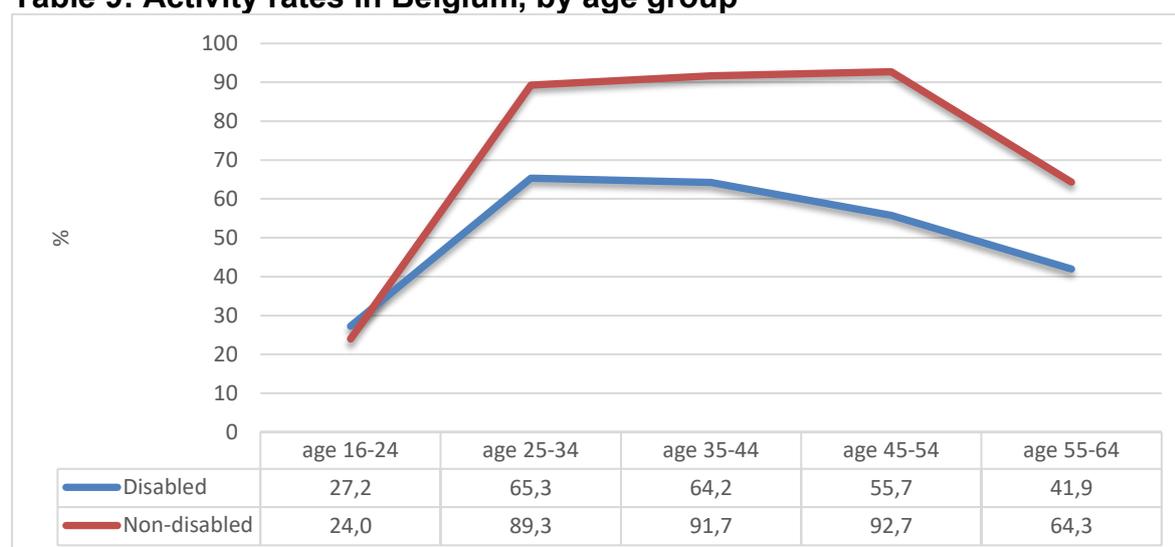
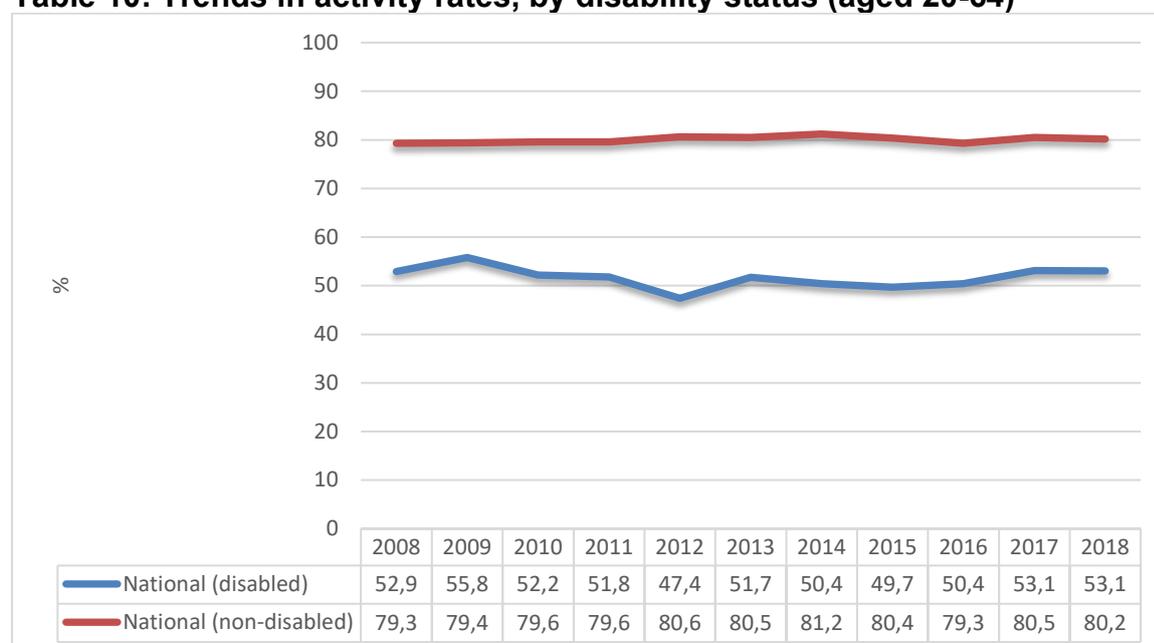


Table 9: Activity rates in Belgium, by age group**Table 10: Trends in activity rates, by disability status (aged 20-64)**

Source: EU-SILC 2018 Release 2020 version 1 (and preceding UDBs)

7.1.3 Alternative sources of labour market data in Belgium

Disability data is not included in the core European Labour Force Survey but labour market indicators for Belgium were disaggregated from ad modules conducted in 2001 and 2011. These can be found in the Eurostat disability database.⁴²

Persons with disabilities are identified in this survey in the section for persons with disabilities or chronic health problems are identified in the Labour Force Survey in Belgium. The question asks if the person experiences any difficulty in activities at work and, if so, which adaptations could give him/her the necessary support.

⁴² Eurostat Health Database, <https://ec.europa.eu/eurostat/web/health/data/database>.

The Department of Employment and Social Security of the Flemish government also generates disability and employment statistics. These are partly based on the Labour Force Survey (EAK – *Enquête naar de Arbeidskrachten*), but also on other surveys such as EU-SILC, ESS.

7.2 EU data relevant to disability, social policies and healthcare (2018)

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

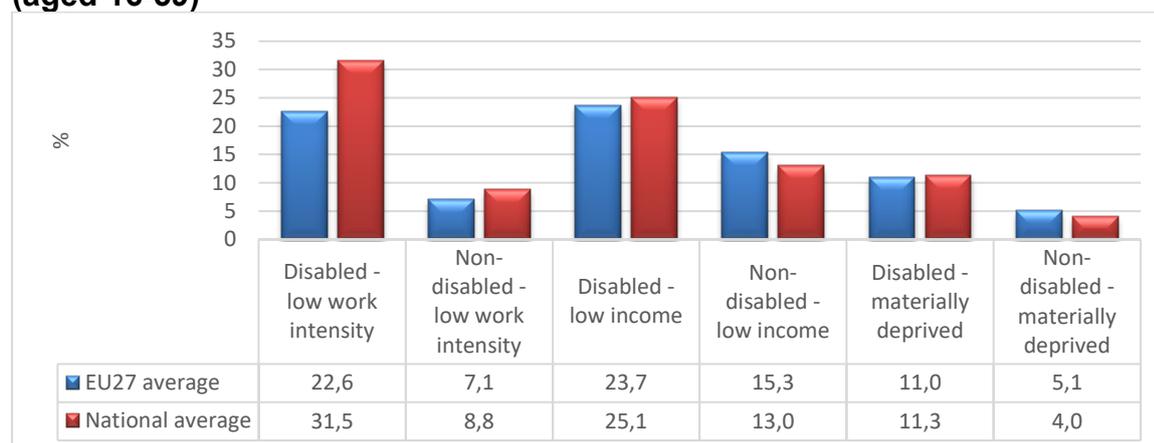


Table 12: People at risk of poverty or social exclusion, by disability and gender (aged 16+)

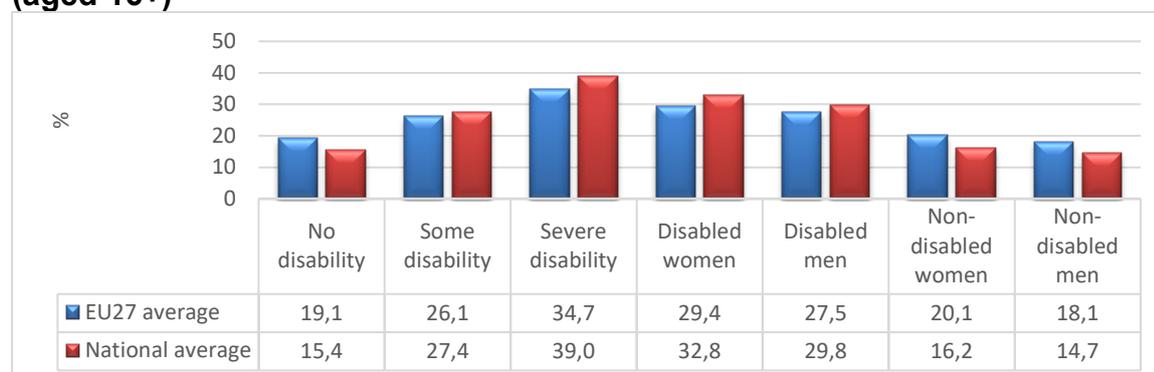
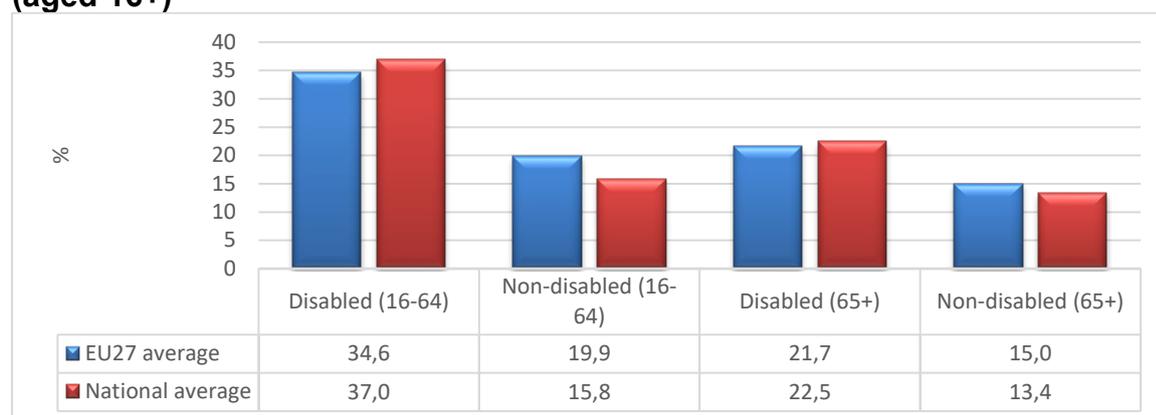
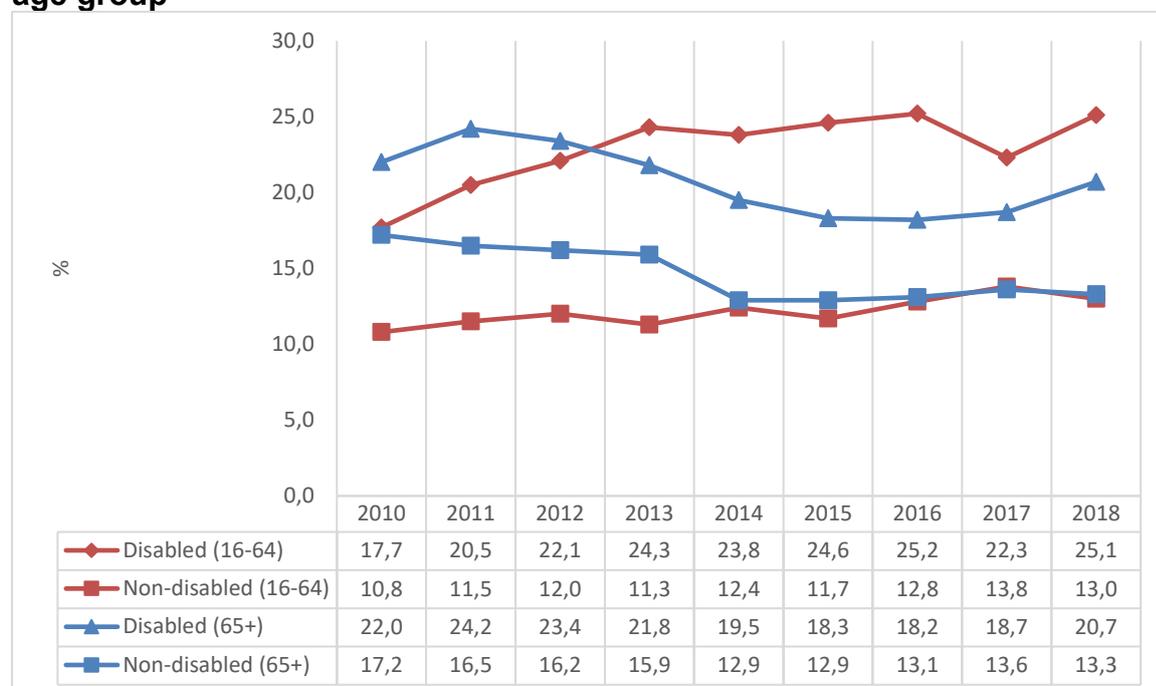


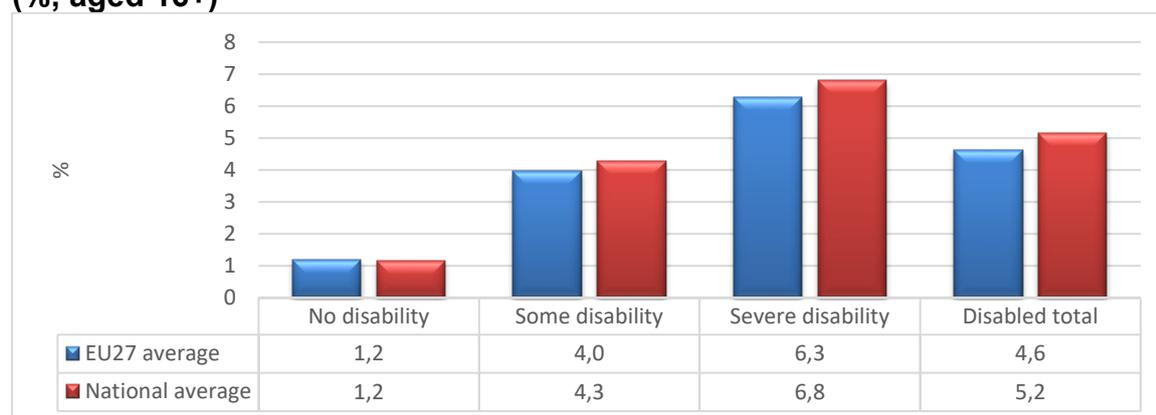
Table 13: Overall risk of household poverty or exclusion by disability and age (aged 16+)

Source: EU-SILC 2018 Release 2020 version 1 (and previous UDB)

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+)

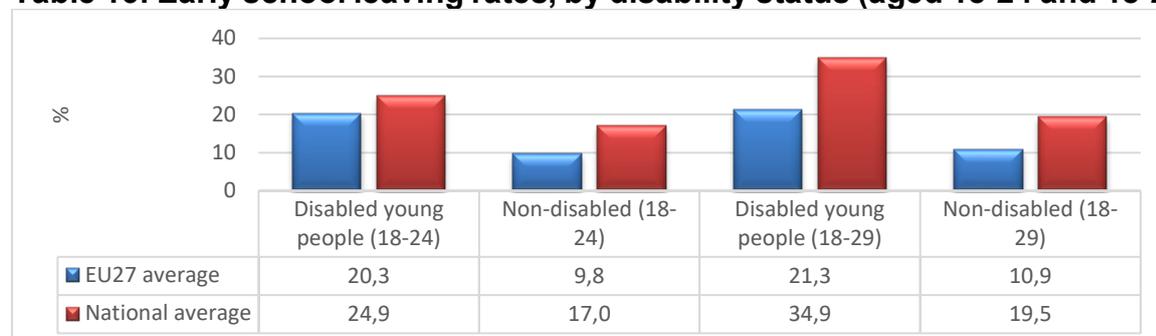
Source: Eurostat Health Database [[hlth_dh030](#)] – ‘Too expensive or too far to travel or waiting list’

Note: due to large variations an average of three years is indicated. EU mean averages are also skewed by high values in a minority of countries within disability groups but median averages for the total disability and no disability groups in 2018 are consistent with the 3-year mean values.

7.2.1 Alternative sources of poverty or health care data in Belgium

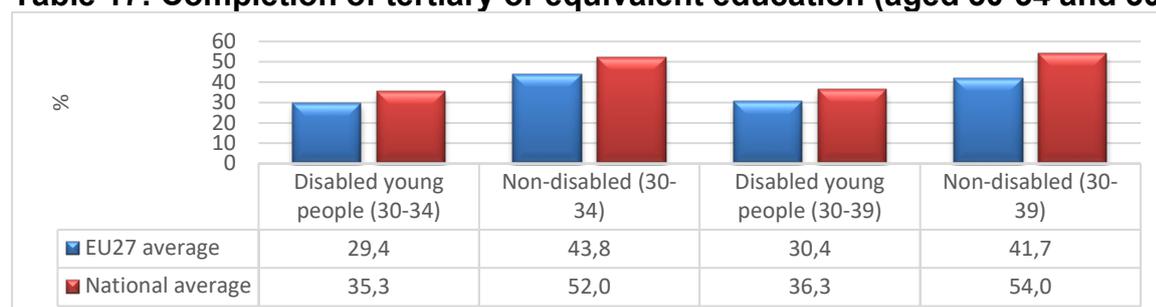
The EU-SILC data provides a comprehensive and reliable source concerning poverty or social exclusion rates. In addition to the summary tables presented so far, the Eurostat disability database also contains breakdowns concerning disability and poverty before and after social transfers, as well as in-work-poverty.⁴³

7.3 EU data relevant to disability and education

Table 16: Early school leaving rates, by disability status (aged 18-24 and 18-29)⁴⁴

⁴³ Eurostat Health Database, <https://ec.europa.eu/eurostat/web/health/data/database>.

⁴⁴ 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.

Table 17: Completion of tertiary or equivalent education (aged 30-34 and 30-39)

Source: EU-SILC 2018 Release 2020 version 1 (and preceding UDBs)

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

7.3.1 Alternative sources of education data in Belgium

Disability data is not included in the core European Labour Force Survey, but education and training indicators were disaggregated from ad hoc modules conducted in 2001 and 2011. These can be found in the Eurostat disability database.⁴⁵ Similar caution is needed with this data.

Some administrative data is also provided in the European Agency's Statistics on Inclusive Education (EASIE), concerning the population of enrolled students identified with special educational needs in Belgium.⁴⁶

⁴⁵ Eurostat Health Database, <https://ec.europa.eu/eurostat/web/health/data/database>.

⁴⁶ European Agency for Special Needs and Inclusive Education, *Statistics on Inclusive Education*, <https://www.european-agency.org/data/data-tables-background-information>.

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