Overview

of the horizontal issue of disability in Austria
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1. INTRODUCTION

Overall, people with disabilities, their family members and the people to whom they relate form a large group within the population and are thus also an important political and economic factor. The WHO estimates (cf. World Report on Disability 2011) that there are around 1 billion people with disabilities worldwide (15% of the world population). This WHO estimate is based on the evaluation of numerous studies. Those people who have been confronted with temporary problems related to their mobility or other impairments (e.g. people who have had accidents or are undergoing medical treatment, mothers/fathers with prams and small children) also have experience of disability. For all these groups of persons it is important that disability policy creates conditions from which as many people as possible will benefit. A key aspect is that the environment should be designed to be as accessible as possible in every sense.

According to a microcensus survey carried out on in 2015 on behalf of the Ministry of Social Affairs by Statistics Austria, 18.4% of the resident population over the age of 15 in private households in Austria have – according to their own statements – a permanent disability. This represents a total of around 1.3 million people.

By far the most common permanent disabilities mentioned in the 2015 survey were problems with mobility. A projected total of around 1m persons, or about 14.1% of the Austrian population over the age of 15 in private households, were affected. 7.3% of the population reported more than one disability; that corresponds to around 534,000 persons with several permanent disabilities. 374,000 persons (5.1%) had other disabilities than those indicated within the framework of the survey. With around 270,000 affected persons (3.7%), nerve-related or psychological problems were the third most common. In fourth place were problems with vision (3% or around 216,000 persons), and somewhat fewer indicated problems with hearing (2.1% or around 157,000 persons). Mental problems or learning difficulties affected 0.8% of the population (around 60,000 persons), and problems with speaking 0.4% (around 26,000 persons).

Among the persons with mobility problems, 3.7% or 271,000 persons had severe problems. Around 40,000 persons (0.5% of the population over the age of 15) indicated that they were dependent on a wheelchair. Of the 216,000 persons with problems with their vision (3%), 53,000 persons (0.7%) had severe problems. Around 2,200 persons (0.03%) described themselves as blind. A total of around 157,000 persons reported having problems hearing (2.1%), of whom 19,000 persons (0.3%) had severe hearing problems.

Disability affairs are a many-faceted horizontal issue in Austria with strong federalist components (responsibilities of the provinces). Important areas of disability policy at a federal level consist of strong, independent pillars for which detailed strategy developments
and plans have been developed by the relevant ministries (e.g. in the areas of employment, long-term care and education). Due to the Federal Constitution, all areas of disability policy which are not explicitly the responsibility of the federal government are **provincial issues**.

Although the Federal Constitutional Law does not contain any specific indication of the issue of disability, there has been a fundamental norm since 1997 in that protection against discrimination due to a disability was included at that time. According to this, nobody may be discriminated against because of his or her disability (Art. 7 para. 1 of the Federal Constitutional Law). In addition, in Art. 7 it was laid down that the federal government, the provinces and local authorities commit themselves to guaranteeing the equal treatment of disabled and non-disabled persons in all fields of everyday life.

For deaf people, Austrian sign language was enshrined in the **federal constitution** in 2005. Art. 8 para. 3 of the Federal Constitution Law lays down that:

> “Austrian sign language is recognised as a language in its own right. Further details are set down in the relevant laws.”

In many **procedural laws** it has already been regulated that the state has to bear the costs of sign language interpreters.

The **visionary goal is an inclusive society** in which disabled and other disadvantaged people can participate in all activities of society. Unlike the integration and rehabilitation approach, inclusion goes beyond the demand that people with disabilities should be ‘integrated’, or should adapt themselves as far as possible to the requirements of non-disabled people in order to avoid being excluded from social activities. Inclusion thus corresponds to the **principle of normalisation**, according to which the lives of people with disabilities should exhibit as little difference as possible to those of people without disabilities.

The key tasks carried out by the Austrian Ministry of Social Affairs on the way to this state are described on the following pages. Three main legal instruments are available to it in this work – the Disability Employment Act (Behinderteneinstellungsgesetz), the Federal Disability Act (Bundesbehindertengesetz) and the Disability Equality Act (Bundebehindertengleichstellungsgesetz).
2. INTERNATIONAL AFFAIRS

In international committees, Austria has actively promoted the implementation of disability mainstreaming for years now, as well as the rights of people with disabilities. In 2008, Austria was one of the first EU Member States to ratify the UN Convention on Disability Rights including the Optional Protocol, and thus gave a clear signal that it wishes to fulfil its obligations from this human rights convention in an ambitious way.

In the UN Human Rights Council, Austria actively supports the negotiations on resolutions concerning the rights of persons with disabilities.

In Austria’s involvement in the European Council, the international coordination of the UN Convention on Disability Rights is also the main focus. The Ad Hoc Committee on the Rights of Persons with Disabilities has the task of supporting the Member States in the implementation of the current strategy for 2017-2023 (Human rights: a reality for all). In this context, a range of activities are being undertaken in individual Member States which promote and deepen the reciprocal exchange of experiences (e.g. at international conferences).

As a Member State of the European Union, in which up to 80 million people with disabilities or with a long-lasting health problem live, Austria is an active proponent of the equality and rights of people with disabilities. In order to implement the UN Convention on Disability Rights, a National Action Plan on Disability 2012-2020 (NAP Disability) was adopted in 2012.

On 15 November 2010, the European Commission presented the communication ‘European Disability Strategy 2020: A Renewed Commitment to a Barrier-Free Europe for Disabled Persons’. This communication contained the new ten-year EU strategy in the field of disabilities, which still has three years to run. It supports and supplements Austria’s activities for the realisation of accessibility, and is in line with the UN Convention on Disability Rights. The main focuses of the EU strategy are largely similar to those in the Austrian NAP Disability.
3. DISABILITY

3.1. Integration into employment

3.1.1. Registered persons receiving special support

In order to pursue the social policy goal of integrating people with disabilities into the labour market, to enable them to lead an independent lifestyle and enjoy social recognition, the obligation of employers to hire disabled persons was and still is the point of departure. In order to effectively support this policy, a legal definition is needed of those persons with disabilities who employers have to employ, and also a definition of the employers affected by this requirement. Both of these are laid down in the Austrian Disability Employment Act (Behinderteneinstellungsgesetz).

The disabled persons who have this beneficiary status include those of working age who:

▪ have a level of disability of at least 50%;
▪ are Austrian citizens; or
▪ are EU/EEA citizens;
▪ are Swiss citizens or refugees who have been awarded political asylum;
▪ are third-country nationals who are entitled to reside in Austria and to take up employment, insofar as they have a right to be treated equally to Austrian citizens according to applicable law.

Persons who wish to belong to this group of beneficiaries can apply to the Sozialministerium-service. This initiates a so-called determination procedure, in the course of which the degree of disability is determined by a medical expert. The Sozialministerium-service then makes an official decision on the application. If the person affected does not agree with the decision, they can submit an appeal to the Federal Administrative Court.

The legal basis for the determination of the extent of a disability also includes the assessment regulation of 2010, in which modern medical criteria and parameters were created to determine the degree of disability during an examination by medical experts. The assessment of the extent of a disability or the severity of a disability has a particular effect on the individual offers of subsidies and support provided by various state agencies.

Disability as defined by this regulation is “the effect of a non-temporary physical, mental or psychological impairment or an impairment of the senses which makes participation in the life of society, particularly in normal working life, difficult. Non-temporary means a period which is more than (or expected to be more than) six months.

When using the so-called MAS diagnosis (MAS = multiaxial classification system, axis 6), social aspects are taken into account in medical examinations in accordance with the new
assessment regulation. In this way, social competences are also considered when assessing mental abilities.

3.1.2. Quota system

Employers in Austria who employ 25 or more employees are obliged to take on one registered disabled person receiving special support for every 25 employees. The calculation of the number of people with disabilities receiving special support who have to be employed (obligatory figure) is carried out by the Sozialministeriumservice on the basis of the data sent by employers about their employees to the health insurance funds. The calculation is made on the basis of the total number of a company’s employees. Certain groups of persons are not taken into account in the fulfilment of the quota system (e.g. apprentices and teleworkers).

The legal requirements are considered met when the number of people with disabilities receiving special support employed reaches the prescribed obligatory figure. If the employer is also a registered disabled person receiving special support, he or she is also included in the obligatory figure.

The following persons, whose employment is particularly encouraged, are counted double in relation to the obligatory figure:

- blind people
- wheelchair users
- disabled persons receiving special support under the age of 19
- disabled persons receiving special support for the duration of training
- disabled persons over 50 and receiving special support with a level of disability of at least 70%
- disabled persons receiving special support over the age of 55.

If the number of registered disabled persons receiving special support employed in a company is lower than the obligatory figure, the employer has to pay a compensatory levy. For every registered disabled person receiving special support who is not employed in 2018 (i.e. the number by which the obligatory figure is undercut), employers with 25-99 employees have to pay € 257 per month; employers with 100-399 employees € 361, and employers with 400 or more employees € 383. These figures are increased annually by the pension adjustment factor.

The compensatory levies paid are administrated by the Ministry of Social Affairs in the compensatory levy fund. This fund has great significance in the efforts to achieve the integration of people with disabilities into the general labour market. Disabled persons as well as businesspeople and the economy in general benefit from this. Specifically, the funding is primarily used for the integration into the labour market of people with
disabilities, the establishment and extension of integrated companies, and subsidies and bonuses for employers.

If companies train disabled persons receiving special support, they receive a bonus in the amount of the respective basic compensatory levy (in 2018 € 257).

3.1.3. Protection

Disabled persons receiving special support also benefit from special protection regulations, the best known of which is increased protection against dismissal.

This was redefined in an amendment to the Disability Employment Act in 2010, so that it is necessary to distinguish between the legal position before 1 January 2011 and employment relationships concluded later.

Employment relationships entered into before 1 January 2011.

This special protection against dismissal applies to employees who enjoy special support as disabled persons, and only in the case of termination of an indefinite employment relationship by the employer, and if the employment relationship has existed for longer than six months at the time the termination is announced. This period does not apply if the special support has been acquired due to a work accident within the first six months, or during a transfer within a group of companies.

Employment relationships entered into from 1 January 2011:

In this case, the increased protection against dismissal only applies from the fifth year of the employment relationship unless the special support was only achieved after starting the job. In that case the increased protection applies after the seventh month, or immediately in the case of a work accident or a change of jobs within a group of companies.

For all other forms of termination of an employment relationship (e.g. consensual termination, expiry of a fixed-term contract, dismissal), the special protection does not apply.

For employment relationships of disabled persons receiving special support concluded after 1 January 2011, a longer probationary period therefore applies. For an employment relationship concluded before 2011, there is no change of the legal position (it continues to be from the seventh month).

However, the dismissal of a disabled person receiving special support by the employer is not legally effective without the prior agreement of the disabled persons committee, unless agreement is given retrospectively in exceptional cases. An exceptional case is given, for example, when - at time the dismissal was announced - the employer did not know, and
could not be expected to know, that the employee was a recipient of special support. Before the dismissal of a disabled person receiving special support is announced, the employer therefore has to submit a reasoned written application for agreement to the dismissal to the Disabled Persons Committee at the relevant provincial office of the Sozialministeriumservice.

Once such an application for dismissal has been submitted, the Sozialministeriumservice initially begins an investigation procedure, in which all those involved have the opportunity to present their position and to provide corresponding evidence. The employees’ representative, the disabled employees’ representative and the staff representative also have to be heard in these proceedings.

Alongside the dismissal proceedings, the Sozialministeriumservice also offers support and advice as well as supportive measures in order to safeguard the threatened job or to enable the disabled employee to obtain a new job. This support can lead to the application for dismissal becoming irrelevant and therefore being withdrawn.

If the application for dismissal is continued, the Disabled Persons Committee makes a decision on the basis of the results of the investigation in a closed-door meeting and issues an official decision. This committee meets under the chair of an employee of the Sozialministeriumservice. Disabled persons’ organisations, the employee and employer and the provincial offices of the Public Employment Service are also represented. An appeal against the decision of the Disabled Persons Committee can be made to the Federal Administrative Court.

3.1.4. Disabled persons’ representatives

In every company which always employs at least five disabled persons receiving special support, a disabled persons’ representative (and deputy) have to be elected. In every company which employs at least 15 disabled persons receiving special support, two deputies have to be elected for the disabled persons’ representative, and from 40 disabled persons receiving special support three deputies. Disabled persons’ representatives must themselves be disabled persons receiving special support. If possible, the election should be carried out simultaneously with that of the works council. For carrying out and contesting the election, the provisions of the Labour Constitution Act apply. If at least five people with disabilities belong to the group of blue-collar employees and to that of salaried employees, a disabled persons’ representative and a deputy should be elected by each group. Depending on the number of disabled persons receiving special support in the company, the corresponding number of deputies must be elected for each disabled persons’ representative. The period of office of the disabled persons’ representatives is four years.

If there is a central works council in a company, a central disabled persons’ representative should be elected from the group of disabled persons’ representatives. This person is
authorised – at least once a year and at the most twice – to call a meeting of all disabled persons’ representatives of the company, in order for them to report on their activities, and to discuss issues which are significant for the disabled persons receiving special support in the company.

If, in a group of companies, there is a group representative according to Section 88a of the Work Constitution Act, a group disabled persons’ representative has to be elected. This person is authorised – at least once a year and at the most twice – to call a meeting of all disabled persons’ representatives of the group, in order for them to report on their activities, and to discuss issues which are significant for the disabled persons receiving special support in the group.

The (central) disabled persons’ representative has to represent the economic, social, health-related and cultural interests of the disabled persons receiving special support, whereby he/she must be supported by the works council and be provided with the necessary information by it.

The task of the disabled persons’ representative is primarily to ensure adherence to the provisions of the Disability Employment Act, to point out the special needs of the disabled employees, to inform the works council and the employer about any deficits, and to take part in the meetings of the works council in an advisory role.

3.1.5. Support funding

The Austrian Ministry of Social Affairs has funding of around € 195 million available for the promotion of the occupational integration of people with disabilities, which comes from compensatory tax, the federal budget and the European Social Fund, and additionally, within the framework of mandatory training for young people, around € 25.8 million from labour market policy funding.

This funding finances the measures which are strategically developed in the Ministry of Social Affairs in a ‘nationwide labour market policy programme for disabled persons’ (BABE), which takes the current framework conditions for labour market policy into account and is subsequently implemented by the Sozialministeriumservice in all of the provinces. The instruments include subsidies for projects as well as individuals with the goal of obtaining or securing long-term employment on the primary labour market.

The ESF funding is used in the programme period 2014 – 2020 for the co-financing of measures for young people as part of the Occupational Assistance scheme. In the Netzwerk Berufliche Assistenz (NEBA, Occupational Assistance Network) measures such as youth coaching, production schools, vocational training assistance, vocational assistance and job coaching are offered together with project organizers especially for the target group of young people with disabilities in the transition phase from school to work. The additional
funding from the labour market policy budget is deployed for measures to realize the mandatory training programme.

An interface to the Public Employment Service (AMS) should be mentioned here, whose main task is to ensure the livelihoods of the unemployed via unemployment benefit and to help them find a new job. This also includes people with disabilities who are job ready or can reach this level with short-term training programmes. The core target group of the Sozialministeriumservice, however, are those people with disabilities receiving special support whose chances of integration can only be increased over the long term via tailor-made measures. They are also the main target group for subsidies according to the Disability Employment Act which are provided either on a project- or person-related basis.

3.1.5.1. Projects

- Netzwerk Berufliche Assistenz (NEBA) of the Sozialministeriumservice
NEBA, with its occupational assistance services is the 'umbrella brand' for the very differentiated system of support for people with disabilities, and particularly for young people who are marginalised or at risk of marginalisation. NEBA’s offers are key instruments of the Austrian labour market policy for people with disabilities.

Its youth coaching, production school, vocational training assistance, vocational assistance and job coaching programmes represent the heart of the subsidy landscape of the Sozialministeriumservice.

- Youth coaching
The main focus of this offer is on pupils starting from Year 9 of school. However, young people outside the school system also form part of the target group. The goal is to enable young people in Austria to obtain better skills and qualifications and thus improve their chances on the labour market. After leaving compulsory schooling, young people at risk of exclusion, particularly young people with disabilities or social and emotional difficulties, lack a nationwide social safety net or support system. Youth coaches have the task of compiling optimal individual packages of measures for occupational integration together with the affected person.

With the involvement of the relevant environment, an analysis of their strengths and abilities is carried out and – by means of practical experience of the labour market – also a matching process with the requirements of the world of employment. Problems which could prevent sustainable integration into a higher-level education or training system are identified, and active measures to find solutions are taken together with the young people and their environment. In coordination with cooperating agencies, individual recommendations are defined for future planning as well as short, medium and long-term goals.
The main features of the service are: drawing up an inclination and suitability profile, carrying out an analysis of the person’s strengths and weaknesses, the determination and outlining of a possible need for retraining, pointing out job perspectives on the basis of the above-mentioned inclination and suitability profile, and based on this the creation of a career plan/development plan and a final report.

▪ **Production schools**
In a production school, young people are helped to get themselves fit for vocational training after compulsory schooling. Deficits in the field of basis competences (such as the use of new media or a lack of social skills) or in the completion of vocational training (or partial qualifications) are mitigated by these measures and, in an ideal situation, ironed out.

They receive support in the acquisition of competences and foundation skills which are the preconditions for the occupational field which best corresponds to their abilities and – based on their individual potential – offers the best chances for their development.

The programmes of production schools combine practical work with cognitive learning activities and sports. This is complemented by the offer of individual coaching. This is designed to ensure that young people recognise in which fields and in which way they can acquire new competences. The idea is that they develop self-awareness and self-confidence and in this way train and promote skills which are required to start training for their desired occupation.

▪ **Berufsausbildungsassistenz (vocational training assistance)**
This programme was created for young people with disabilities who cannot complete ‘normal’ apprenticeships or training programmes. Via new forms of vocational training, the individual needs of disadvantaged young people can be taken into consideration in a targeted way. In this way, training is either designed as an apprenticeship which lasts up to two years longer, or only specific parts of an occupation are learned within the framework of a partial qualification.

The opportunities provided by customised training make it possible to address individual needs. During the entire training period, the young people are accompanied and supported by vocational training assistants.

First of all, an apprenticeship or training agreement is concluded. The formalities are dealt with by the vocational training assistants. During the training, regular contact to the company and vocational school is maintained in order to be able to recognise any problems or difficulties at an early stage and to react to them. This ensures that the vocational training assistants can provide support on the spot in times of crisis.
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They help the trainees to cope with learning the contents of the training course by organising learning aids before and during attendance of vocational school. If required, they also involve job coaches who support the trainers in the companies. In the critical phase of concluding the training, the vocational training assistants prepare the young people for the final examinations, and organise the final examination in the case of a partial qualification.

**Arbeitsassistenz (vocational assistance scheme)**

Arbeitsassistenz is based on the idea that with intensive personal preparation, advice and guidance, people with disabilities can be given a better chance of integration into a normal job or can be helped to avoid losing their job. Vocational assistants offer people with disabilities help in getting prepared to start work and support in obtaining and keeping a job.

Alongside the advice and support, an important part of this scheme is keeping in contact with the authorities, the agencies providing funding and other cooperation partners, and with health care institutions if required. In a clarification phase, a support goal is drawn up, contact is made to the employer, and an inclinational and suitability profile is drawn up. In order to obtain a specific job, support is offered for active job seeking and companies are offered relevant advice. The vocational assistants are also available to the employer in the induction phase (up to three months).

Companies which want to hire people with disabilities receive support from the work assistance scheme on issues of the legal framework and help in case of problems in the firm.

If a person's job is at risk, Arbeitsassistenz also provides comprehensive advice and support services. It makes contact with companies if required, and acts as a mediator in talks with superiors. In specific cases, cooperation with health care facilities, social services and other organisations is sought.

**Job coaching**

This service is addressed to private businesses which want to hire and employ people with disabilities. Job coaching offers direct and individual support in the workplace. The goal is the optimal and sustainable inclusion of people with disabilities into working life. It promotes the specialist and communications-related abilities of employees as well as their social skills, so that they can fulfil the demands made upon them independently and over the long term. People with learning disabilities or difficulties have a particular need for this.

The job coaching team provide advice, guidance and support. The intention is to enable women and men with disabilities to cope with everyday working life independently. The duration of the induction period is individually agreed upon with the company and can last for up to six months. Job coaches are also on hand to provide support in existing employment relationships where an improvement in performance levels or retraining are required, or in the case of other difficulties or insecurity.
3.1.5.2. Persons

- **Training allowance**
  When people with disabilities are undergoing training or an apprenticeship, they can receive an allowance for disability-related additional costs during the period they attend education or vocational training.

- **Integration subsidy ("Come back")**
  This subsidy provided by the **Public Employment Service** is available to all employers with a few exceptions. This subsidy is paid for employment relationships of previously long-term unemployed persons who have been registered as unemployed for
  
  - at least six months (in the case of persons under 25); or
  - at least twelve months (in the case of persons over 25).

- **Wage subsidy**
  For already existing employment relationships, a wage subsidy can be granted to the employer if it emerges that the performance at work of a person with disabilities receiving special support is lastingly and considerably lower than that of an employee without disabilities.

- **Job safeguarding subsidy**
  If the job of a person with disabilities is acutely threatened, employers can be granted subsidies towards wage- and training costs for the period during which the threat persists (max. 3 years, in exceptional cases up to a max. of 5 years).

- **Technical work aids**
  In order to compensate for limitations imposed on efficiency by disabilities, and/or to optimise performance, subsidies are offered for technical aids and for training in their use in existing and newly-created jobs.

- **Adaptation and creation of jobs and training positions**
  In order to create suitable new jobs or apprentice/trainee places, employers can be granted subsidies or benefits in kind if they employ people with disabilities or take them on so that they can complete vocational training, or if the employment relationship of a person with disabilities would end without them being employed in a suitable job.

- **Training costs**
  For already existing employment relationships, the costs of external or further training incurred due to disabilities can be assumed in their entirety.

- **Personal assistance in the workplace (PAA)**
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This can be taken advantage of by people with disabilities of working age who are at least at Care Stage 5 (in exceptional cases from Care Stage 3), who are suitable for the exercised or intended occupation in terms of knowledge and personality, and who

- are in a social-insurance compliant employment relationship or in profit-oriented self-employment; or
- can take up a specific offer of a social insurance-compliant job or self-employment with PAA; or
- with the aid of PAA can complete a degree course or vocational training of statutory duration plus the additional semesters permitted for the receipt of student grants, but who require personal support due to their disability.

PAA includes, for example, accompaniment on the way from home to work or place of training, accompaniment during work-related obligations outside the workplace, hands-on support during work or training, assistance with personal hygiene during work or training, and other disability-related assistance (e.g. help during lunch, putting on or taking off a jacket, etc.).

3.1.6. **Becoming self-employed**

People with disabilities who want to try and earn a living by means of self-employed work can receive a start-up subsidy from the Sozialministeriumservice. For the verified costs incurred in the establishment of self-employed work, subsidies of up to 50% can be paid, but only up to maximum of one hundred times the basic compensatory tax. The decision of the Sozialministeriumservice depends on the financial situation of the applicant, so the approval of a subsidy cannot be expected in every case.

There are also subsidies from the Sozialministeriumservice to compensate for verifiable ongoing disability-related additional costs of self-employed persons.

Under certain circumstances, the **Public Employment Service** also supports people who wish to become self-employed via its Business Start-Up Programme for the Unemployed. In this programme, six to nine months time is granted for a person to prepare the founding of a business, and guidance by professional start-up advisors is provided.

The acquisition of qualifications specific to the field of business can also be subsided. During the period in which the business is being prepared, and under certain circumstances also in the initial phase, financial support is provided by the **Public Employment Service**.

3.1.7. **Prevention management** (www.fit2work.at)

Prevention management focuses on maintaining or restoring the ability to work (particularly that of older workers) in people who are already faced with health restrictions or whose ability to work is threatened. The advice and support programme fit2work is designed to
help quickly as soon as health problems start via a broad range of offers, also including case management.

This can be the case, for example with older employees with longer periods of sick leave, or after a work accident or the occurrence of an occupational disease. People with disabilities and/or impairments, chronic somatic illnesses or mental problems can also take part in this programme. **Fit2work** is financed from the labour market budget, by the social insurance institutions and the Sozialministeriumservice. The Sozialministeriumservice coordinates and administrates the programme throughout the country.

So-called "Case management" means that advisors support their clients over a longer period of time in more difficult cases, and try to find a sustainable solution to the problem together with them. Their individual situation is clarified, a basic check carried out by an occupational physician and/or psychologist, and a development plan drawn up. The realisation of the measures is accompanied by regular interviews. After conclusion of the consultation period, a feedback interview is held with the case manager to reflect on the realisation of the measures. If necessary, further steps are arranged.

Alongside advising persons, **fit2work** also offers advice for companies. Here again, the goal is to maintain the ability to work of employees who have health conditions or a disability. Thanks to its pooling of existing programmes, **fit2work** also acts as a navigation and coordination instrument and provides orientation, advice and support in a one-stop shop.

### 3.1.8. Mobility support

If the use of public transport cannot be reasonably expected due to lasting mobility problems due to a disability, and this has been recorded in a person’s disability pass, the following workplace-related support is available in relation to a job:

- payment of travel costs
- grants for the purchase or adaptation of vehicles for disabled persons which are needed to get to work
- grants towards the costs of a driving licence
- mobility allowance for employees who are largely dependent on the use of a wheelchair
- grants for the purchase of orthopaedic and prosthetic aids.

In addition, persons with a parking permit issued by the Sozialministeriumservice are entitled to use specially marked parking spaces for the disabled.

### 3.1.9. Social enterprises

**Around 1,600 people with disabilities** are currently employed in social enterprises. They are paid at least collective agreement wages, their social insurance contributions are paid in full, and they have a say in how the company is run just as all other workers do.
In order for these social enterprises to be financially viable, the people with disabilities employed there need to be able to provide a minimum level of economically usable performance. This has to be at least half the level of performance of a person with disabilities carrying out the same work. If this is not the case, they cannot work in a social enterprise.

Alongside jobs, social enterprises also provide training places for people with disabilities. In autumn 2015 a new main focus was chosen: people with disabilities should not only be offered a low-threshold opportunity to acquire skills, but also have access to high-quality vocational training in the form of an apprenticeship. For 2018 an average of around 86 apprenticeship places for people with disabilities are planned as part of this measure.

### 3.2. Social integration

#### 3.2.1. Disabled person’s pass

The disabled person’s pass is an official ID card which is proof of a disability (regardless of the type of disability). The disabled person's pass does not create a right to financial benefits. However, one does receive discounts at various events with the pass. Since autumn 2016 the disabled person's pass has been issued in cheque card format.

The disabled person’s pass can be obtained by the following persons whose normal place of residence is Austria, whose degree of disability or reduction of ability to work is at least 50%, and who belong to one of the following groups:

- disabled persons receiving special support (see chapter 3.1.1 Persons receiving special support)
- recipients of long-term care benefit or a comparable benefit on the basis of federal legislation
- recipients of increased family allowance
- recipients of a cash benefit due to invalidity, inability to work (also according to civil service law), or permanent incapacity to work.

Furthermore, people with disabilities who are resident abroad but regularly spend time in Austria for private or work-related reasons can also apply for a disabled person's pass.

If there has been no official decision or legal verdict upon which degree of disability has already been established, a medical officer of the relevant provincial office of the Sozialministeriumservice will assess this matter on the basis of the assessment regulation. He or she does not – if this is possible – carry out an examination, but rather estimates the degree of disability in accordance with the assessment regulation on the basis of test results or expert reports.
An appeal against a negative decision by the Sozialministeriumservice can be made to the Federal Administrative Court.

3.2.2. Parking permit
Since 1 January 2014 the Sozialministeriumservice can issue a parking permit to holders of disabled person’s passes whose pass contains an entry stating that they cannot be reasonably expected to use public transport due to lasting mobility problems caused by a disability.

The disabled person’s pass has the same design in all EU countries. In other words, holders can make use of the applicable benefits in any EU Member State. It is forgery-proof and contains a photo of the holder. Each pass has the abbreviation of the issuing Member State (e.g. A for Austria) surrounded by the EU symbol.

The pass entitles the holder:

- to park in spaces reserved for people with disabilities;
- to possibly have a personal parking space signposted;
- to park for longer periods in short-stay areas;
- to park in no-parking zones;
- to stop in no-stopping areas;
- to unload a wheelchair, also in pedestrian zones.

In addition, pass holders are exempted from parking fees. The pass also serves as proof of a disability in relation to exemption from car tax/motor-related insurance tax.

3.2.3. Support fund
Support from this fund is given to people with disabilities who, due to an event related to their disability, have come into a situation of severe social hardship, and if fast help can mitigate this hardship or eliminate it.

A close family member who has been the main carer of the person in need of care for at least a year and is prevented from continuing the care due to illness, a holiday or other important reasons, can also receive support. This payment is to be used to finance the necessary professional or private replacement carer. This support is conditional on receipt of long-term care benefit of at least Stage 3. In the case of persons suffering from dementia and minors, Stage 1 of long-term care benefit suffices.

3.2.4. Support according to the type of disability
- Blind people
This can include subsidies for technical work equipment such as a telephone system for a blind person, a Braille keyboard for a computer and the related training costs, or subsidies for social rehabilitation in the form of technical aids such as reading devices and colour
recognition devices for private use. Furthermore, subsidies are also available to increase a person’s mobility and for the acquisition of a guide dog.

- **Deaf people**
Subsidies for social rehabilitation based on technical aids such as alarm clocks with flashing lights and vibration for deaf people, captioned phones, and the reimbursement of the costs for a **sign language interpreter** for official appointments.

- **Wheelchair users**
Wheelchair users and people with severe mobility-related disabilities who cannot be reasonably expected to use public transport can obtain subsidies to increase their mobility such as a grant towards the purchase of a new car, a mobility allowance, and grants for building work to adapt their homes to make them better suited to their disability.

3.3. **Tax credits**
Tax credits are available for persons who, due to their own disability or the disability of a child have to deal with unusual financial burdens.

In this context, a person is considered disabled if the degree of disability is at least 25 percent. Single-earner families or persons where the income of their spouse or partner does not exceed the amount of € 6,000 p.a. can also claim for the additional expenses incurred due to a disability of the spouse or partner. An entitlement to flat rate amounts dependent on the degree of disability is only given if long-term care benefit is not received.

In addition, people with physical disabilities are entitled to a monthly flat-rate tax allowance if they are not able to use public transport due to their disability and own their own car. If they do not have their own car they can claim a tax allowance of a maximum of € 153 for taxi trips.

Irregular expenditure on aids and costs of treatment (doctors, hospitals, stays at a spa, therapy and medicines) can also be claimed alongside the flat-rate allowance amounts to the extent that they can be verified.

The flat-rate tax relief due to reduction of the ability to work and for special diets due to illness as well as allowances for irregular expenditure and the flat rate allowance for a car can be claimed via a self-assessment tax return.

As disability is a horizontal issue and all areas of policy are covered by disability mainstreaming, it is not surprising that – particularly in the case of social rehabilitation of people with disabilities in Austria – several institutions are generally responsible. However, nobody needs to have an overview of all competences in order to assert their entitlements: the goal of the **one-stop service** at the **social insurance institutions** and the **open reception**
area at the Sozialministeriumservice is always to provide optimal advice and support to their clients.

**3.4. Non-discrimination**

In 1997, the Austrian Parliament adopted the following addition to Art. 7 para. 1 of the Act on the Federal Constitution:

'Nobody may be discriminated against because of his or her disability. The Republic (the federal government, the provinces and local authorities) commits itself to guaranteeing the equal treatment of disabled and non-disabled persons in all fields of everyday life.' As a result of this provision of the Constitution as well as the **EU framework directive on equal treatment in employment**, which also applies to people with disabilities, a package of legislation on equal treatment came into effect on 1 January 2016. The core element of this package is the ban on discrimination due to a disability contained in the following laws and the creation of a Disability Ombudsperson in the Federal Disability Act:

- **The Federal Act on Equal Treatment for People with Disabilities (Bundes-Behindertengleichstellungsgesetz, BGStG, also referred to as the Disability Equality Act)** regulates the ban on discrimination in everyday life.

- **The Disability Employment Act (Behinderteneinstellungsgesetz)** contains provisions on the ban on discrimination in the world of work.

For reasons of competences, the protection against discrimination which is regulated in the package only covers the areas of **responsibility of the federal government**. (The provinces or Länder have enshrined protection against discrimination in employment in their area of responsibility, and numerous provinces have additionally adopted comprehensive anti-discrimination laws.)

The Federal Disability Equality Act (BGStG) has incorporated protection against discrimination for people with disabilities into broad areas of daily life.

There are essentially two fields: On the one hand in the **federal administration** and on the other hand everywhere related to the **access to and the provision of goods and services** which are available to the public (e.g. the purchase of goods as part of a consumer transaction where the federal government is responsible for regulation.

The federal administration includes the activities of federal authorities (e.g. tax offices) and other institutions which execute federal law, such as the social insurance institutions or the Public Employment Service (AMS). Some areas, such as schools, belong partly to the competence of the federal government and partly to the provinces.
The ban on discrimination in the federal administration means on the one hand that equal access has to be ensured to public procedures for people with sensory disabilities, but also for participants with mobility problems. The federal government is thus called upon here to provide, for example, sign language interpreters if necessary, or to offer official documents in a form which is accessible for blind people. There are also binding regulations in this field in many procedural regulations.

On the other hand, the buildings used by the federation have to be designed in such a way that they are accessible for people with disabilities. The authorities also have to take accessibility into account in specific procedures, such as in the appointment of experts who have been entrusted with drawing up reports within the framework of a procedure. In this case, for example, they have to select the experts in such a way that medical or occupational examinations can be offered on accessible premises.

In addition, the legislation obliges the federal government to take suitable and specifically required measures to enable people with disabilities to gain access to its services and offers (also outside official procedures). This includes information material such as brochures, leaflets and also the design of websites.

Furthermore, after consultation with the Austrian National Council of Disabled Persons (see Chapter 8) the federal government published a so-called staged plan for federal buildings at the end of 2016 for the buildings that it uses, and which contains plans to create accessibility. To this end, all of the buildings that the federal government uses had to be examined for constructional barriers, and subsequently possibilities to eliminate the barriers were investigated.

Since then, a considerable part of the buildings used by the federal government has been made barrier-free. The realisation of the entire staged plan for federal buildings is planned for the end of 2019.

3.4.1. Protection against discrimination

The legislation on disability equality prohibits discrimination due to disability in essential fields of Austrian law. However, it is not part of criminal or administrative law – i.e. discrimination is not prosecuted ex officio, in other words automatically. Disability equality law is a civil law issue in Austria – in other words, in case of discrimination one has to go through the courts.

Disability equality law also does not, in itself, impose anything - such as what an accessible area has to look like, for example. This would not be possible, as building law, for example, is the competence of the provinces. It only regulates the legal consequences of discrimination.
If a court establishes discrimination, the legal consequence of this discrimination is the **award of damages**. In many fields of working life, it is also possible to sue for withheld services (e.g. participation in a training programme, the upholding of an employment relationship which has been terminated, or the award of withheld wages).

Protection against discrimination applies to **people with physical, mental, psychological or sensory disabilities**. A person’s status as disabled does not have to be formally established. However, it must be credible that certain treatment has occurred **due to** a disability.

Protection against discrimination also applies to family members or other persons who are close to the disabled person, as well as under certain circumstances to witnesses or respondents who appear in proceedings or support the complaint of an affected person.

### 3.4.1.1. Direct discrimination

**Direct discrimination** is given when a person is treated less favourably than another person in a comparable situation due to their disability.

Protection against discrimination applies here under the following circumstances:

- the discrimination must take place **due to** a disability
- the treatment must be less favourable than that of another person (i.e. it must be possible to at least imagine a comparable person)
- the situations in which the affected person and the comparable person find themselves must also be comparable.

### 3.4.1.2. Indirect discrimination

**Indirect discrimination** is given when apparently neutral regulations or features of structured areas of life can discriminate against people with disabilities in comparison to other persons in a particular way without this being objectively justifiable by special reasons. In this context, features of structured areas of life can also be constructional or other barriers.

The Federal Disability Equality Act defines accessibility as follows:

"**Accessibility has been achieved when people with disabilities can access and use buildings and other structures, means of transport, technical devices, information processing systems and other designed areas of life in the usual way without particular difficulties and without assistance from others.**"

### 3.4.1.3. Harassment

If somebody is harassed due to a disability, this is also considered to be discrimination.
Overview of the horizontal issue of disability in Austria

The harassment must, however, be considerable in order to be defined as discrimination in the meaning of the respective law. The law refers to undesired, uncalled-for or repulsive behaviour against the affected person, with the aim or effect of violating the dignity of the affected person and creating an intimidating, hostile, undignified, offensive or humiliating environment for the affected person.

An important factor in relation to harassment, however, is that there has to be a legal relationship between the harasser and the harassed person.

Instructing another person to discriminate is also unlawful.

3.4.2. Areas covered by protection against discrimination
Protection against discrimination applies to the entire administrative apparatus of the federal government including the self-governing bodies established according to federal law (e.g. social insurance institutions or the Public Employment Service [AMS]), but also to all private entities which offer goods and services to the public.

This includes, for example, all so-called consumer transactions (shopping, ordering goods from mail order companies, cafes, bars and restaurants, the use of services such as legal advice or health care treatment, etc.) or access to information (e.g. websites, trade fairs and information events, and advisory services).

All of these fields are regulated in the Federal Disability Equality Act.

The Disability Employment Act regulates protection against discrimination in employment relationships (including applications) and also otherwise in the world of work (vocational training, careers advice, access to self-employment).

Here again, the protection of the Disability Employment Act only applies to areas for which the federal government is responsible. For farm workers, for example, or employees of the provinces and local authorities, largely comparable protection against discrimination is provided by the respective provincial laws.

3.4.2.1. In daily life
An essential point of the Federal Disability Equality Act is the inclusion of people with disabilities in society. On the one hand, this relates to discrimination-free access to consumer transactions in connection with publicly offered goods and services. On the other hand, the mere use of goods and services outside the scope of legal transactions, such as obtaining information or the use of free services, are also covered by protection against discrimination. This relates, for example, to shopping in a supermarket, buying a car, going to the cinema, a theatre or a museum (if an admission fee has to be paid), buying a ticket for public transport or taking out an insurance policy.
In addition, it always has to be checked whether the matter is the competence of the federal government, which is not always the case with consumer transactions. A consumer transaction takes place when legal transactions are carried out between somebody for whom the transaction is part of their business and someone to whom this does not apply. Transport contracts with a transport company which is operated by a province or a local authority, for example, are therefore also covered by the ban on discrimination in the Federal Disability Equality Act.

The world of work has to be distinguished from this, as it is subject to the provisions of the Disability Employment Act, which will be described in more detail in the next chapter.

- **Legal action**
  The legal consequence of discrimination established by a court is an entitlement to damages. In addition to any material damage (e.g. if a service cannot be made use of), *immaterial damage*, insult or a ‘personal limitation’ certainly arise due to discrimination. The legal consequence of discriminating, if it has been established in court, is the payment of compensation by the discriminating person.

  In the case of harassmerent, it has also been possible to apply to a court for an *injunction* since 1 January 2018. When considering the evidence, there are special *rules regarding the burden of proof*: the discrimination itself merely has to made credible, whereas the person possibly responsible for the discrimination has to prove that their less favourable treatment was not due to the disability.

- **Reasonability**
  In individual cases, courts will carry out a reasonableness test. Whether a measure is reasonable particularly depends on the cost and effort which would be connected with it, and also on the financial strength of the entity responsible for the barriers (whereby the possibility of taking advantage of public subsidies should be taken into account here), and how much time has passed since 1 January 2006.

  If the creation of full accessibility cannot be reasonably expected, this does not, however, release the entity from its responsibility. In this case there is an obligation, via measures involving reasonable cost and/or effort, to achieve at least a substantial improvement of the situation of people with disabilities which comes as close as possible to equal treatment.

- **Class action**
  If the general interests of people with disabilities are considerably and lastingly impaired, the Austrian National Council of Disabled Persons can initiate a class action. *From 1 January 2018, the Ombudsman for the Disabled and the Association for the Assertion of the Rights of Victims of Discrimination have also been able to exercise this option.* As part of a class action, it can be established that a certain situation or circumstances constitute
Since 1 January 2018, a class action can also be initiated against large companies for an injunction and the elimination of discriminating circumstances.

- Arbitration

However, the purpose of the legal regulation of protection against discrimination is certainly not to trigger a flood of court cases. For this reason, an **obligatory attempt at arbitration at the Sozialministeriumservice** has to be undertaken before alleged discrimination can be taken to court.

Arbitration is intended to achieve an out of court settlement in the interests of all those affected. The proceedings are deliberately **informal** and representation by a lawyer is not required. There are no limitations on using one’s fantasy to find solutions, as long as the solution is not unlawful and assuming both sides agree to it.

Within the framework of this conciliation procedure, the option of free **mediation** by an external mediator who is registered on a list kept by the Sozialministeriumservice is also available. Mediation means that a specially trained neutral person helps the parties to solve the conflict themselves.

### 3.4.2.2. The world of work

The **world of work** covers employment relationships and employment contracts and the remaining world of employment.

In connection with equal treatment law, the following aspects are assigned to the term **employment relationship**:

- its establishment (application, hiring)
- payment (wages and other benefits such as food vouchers)
- voluntary social benefits which do not constitute pay (e.g. company nursery schools)
- training measures in companies
- promotion
- other working conditions (workplace equipment, the organisation of work, etc.)
- its unilateral termination by the employer (redundancy, dismissal, termination of a trial period of employment).

Its scope covers the following forms of training and employment: all employment relationships in the narrower sense (employment contract), apprenticeships and trainee contracts (e.g. internships), all employment and training contracts with the federal government, teleworkers.

Once again, it is important here that the ban on discrimination in the Disability Employment Act only regulates those matters which are the responsibility of the federal government. The employment relationships of workers in agriculture and forestry as defined by the Rural
Labour Act are therefore excluded from protection against discrimination, as are employment relationships with a province or a local authority.

Here again: a disability does not have to be formally established; it only needs to be credibly proven that less favourable treatment took place due to the disability.

**Protection against discriminatory dismissal** should not be confused with **increased protection against dismissal** for disabled persons receiving special support.

The following persons are protected against discrimination: people with disabilities, persons close to them, witnesses and informants in relation to the assertion of discrimination.

Direct or indirect discrimination is particularly prohibited in working life:

- when an employment relationship is established;
- when wages are being determined;
- when granting voluntary social benefits which do not constitute pay;
- with regard to measures concerning training, further training and retraining;
- in the case of career advancement, particularly promotion;
- with regard to other employment conditions;
- when an employment relationship is terminated;
- in access to career advice, vocational training, further training and retraining outside an employment relationship;
- in the membership of and activity within an employees’- or employers’ organisation or an organisation whose members belong to a specific professional group, including taking advantage of the benefits of such organisations;
- in the conditions for the access to self-employed work.

Protection against discrimination also applies to **harassment** due to a disability. In this case, proceedings can be initiated against the harassing person as well as against an employer who has not stopped the harassment.

An **instruction given to someone to discriminate** against a person is also discrimination as defined by disability equality legislation.

The comparison table below clarifies the differences between statutory protection against discrimination and statutory protection against dismissal:
Table 1: Comparison

<table>
<thead>
<tr>
<th>Protection against discriminatory termination of an employment relationship</th>
<th>Special protection against dismissal for disabled persons receiving special support according to Section 8 Disability Employment Act</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applies to every disabled employee (and also to family members of people with disabilities)</td>
<td>Only applies to disabled persons receiving special support according to the Disability Employment Act</td>
</tr>
<tr>
<td>Only applies if termination takes place due to the disability</td>
<td>Applies to all reasons for termination</td>
</tr>
<tr>
<td>Applies from the very beginning</td>
<td>Applies to new employment relationships only after four years have passed</td>
</tr>
<tr>
<td>Applies to every termination of an employment relationship by the employer.</td>
<td>Only applies to termination (unjustified dismissal can, however, also be contested in court).</td>
</tr>
</tbody>
</table>

Termination can be contested in court by the employee Before this, arbitration takes place at the Sozialministeriumservice

The employer must apply to the Disabled Persons Committee for its agreement to the termination. The latter makes an official decision on whether termination is permissible.

If the reasons for termination are of an operational nature, it must be established whether redundancy would cause more social hardship to the affected person than to another employee. If so, another person has to be made redundant.

In order to assess whether the termination is discriminatory, it needs to be clarified whether the affected person was less favourably treated than a (real or fictitious) other person.

Source: Federal Ministry of Labour, Social Affairs and Consumer Protection

3.5. **The Disability Ombudsman**

In an amendment to the Federal Disability Act effective from 2006, the position of an Ombudsman for Equal Treatment Issues for People with Disabilities was created (Disability Ombudsman). The Disability Ombudsman is responsible for providing advice and support to people who feel discriminated against in the meaning of the Disability Equality Act or in the
meaning of the prohibition of discrimination in the Disability Employment Act. To this end, he/she can hold consultations throughout Austria. The Disability Ombudsman is **independent** and not subject to directives in his/her activity.

In addition, he/she can carry out investigations on the issue of discrimination of people with disabilities, publish reports and make recommendations on all matters related to the discrimination of people with disabilities. Cooperation and networking with the most important actors in the field of the equality of people with disabilities as well as public relations – particularly with regard to raising awareness for protection against discrimination and the equal treatment of people with disabilities – also form part of his or her job.

The Disability Ombudsman is a member of the Federal Disability Advisory Board, which advises the Minister of Labour, Social Affairs and Consumer Protection on all important issues concerning people with disabilities.

The Ombudsman holds public consultation days together with his/her staff, has to present an annual report on his/her work to the Minister of Social Affairs, and also give an oral report to the Federal Disability Advisory Board.

The Disability Ombudsman can also initiate class actions in line with the Federal Disability Equality Act.

### 3.6. Implementation of the UN Convention on the Rights of Persons with Disabilities

The United Nations Convention on the Rights of Persons with Disabilities (UN Disability Rights Convention) is an international treaty which obliges signatory states to promote, protect and guarantee the human rights of people with disabilities.

The UN Disability Rights Convention has been in force since 26 October 2008. It has to be taken into account by the federal government, the provinces and local authorities when enacting and enforcing legislation (administration and judicature).

The Ministry of Social Affairs was designated as the state agency bearing responsibility for the coordination of this issue at a federal level. In the provinces, these functions are fulfilled by the offices of the provincial governments.

#### 3.6.1. Monitoring Committee ([www.monitoringausschuss.at](http://www.monitoringausschuss.at))

Austria ratified the UN Convention on the Rights of Persons with Disabilities in 2008. On this basis of this Convention and an amendment to the Federal Disability Act, the Monitoring Committee was created for the promotion, protection and monitoring of the implementation of the Convention. The independent Monitoring Committee supervises adherence to the UN Disability Rights Convention on issues which are the responsibility of
the federation in terms of legislation and execution. In this field it also accepts individual complaints; however, it does not have the role of an ombudsman, but rather takes up individual cases in order to demonstrate general omissions or irregularities.

The Monitoring Committee makes recommendations and statements related to the rights of people with disabilities in connection with matters touched upon in the Convention. In individual cases it can obtain statements from administrative bodies and regularly reports to the Minister of Social Affairs and the Federal Disability Advisory Board on its consultations. The Chairperson of the Monitoring Committee is a member of the Federal Disability Advisory Board.

The provinces have established monitoring offices within the framework of their areas of competence.

3.6.2. Ombudsman’s Office

With the OPCAT\textsuperscript{1} implementing act of 2012, the Ombudsman’s Office was also given the mandate to act as an independent authority for the prevention of exploitation, violence and abuse in accordance with Art. 16 para 3 of the UN Convention on Disability Rights. To this end, commissions were established which efficiently monitor all facilities and programmes for people with disabilities, such as facilities for disabled persons and long-term psychosocial care facilities (thus providing a mechanism for the prevention of violence). A Human Rights Advisory Board was set up by the Ombudsman’s Office as an advisory body.

3.6.3. National Action Plan on Disability 2012-2020

On 24 July 2012 the National Action Plan on Disability 2012-2020 (NAP Disability) was adopted by the Ministerial Council. It constitutes the federal government’s long-term strategy for the implementation of the UN Convention on Disability Rights.

The NAP Disability contains 250 measures divided up into eight main focuses which have to be realised by 2020. These eight main focuses are: disability policy, protection against discrimination, accessibility, education, employment, an independent life, health and rehabilitation, raising awareness and providing information.

The Ministry of Social Affairs formulated the measures of the NAP Disability in cooperation with all other ministries as the result of a participative process with civil society – above all with the organisations of people with disabilities – and with the social partners.

Since October 2012, there has been an advisory group for the NAP Disability at the Ministry of Social Affairs. It includes representatives of all the ministries, the provinces, the social

\textsuperscript{1} \textit{Optional Protocol to the Convention against Torture}
partners, the scientific community, the organisations of people with disabilities, the Monitoring Committee and the Federal Disability Ombudsman.

In 2016, the Ministry of Social Affairs presented the first interim assessment for the National Action Plan on Disability for the years 2012-2015, which illustrates the degree to which individual measures have been implemented. The interim assessment also includes 15 new measures, of which 13 have already been realized.

At the end of 2017, 62.4% of the 250 measures had already been realized, another 32% have been partially implemented or are being prepared. Only in the case of 5.6% of the measures have no steps been taken yet towards implementation.

The NAP 2012-2020 is available in the downloads area as a PDF in German or English as well as in an easy read version.

(www.sozialministerium.at/site/Service_Medien/Infomaterial/Downloads/)
4. LONG-TERM CARE

4.1. Long-term care benefit

Around 459,000 persons in Austria are entitled to long-term care benefit. Due to demographic developments, the need for care has been transformed from being a rather marginal phenomenon into a challenge for the whole of society. As one of the first countries, Austria faced up to this issue and created – after comprehensive preparation work – a standardised long-term care system in 1993.

Long-term care benefit is an earmarked benefit which is independent of a person’s income and is solely for the purpose of covering care-related additional expenditure, and is therefore not intended to provide a general increase in income. As the actual cost of care in most cases exceed the long-term care benefit paid, long-term care benefit can be seen as a lump-sum contribution towards the costs of necessary care. It enables people in need of care to enjoy a certain level of independence and to remain at home for longer.

The deciding factor for the level of long-term care benefit is solely the specific need for care and assistance. The constant need for care and assistance due to physical, mental/psychological or sensory disability must continue for at least six months and amount to at least 65 hours per month. The granting of long-term care benefit is independent of the cause of the need for care, income and assets as well as the age of those affected. Even though long-term care benefit can be paid from birth, most of the beneficiaries are old people.

If the required conditions are fulfilled, there is a legal entitlement to it. The rejection of an application can be appealed at the Labour and Social Court.

Long-term care benefit is paid according to seven different stages. The decisive factor is the respective amount of care required in hours per month (see the following overview).

The extraordinary amount of care of Stage 5 is given particularly when a carer has to be available on an on-call basis day and night, but where their constant presence or checking on the person in relatively short intervals is not required. Checking on the patient at least once during the night must be necessary. Or more than five care units are necessary, one of which is during the night (between 10 pm and 6 am).
Table 2: Long-term care benefit – overview

<table>
<thead>
<tr>
<th>Stage</th>
<th>Care requirements per month in hours</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage 1</td>
<td>More than 65 hours</td>
<td>€ 157.30</td>
</tr>
<tr>
<td>Stage 2</td>
<td>More than 95 hours</td>
<td>€ 290.00</td>
</tr>
<tr>
<td>Stage 3</td>
<td>More than 120 hours</td>
<td>€ 451.80</td>
</tr>
<tr>
<td>Stage 4</td>
<td>More than 160 hours</td>
<td>€ 677.60</td>
</tr>
<tr>
<td>Stage 5</td>
<td>More than 180 hours and a exceptionally high level of care required</td>
<td>€ 920.30</td>
</tr>
<tr>
<td>Stage 6</td>
<td>More than 180 hours, if care measures which cannot be coordinated in terms of time regularly have to be provided during the day and the night; or the constant presence of a carer is required because the probability of the person hurting themselves or others is high.</td>
<td>€ 1285.20</td>
</tr>
<tr>
<td>Stage 7</td>
<td>More than 180 hours, if no goal-directed movements of the person’s four extremities with functional implementation are possible; or there is a comparable situation.</td>
<td>€ 1688.90</td>
</tr>
</tbody>
</table>

Source: Federal Ministry of Labours, Social Affairs and Consumer Protection

Classification as a Stage 6 case is made when a care plan made in advance cannot be adhered and the care measures must be provided immediately. If a carer has to be present constantly, for example to avoid aggressive behaviour or actions, long-term care benefit in this amount is also due.

Stage 7 requires that a person can make no targeted movements with their four extremities. A comparable situation is given, for example, when the person requiring care is dependent on essential technical equipment (e.g. breathing apparatus).

Further details of the assessment of the need for care are governed by the regulations on staging in the Federal Long-Term Care Benefit Act. These also contain definitions of care and assistance and the time allotted to different activities, such as getting someone dressed, personal hygiene, the preparation and consumption of meals, and helping them move around.

Separate classification regulations have been laid down for the assessment of the need for care of children and young people up to the age of 15.

The basis for decisions on long-term care benefit is a report by a medical officer. Qualified nurses can also act as experts for the assessment of increases in long-term care benefit if at least Stage 3 with more than 120 hours of care needed was awarded in the initial assessment. The assessments are usually carried out as home visits. The person in need of
care can also request to have a person they trust (e.g. a carer) attend and be heard at the assessment, who can provide information on the specific situation with regard to care.

The special needs of people with mental and physical disabilities are taken into account in the assessment regulations in that providing instructions and supervising are put on a level with care and assistance, and by the fact that time is allocated for a motivational conversation. In 2009, fixed amounts as hardship supplements were included in the regulations. This is intended to take factors which make care more difficult into account:

- for severely disabled children and young people up the age of seven (50 hours a month) and for those up to the age of 15 (75 hours a month)
- for persons over the aged 15 and over with severe mental or physical disabilities and dementia, the hardship allowance is 25 hours per month.

Individual groups have a typical need for care which is largely the same due to a specific disability. These disabilities are therefore assigned to certain stages of long-term care benefit.

4.1.1. Visual disabilities:
- persons with severely impaired vision: Stage 3
- blind persons: Stage 4
- deaf and blind persons: Stage 5

4.1.2. Wheelchair users:
are defined as someone who is at least 14 and is dependent on a wheelchair due to paraplegia, a double leg amputation, genetic muscular dystrophy, multiple sclerosis or infantile cerebral palsy if the person can operate the wheelchair themselves, regardless of whether it is a mechanical or electric wheelchair, and can overcome their limited mobility with this aid and move around independently, they are considered to be wheelchair users as defined by the law.

- Wheelchair users without stool/urinary incontinence or bladder/bowel paralysis and without restrictions in their upper extremities: Stage 3
- Wheelchair users with stool/urinary incontinence or bladder/bowel paralysis and without restrictions in their upper extremities: Stage 4
- Wheelchair users with a functional limitation of the upper extremities (getting into or out the wheelchair independently is not possible): Stage 5

4.2. Long-term care fund
The long-term care fund created in 2011 supports the federal government and the provinces and local authorities in the field of long-term care in order to be able to counteract the cost pressure which is particularly resulting from demographic trends.
Via the long-term care fund, the federal government makes an important contribution towards the costs of safeguarding and needs-based extension and development of the long-term care services offered by the provinces and local authorities. For example, the long-term care fund provided earmarked subsidies of a total of €3.249 billion for the years 2011-2021.

The funding, which is divided up among the provinces according to their resident populations, can be used for the following long-term care programmes:

- mobile support and care services (also hospice and palliative care)
- inpatient support and care services
- outpatient day care
- short-term care in inpatient settings
- case and care management
- alternative housing forms
- accompanying people for several hours a day and services to ease the burden on family members.

The Long-term Care Fund Act lays down that the earmarked subsidies the fund provides are primarily for the development and safeguarding of mobile care services. This is intended to achieve a steering effect which takes into account the need for care services and thus enables the persons affected by a need for care or a disability to live independent lives as defined by the UN Disability Rights Convention.

Alongside financing of the safeguarding, extension and development of the already existing services, the financing of innovative models and projects as well as quality assurance measures will also increasingly be promoted in order to be able to meet future requirements and new demands.

In addition, steering elements were included in the Long-term Care Fund Act and an expenditure trajectory for a controlled increase in expenditure in the field of long-term care was introduced following the example of the Health Care Reform. This is designed to lead to a harmonisation with regard to the range of services offered in the provinces.

For the extension of hospice and palliative care offers, an additional €18 million per year was earmarked for the duration of the fiscal equalisation period 2017-2021. The plan is to finance this via the federal government, the provinces and the social insurance institutions each contributing a third.

4.3. **Hospice and Palliative Forum**

On the basis of the recommendations adopted in 2015 by the commission of inquiry on the issue of “Dignity at the End of Life”, a Hospice and Palliative Forum was established for a period of five years.
Its objectives and tasks particularly include:

- the realisation of a hospice- and palliative care staged plan via the updating of cost estimates;
- the promotion of cooperation and the exchange of information and experiences between specialised hospice and palliative facilities and the existing facilities in the health care and social systems;
- the promotion of the coordinated involvement of volunteers in hospice and palliative care; and
- cooperation in the development of regular funding for hospice and palliative facilities.

4.4. Support for caregiving relatives

The vast majority of those affected by a need for care are looked after at home, above all by close relatives. Strengthening and supporting this is one of the goals of the Austrian long-term care strategy:

- Persons who care for a close family member from care Stage 3 and above and have therefore had to give up or reduce their work can have their pension insurance contributions paid free of charge. The contributions are paid in their entirety by the federal government.
- People who provide most of the care required by a disabled child living at home, and for which increased family allowance is drawn, can also opt to have their pension insurance contributions paid free of charge. This is possible until the disabled child reaches the age of 40.
- Family members providing most of the care for an insured person who is entitled to long-term care benefit at least at Stage 3 are co-insured with this person in terms of health insurance.
- If they are in need of social protection, caregiving relatives can under certain circumstances insure themselves if they cannot work because they are caring for a close relative who is entitled to long-term care benefit at Stage 3 and above.
- Close family members who have been the main carer of the person in need of care for at least a year and are prevented from continuing the care due to illness, a holiday or other important reasons, can also receive support towards the costs for a replacement carer.
- For purposes of quality assurance, qualified nurses carry out home visits of recipients of long-term care benefit. The idea is to provide information and practical advice. There is also the opportunity to request a home visit. Caregiving relatives who feel stressed can also take advantage of a stress management consultation with a psychologist.
4.5. **Care leave benefit**

Since 1 January 2014, employees (of private companies and organisations, public sector employees and the unemployed) have the opportunity to take full care leave (unpaid) or part-time care leave (whereby they lose part of their wages). Certain conditions have to be adhered to.

In addition, employees have the opportunity to change their working hours or to take leave from their employment for a certain period of time in order to look after dying relatives or to care of their seriously-ill children.

Since 1 January 2014, in order to provide financial support for caregivers in the case of care leave, part-time leave for caregivers or family hospice leave or part-time family hospice leave, there is a legal entitlement to care leave benefit under certain conditions.

This applies to persons who:

- have agreed care leave or part-time care leave with their employer;
- are taking family hospice leave or family hospice part-time leave to care for a dying close family member or to look after severely ill children; and
- have stopped claiming unemployment benefit or unemployment assistance or have de-registered from health and pension insurance according to Section 34 of the Unemployment Insurance Act.

Care leave benefit can principally be paid for up to six months per family member in need of care (provided that at least two close family members take care leave or part-time leave for caregivers).

If the care stage is increased, a new care leave or part-time care leave agreement can be made one time only for the same relative for up to a maximum of twelve months.

If the conditions for family hospice leave are fulfilled, there is an entitlement to care leave benefit for the duration of the measure as well as to a supplement from the family hospice hardship fund of the Federal Ministry of Families and Youth.

The basic amount of care leave benefit is dependent on income and is principally paid at the same level as unemployment benefit (55% of the daily net income). As a person’s working hours are reduced and their income falls in the case of part-time care leave or part-time family hospice leave, care leave benefit is paid on a pro-rata basis.

The contact point for this benefit is the **Sozialministeriumservice**.
4.6. 24-hour care

The Home Care Act (Hausbetreuungsgesetz) and the Industrial Code form the basis under labour and commercial legislation for lawful care of up to 24 hours a day in private households in the form of an employment relationship or self-employed work.

In order to support 24-hour care, the Ministry of Social Affairs has developed a subsidy model to support care services for persons in need of care and support. It is jointly financed by the federal government and the provinces (in a ratio of 60:40).

The subsidy can amount to up to € 1,100 per month for employment relationships and up to € 550 if the care is provided by a self-employed carer. There is an income limit regarding the person in need of care amounting to € 2,500 net per month, whereby long-term care benefit, special payments, family allowance, child care benefit and housing benefits are not taken into account. The maximum income limit increases by € 400 for every family member who is dependent or entitled to maintenance, and by € 600 for family members who are disabled and entitled to maintenance. Any assets which the person in need possesses are not of relevance.

Otherwise, the following conditions apply to the subsidies:

- a support relationship according to the provisions of the Home Support Act is given
- the person providing care is registered as being resident in the household of the person in need of care
- the carer is fully insured with regard to the provisions of social insurance law
- the minimum weekly amount of care provided amounts to 48 hours
- there is a necessity for 24-hour care
- the person requiring care has to be entitled to long-term care benefit at least at Stage 3.

Care can take the legal form of an employment relationship with the person in need of care or a family member. A contract between either of these persons and a non-profit organisation offering care services is also possible. The path most frequently chosen is to use a self-employed carer. In order to ensure that the care services are adequate, it has been laid down that the carer:

- has to have undergone theoretical training equivalent to that of a home help; or
- has properly carried out the care of the person applying for subsidies for at least six months; or
- is authorised to carry out specific nursing or medical work.

One of the three quality criteria has to be fulfilled in order to receive financial support for 24 hour care.
4.7. Social services

Social services are offered by independent welfare organisations, provinces and local authorities. The following professions are among those who work in these fields: qualified nurses, carers, home helps, and specialised and qualified social workers in the fields of work with elderly people, families and people with disabilities. Around four fifths of the personnel are women. The types and range of social services offered differ from province to province.

4.7.1. Mobile services

Mobile services include, among others, nursing care at home, home helps, family helps, meals on wheels, visiting services or advisory services.

The use of mobile services rose from 15.3 to around 16.4 million hours per year in the years 2011-2015. The number of persons supported by mobile services in 2016 was around 147,037 according to figures of the provinces.

4.7.2. Semi-impatient services

Geriatric day centres or day care facilities are becoming increasingly significant in the Austrian care and support sector. In 2016, a total of 7,486 people were looked after in semi-impatient facilities.

4.7.3. Inpatient services

In 2016 around 74,610 persons were cared for in residential care homes and nursing homes.

4.7.4. Additional social services of the provinces

In the provinces, intermediate services such as offers related to short-term care (e.g. when a person from the family is unable to provide care), alternative housing forms as well as case and care management (for example for advice and coordination for the transition from hospital to a nursing home) are provided.

On its website www.infoservice.sozialministerium.at, free and customer-friendly information is provided on the nationwide offers of mobile and inpatient service as well as additional facilities in the social sector.

4.7.5. Social work professions

Thanks to an agreement between the federal government on social work professions in 2005, they have been made considerably more attractive. The main points were the creation of a modular training system and standardised training standards in Austria, the harmonisation of occupational profiles and job titles, greater permeability between the individual occupational groups, the standardised recognition of training programmes and social work professions, and quality improvements for the clients themselves.
4.8. Young carers

In the study “Children and Young People as Caregiving Relatives – an Insight into the Situation of Current and Former Caregiving Children in Austria” commissioned by Parliament in 2012, the care situation of children and young people was for the first time surveyed by the department of nursing science at the University of Vienna.

The most important results were:

- 42,700 children and young people aged from 5 to 18 are affected.
- Their average age is 12.5 years.
- 70% of them are girls.
- Migration has no influence on the issue of caregiving children.
- Young carers (YC) are directly involved in the care of the sick person in the form of physical and emotional support as well as helping with housework and looking after their siblings.
- Just under a quarter of YC help to an over-average extent in all three areas, and 14% stated that they provide support for five or more hours a day.
- Negative effects often express themselves physically, socially or mentally (e.g. lower back pain, excessive controlling behaviour, feelings of guilt, fear of loss etc.).
- Positive effects observed were increased equanimity in relation to problems and a feeling of being able to cope with life, as well as an ability to empathise and a feeling of having grown up early.

In 2014, further research was commissioned on the issue of “Concept development and planning of family-oriented support measures for children and young people as caregiving relatives”. The goal was to provide interested organisations and provinces with a framework for the realisation of local support programmes.

In this context, the most urgent task of the Ministry of Social Affairs is the identification of YC and raising the awareness of those affected as well as the relevant professions. This is being realised via a range of cooperation programmes with various institutions (e.g. nationwide poster campaigns in schools and supermarkets, and within the framework of discharge management in hospitals).

Both studies have been published in German in the “Sozialpolitischen Studienreihe” Band 19 - see https://broschuerenservice.sozialministerium.at.

4.9. Dementia strategy

The Ministries of Health and Social Affairs commissioned Gesundheit Österreich GesmbH with drawing up a dementia strategy. The process was cross-sectoral and involved all relevant partners (stakeholders) – the federal government, the provinces, social insurance
Institutions, professional experts, those affected, and — in the interests of participation — the broader public.

After the incorporation of all the suggestions from the online survey and a broadly-based evaluation procedure for the draft strategy, the final report was presented to the public by both of the ministers involved. Overall, seven targets and 21 related recommendations for action were drawn up.

The seven targets are as follows:

Target 1: Ensuring the participation and self-determination of those affected;

Target 2: Extending the provision of information in a broadly-based and target group-specific way;

Target 3: Strengthening knowledge and competences;

Target 4: Creating standardized framework conditions;

Target 5: Designing and ensuring suitable care programmes for dementia sufferers;

Target 6: Further developing coordination and cooperation which is centered around those affected;

Target 7: Quality assurance and improvement through research.

The dementia strategy is intended to have the following effects: For persons suffering from dementia:

- that they can live in an environment which ensures participation and which promotes self-determination to the greatest possible degree;
- that they are well-informed about support programmes and can also make use of them;
- that they can rely on being professionally cared for and supported by optimally trained and qualified people;
- that they encounter the best possible mobile, semi-inpatient and inpatient forms of care which enable integrated nationwide care provision, and that they can choose from a wide range of offers;
- that if they are in hospital they can be confident that their own needs (in relation to dementia) will be taken into consideration; and
- that they can find low-threshold information points throughout the country close to their home providing information, advice, early detection, diagnosis and support in which multi-professional teams plan individual measures jointly with people and coordinate the necessary services.
Overview of the horizontal issue of disability in Austria

For family members and partners:

- that they can live in an environment which makes the support of family members suffering from dementia possible and easier;
- that they are well-informed about support programmes;
- that they are sufficiently trained, advised and supported on the issue of support for family members with dementia;
- that they can choose from a wide range of offers for family members with dementia in order to obtain support for their own care efforts; and
- that they can find low-threshold information points throughout the country close to their home providing information, advice, early detection, diagnosis and support in which multi-professional teams plan individual measures jointly with people and coordinate the necessary services.

For the population as a whole:

- that a greater awareness of the needs of people with dementia is developed and that people live in a community in which the participation of everyone is a reality;
- that they receive information about dementia which reduces their fears and thus makes it easier to deal with; and
- that the required sensitivity for a positive approach to dementia as an illness is developed.

For specific occupational groups, such as local authority service providers, authorities, the police, emergency services or pharmacies:

- that they receive specific information for their own work which makes it possible for them to understand people with dementia better and to thus react to their needs.

For health care and social professions and providers of health care and social services:

- that they are sufficiently trained in working with people with dementia and able to undergo ongoing initial and further training; and
- that they have access to sufficient amounts of high quality data and research findings when further developing their programmes.

For (political) decision makers:

- that they are in an ongoing exchange with experts and other decision-makers in order to be able to create and further develop coordinated structures and general conditions for people with dementia at federal and provincial levels.
In order to implement the individual recommendations, the Dementia Platform has been established which has invited all stakeholders to come up with ideas jointly with all those responsible in the health care and social sectors, researchers and those affected themselves. The goal of the website www.demenzstrategie.at is to break down taboos related to dementia, to educate and to promote early diagnosis.

The first point of contact for issues related to care and disability are the provincial offices of the Sozialministeriumservice.
5. SOCIAL COMPENSATION

State social compensation is laid down in a series of so-called social compensation laws. These apply in cases where someone has been damaged as a result of actions or measures taken by the state (e.g. during military service) or in connection with a particular responsibility of the state (such as domestic security or health issues).

The legislation on social compensation primarily provides financial benefits and rehabilitation programmes. The legislation also lays down different benefits for individual groups of persons.

5.1. War victims

Austrian citizens who carried out military service for the Republic of Austria, the Austro-Hungarian monarchy, or after 13 March 1938 for the former German army (Wehrmacht) and thus suffered damage to their health, are considered war victims according to the War Victims’ Welfare Act. Civilians who innocently suffer damage to their health due to military action or the effect of weapons also belong to this group of persons. There are also benefits available to the surviving dependants of such persons.

Benefits:

- occupational and social rehabilitation measures
- therapeutic and orthopaedic care
- basic pensions, additional pensions and other cash benefits for affected persons
- pensions for surviving dependants.

Austrian citizens who became prisoners of war during the First or Second World War, or who – during the Second World War or the time in which Austria was occupied by the Allies – were arrested and detained by a foreign power for political or military reasons, or who – as politically persecuted persons as defined by the Victims’ Welfare Act – were staying outside the territory of the Republic of Austria and were – for political or military reasons – arrested and, after the start of the Second World War, detained by a foreign power, can receive a benefit according to the Act on Compensation for Prisoners of War as long as their imprisonment (detention) lasted for at least three months.

5.2. Persons damaged in conjunction with the armed forces

Persons who suffered damage to their health due to military service or training in the Austrian Army have received compensation according to the Army Compensation Act since 1 July 2016. Before this date, compensation was awarded according to the Army Welfare Act. There are also benefits available to the surviving dependants of such persons.
According to the Army Compensation Act, benefits from work accident insurance are due on the basis of the General Social Insurance Act (Allgemeines Sozialversicherungsgesetz). See point 7.3.2 – accident insurance. Entitlements to benefits awarded according to the Army Welfare Act remain valid.

5.3. **Victims of crime**

Austrian citizens, EU and EEA citizens as well as third country citizens (in the case of an offence committed in Austria) are compensated according to the [Victims of Crime Act](https://sozialministerium.at) if they have suffered physical harm or damage to their health due to a crime.

**Benefits:**

- medical, occupational and social rehabilitation (if they are not covered by social insurance)
- therapeutic care (the costs of psychotherapy), crisis intervention and orthopaedic care replacement of their lost earnings or lost maintenance and other cash benefits (lump-sum compensation).

5.4. **Victims of political persecution**

The victims of the struggle for a free, democratic Austria and the victims of political persecution from the dissolution of Parliament in 1933 until liberation in 1945 receive benefits according to the [Victims’ Welfare Act](https://sozialministerium.at):

- pensions, medical care measures and other preferential treatment.

5.5. **Victims of harm caused by vaccinations**

Persons who suffered damage to their health due to a vaccination which was mandatory until 1980 (e.g. against polio, tetanus or rubella (German measles)), or due to a vaccination mentioned in the mother-child pass, are compensated according to the [Vaccination Damage Act](https://sozialministerium.at).

**Benefits:**

- rehabilitation measures
- medical and orthopaedic care
- care and treatment in hospitals and sanatoriums/spas
- disability pensions and other cash benefits.
5.6. **Contergan (thalidomide) victims**

Persons who received a one-off payment from the Federal Ministry of Health due to damage by Contergan (thalidomide) and did not receive benefits according to the German Contergan Foundation Act, have been entitled to a pension benefit according to the Contergan Assistance Act since 1 July 2015. The benefit is orientated towards the War Victims Welfare Act and is equivalent to a disability pension with a reduction of earning capacity of 80%.

5.7. **Victims of violence or abuse in children’s homes**

The Act on pensions for victims of violence or abuse in children’s homes came into effect on 1 July 2017. Victims who suffered violence in the period between 10 May 1945 and 31 December 1999 in federal, provincial and church-run homes, or with foster families, and who have received a lump sum as compensation, or who were not able to receive such a payment for particular reasons, are granted a pension. The pension is due from the time the person reaches normal retirement age or from the time when they receive their own pension.
6. THE SOZIALMINISTERIUMSERVICE
(www.sozialministeriumservice.at)

The Sozialministeriumservice with its nine provincial offices in the capitals of the Länder is the central point of contact of the federal government for people with disabilities, illnesses or other disadvantages. The Sozialministeriumservice is also there for companies which already employ disadvantaged persons or would like to do so in the future.

The main objective of the Sozialministeriumservice is the integration of people with disabilities into working life. At the forefront is the creation of employment opportunities for these persons, a task which is carried out in cooperation with its partners in the provinces (the Public Employment Service, provincial governments and private organisations).

On the basis of strategic guidelines from the Ministry of Social Affairs which are summarised in the nationwide labour market policy programme for people with disabilities, the Sozialministeriumservice draws up regional labour market policy programmes in cooperation with regional partners.

In order to manage and implement them in the regions and to achieve the labour market policy objectives for people with disabilities, the Sozialministeriumservice has the following tasks at a provincial level:

- to take, together with all relevant partners (funding agencies, interest groups, project organisers and businesses) the measures which are necessary in individual cases for vocational rehabilitation and integration;
- to ensure that all administrative and subsidy-related procedures are concluded quickly and simply via administrative agreements or other suitable measures; and
- by means of labour market policy strategies, to create joint subsidy strategies and priorities which correspond to the regional labour market situation, the structure of companies, the employment situation of people with disabilities and the existing offers.

To do so, existing networks and coordination structures should be used in the best possible way, or established if required.

In this way, the Sozialministeriumservice has, since 2012, offered a networked range of support measures for people with disabilities and other disadvantaged groups which are designed to ensure and maintain paid work in the regular labour market. In the Occupational Assistance Network (NEBA), measures such as youth coaching, production schools, vocational training assistance, work assistance and job coaching are offered together with project organisers, especially for the target group of young people with disabilities in the transition phase from school to work.
Overview of the horizontal issue of disability in Austria

Youth coaching and production schools are also essential elements of the mandatory training adopted in July 2016 (AusBildung bis 18 - Training until 18).

Since 2013, the Sozialministeriumservice has coordinated the nationwide programme fit2work. This offers free information and advice for persons whose job is endangered due to health problems or who, for these reasons, have difficulty finding work (see Chapter 3.1.7 Prevention Management).

In the field of the social inclusion of people with disabilities, the Sozialministeriumservice issues disability passes, and since 1 January 2014 has also been responsible for the issue of parking permits according to Section 29b of the Road Traffic Regulations (see Chapters 3.2.1 Disability Pass and 3.2.2 Parking Permit).

In addition, the Sozialministeriumservice has developed into a central assessment centre. It now draws up a range of expertises on topics such as eligibility for increased family allowance or the personal disability allowance in accordance with the 1988 Income Tax Act. In this role the Sozialministeriumservice is supported in the fields of medicine, vocational issues and work psychology by experts who apply occupationally-specific specialist knowledge in the integration of people with disabilities into employment and also use psycho-diagnostic procedures to assess performance and resources.

As of 1 January 2016 the Sozialministeriumservice was also entrusted with an additional important task in the form of the implementation of the Federal Disability Equality legislation.

The traditional responsibilities of the Sozialministeriumservice also include the welfare of war victims, victims of political persecution, persons who have suffered damage due to vaccinations, and victims of crime (see Chapter 5 Social Compensation).

In the field of 24 hour care and support for caregiving relatives, the Sozialministeriumservice provides financial allowances. Since 1 January 2014 the Sozialministeriumservice has also been responsible for care leave benefit (for more details see Chapter 4 Long-term Care).

On all these issues, the staff of the Sozialministeriumservice offer advice and support as a competence centre for disability issues. They provide information on the range of services of the Sozialministeriumservice and on the currently applicable rules, or refer their clients to other competent organisations if necessary. The first point of contact is the open reception area which is designed on the basis of the 'one desk principle' to reduce people’s inhibitions regarding public authorities.
7. INTERFACES

7.1. Other ministries
The Austrian Ministry of Social Affairs is more or less automatically perceived by the public as the ministry responsible for all matters related to people with disabilities. This is, however, not really the case, as this is a horizontal issue as was already explained in the introduction. It therefore has to be repeatedly pointed out to the other ministries – due to the policy of disability mainstreaming – that they have their own responsibility in this matter. Austria's ratification of the UN Disability Rights Convention has had a positive effect on the dialogue with other ministries. A specific example of this is the National Action Plan for People with Disabilities 2012-2020, which affects all of the fields of competence of the federal government.

7.1.1. School education
Apart from the fact that bringing children up to practise inclusion should begin at nursery school, the first key date is the 1 September following a child's sixth birthday. On this day, compulsory school begins.

If there are doubts about whether the child is ready for school, there are also more than 200 special education centres which are attached to individual special schools. They are coordination centres which have the task of organising lessons with children with disabilities at mainstream schools in the best possible way. This is carried out by providing resources in terms of personnel and material as well as advice and support for parents and teachers.

In an integration class there are few pupils, and disabled and non-disabled children are taught together using a two-teacher system (one normal teacher and one special needs teacher).

As part of this elementary education, children are jointly given a basic and balanced education in social, emotional, intellectual and physical fields.

For those children who cannot follow the lessons due to a physical or mental disability, forms which take special educational needs into account are offered.

For the transition from primary school to a school at Secondary Stage 1, there is a choice between a special school or an integrated route to a secondary school or the lower stage of a grammar school (AHS).

Due to the high level of acceptance which has been achieved by joint lessons of pupils with and without disabilities in primary school and at secondary schools, more than fifty percent of all pupils with special educational needs have been taught in integrated classes for some years now. In order to also ensure continuous support for children with physical or sensory
Overview of the horizontal issue of disability in Austria

disabilities in vocational secondary schools and colleges and the upper stage of grammar schools (AHS), special legal provisions have been established which enable appropriate deviations from the curriculum and extended special instruction.

In 2011, a participative strategy for the implementation of the UN Convention on Disability Rights in the Austrian school system was initiated. To this end, dialogues, conferences and information and discussion events have been held.

The most important areas of action and measures identified until now relate to:

- the pedagogic and organisational development of schools and lessons;
- the improvement of regional support structures;
- support based on needs and requirements;
- the training of teachers; and
- academic/scientific guidance.

In the form of the ‘inclusive region’ approach, a way to realize this in practice has been developed: from the school year 2015/16, the provinces of Carinthia, Styria and Tyrol have initiated the establishment of 'inclusive model regions'. The drawing up a concept for inclusive model regions is also part of the Styrian Action Plan for the implementation of the UN Disability Rights Convention.

7.1.2. University degrees

Depending on the severity of the disability, students with disabilities receive up to € 5,040 more student allowance each year. Students are entitled to the allowance if they have a disability of at least 50 percent. Persons who receive family allowance have to provide evidence that they receive increased family allowance in such cases. Older students can provide evidence by means of a doctor’s certificate.

For cases of particular hardship, financial support for students is available either as a one-off payment or in the form of a normal grant (e.g. a bridging payment to students with disabilities until they are entitled to student allowance again).

In certain cases, the Sozialministeriumservice can provide a training grant of up to € 771 (figure for 2018). The costs of technical aids which are necessary for the degree programme can also be assumed.

Since the establishment of the institute Integriert Studieren (Integrated Studying) 20 years ago, the conditions for disabled students have gradually been improved. The know-how developed here is passed on in the specially developed university courses Assisting Technologies and Accessible Website Design (www.jku.at/iis/content). The Centre for Distance Learning facilitates participation in education, particularly for people with
disabilities. The needs of students with disabilities are addressed very individually in the distance learning courses.

The Ombudsman's Office for Students, established in 2007, supports students and tries to mediate in issues and problems which arise in everyday student life.

7.1.3. Accessibility

The elimination of barriers is an essential aspect for the equality and inclusion of people with disabilities in society. With the coming into force of the Federal Disability Equality Act (BGStG) on 1 January 2006 and the ratification of the UN Disability Rights Convention in 2008, essential preconditions for this were created.

Drawing up a strategy for the implementation of the UN Disability Rights Convention (National Action Plan for People with Disabilities 2012-2020) is a further important step towards the realisation of the UN Convention. Chapter 3 is dedicated to the issue of accessibility. With a total of 50 measures the aim is to realise the greatest possible degree of accessibility for people with disabilities.

Barriers can also lead to discrimination. To avoid financial hardship, there is a reasonableness test. Material and immaterial compensation are the legal consequences of discrimination (for details see Chapter 3.4.1 Protection against discrimination).

Since 1 January 2006, accessibility has been a right in all areas according to the Federal Disability Equality Act. Federal buildings are excepted from this - accessibility will be realized here via the Stage Plan for Federal Buildings by 31 December 2019 (for further details see Chapter 3.4).

Alongside the field of buildings, barrier-free access to information is another essential aspect. According to the E-government Act, all public websites have to be accessibly designed. It also has to be ensured that their contents are offered in easy read versions and in Austrian sign language.

The trend is towards offering all procedural steps online, from the initial application to its conclusion. E-government not only offers the simplification of many procedures, but above all the opportunity for people to participate to a greater extent. In this way, public participation procedures are made accessible to a broader audience, making involvement in consultation processes for draft legislation possible.

Information is, however, not only accessible via the internet – brochures, studies, reports etc. are of course also available in print. An increasing number of ministries are publishing easy read versions for people with learning disabilities.
Overview of the horizontal issue of disability in Austria

With regard to procedures not related to the new media, the procedural laws include provisions which enable the equal participation of people with disabilities.

To accompany measure no. 44 in the Action Plan (Public relations work on accessibility), the Ministry of Social Affairs has carried out a broadly-based campaign on the issue of accessibility in print media, on television and in social media. In addition, a separate area with FAQs on accessibility with a focus on the expiry of the transitional period on 1 January 2016 has been established at www.oesterreichbarrierefrei.at.

Promotion of accessibility by the Sozialministeriumservice:

In 2018, the Barrier-free Companies campaign began against the background of the general socio-political goal of the creation of accessibility. The campaign is intended to support companies and provide incentives to them to offer their products in a way which is accessible to people with disabilities. Equal participation in public life and the breaking down of barriers are essential elements for a self-determined life of those affected, and also represent an important contribution towards the promotion of the economy. A one-off contribution towards the costs of constructional or non-constructional plans for the realization of accessibility can be granted.

7.1.4. Increased family allowance
The benefit is provided by the Ministry of Finance. The following amounts are paid per month for every child independently of the parents’ income (2018):

- from birth € 114.00
- aged 3 and over € 121.90
- aged 10 and over € 141.50
- aged 19 and over € 162.00.

If there are several children, the total monthly amount of family allowance is increased from the first brother/sister by € 7.10 up to € 52 in the case of seven or more children.

In September, a starting school bonus of € 100 for every child between the ages of 6 and 15 is paid. Payment of the starting school bonus is made together with the payment of family allowance for September.

From 1 January 2017, increased family allowance amounts to € 155.90 per month. It is paid in addition to family allowance. It is paid for as long as the general family allowance is granted, and can also be paid retrospectively for a maximum period of five years from the month of application.

Conditions:
a the degree of disability of the child is at least 50 percent, or
b the child is lastingly incapable of earning its own living.

In order to verify the disability, after application an invitation is sent for an examination by a doctor who is commissioned by the Sozialministeriumservice.

7.1.5. Compensation for tuberculosis sufferers
The Tuberculosis Act was adopted in 1968 and comprehensively updated in 2016. The term tuberculosis was defined and the obligation to report it to the authorities and obtain treatment was redefined. For a long time, it was believed that the illness had been overcome in industrialised countries, but due to migration, increasing poverty and the development of resistance against the medications normally used for its treatment, there has been a gradual increase of cases.

As soon as the illness has been medically confirmed, and as long as equivalent entitlements do not exist towards another health care provider or other legal provisions, the federal government grants the following benefits and services:

- care and treatment in hospitals
- medical assistance and the provision of medicines, orthopaedic aids and other aids
- health-related rehabilitation.

7.2. The provinces (Länder)

7.2.1. Help for people with disabilities
Since issues related to people with disabilities are a typical horizontal issue in Austria, in addition to the special responsibilities of the federal government and the social insurance institutions, the provinces also have competences. It is also their goal to help people with disabilities to lead a life in the community which is as independent as possible. The measures provided to help people with disabilities are carried out by the provincial governments, district commissions or municipal authorities where the benefits have to be applied for. The individual provincial legislation partly contains considerable differences.

The benefits and services from the help for the disabled scheme are subsidiary by nature - this means that the provinces only provide a service or benefit is there is no other possibility to receive the same or a similar benefit or service from the social insurance institutions, the Public Employment Service or the federal government.

Benefits:
- medical aids
- educational aids
7.2.2. **Occupational therapy**

At the interface to the federation, occupational therapy is worthy of a special mention, because it relates to people who – due to the kind and extent of their disabilities – are not (yet) in a position to carry out work in a sheltered workplace or a social enterprise. On the basis of their competence in this field, the provinces offer the opportunity of employment in day care centres and other employment structures.

The focus of the work and activities varies. Alongside workshops with a day-care structure there are also facilities with residential accommodation. By means of specialist care and activities which are designed to suit the person’s individual situation, the idea is to promote and further develop the abilities of these people. Some organisations offer skills training groups to lead people with disabilities towards the labour market.

In day care centres the participants receive pocket money rather than pay. Existing benefits they receive such as family allowance or a pension remain unaffected by this.

**Acceptance** in a facility providing occupational therapy is granted after a hearing with a team of experts consisting of doctors, psychologists, social workers and careers advisors.

7.2.3. **Residential care homes and nursing homes**

If a person’s need for care can no longer be covered by mobile social services, it is possible to move to a *residential care home or nursing home*. Many of these institutions are operated by the provinces.

In order to finance this inpatient care, the person can be required to contribute their income including long-term care benefit, as well as their assets. If these two sources are not sufficient to cover the costs, under certain circumstances a subsidy can be granted according to the Minimum Income Act. In this case, the person being cared for still receives 20 percent of their pension, the special payments and € 45.20 as monthly pocket money from the long-term care benefit.

Residential care homes and nursing homes also offer transitional care (e.g. after a stay in hospital for rehabilitation), short-term care (if caregiving relatives cannot provide care for a certain period of time, e.g. for health- or work-related reasons), or holiday care (to relieve the burden on caregiving relatives).

On a website of the Ministry of Social Affairs, information is provided on care options in residential care homes and nursing homes throughout Austria. This information is updated.
every two years on the basis of information provided by the owners of these homes (www.infoservice.sozialministerium.at).

7.2.4. Minimum income
Disability can also lead to an increased risk of poverty. Minimum income benefits are therefore just as important in providing a livelihood for people with disabilities as for other persons affected by poverty.

The necessary expenditure for food, clothing, personal hygiene, heating and electricity, household items and other personal needs such as reasonable social and cultural participation and accommodation are determined in a binding way in the form of an amount of money set each year. An entitlement to the minimum income is only given if a person does not have sufficient financial security through other means (e.g. income, benefits from social insurance, maintenance, etc.) or assets.

The minimum income is paid twelve times a year and amounts to €863.04 in 2018 for people living alone and €1,294.56 for couples. A share of 25 percent for housing costs is already included in these amounts. The housing costs element can be reduced if the person has no such costs, or lower ones. If needed, however, the housing benefit element can also be increased (as a rule there is no legal entitlement). The minimum standards for children are regulated with amounts which vary according to the province in question.

Persons who have no social health insurance and who receive the minimum income are registered for statutory health insurance by the provinces. In this way these persons receive an e-card.

Principally, a person’s own funds must be used. However, the following income is not counted:

▪ voluntary contributions granted by non-statutory welfare organisations or a third party which supplement the minimum income but to which the recipient has no legal right – unless they reach an extent or duration which would make the minimum income unnecessary (e.g. food vouchers);
▪ benefits provided in accordance with the Family Burdens Equalisation Fund Act (e.g. family allowance), with the exception of those from the family hospice leave hardship fund; and
▪ long-term care benefit or similar benefits (long-term care benefit can, however, be viewed as income in the case of caregiving relatives).

The minimum income is, in the case of persons who are able to work – with a few exceptions – linked to a willingness to work. If the minimum income is claimed but a
reasonable opportunity for work is turned down, the benefit can be reduced by up to 50%, and in exceptional cases completely withdrawn.

People with disabilities are entitled to the minimum income under the same conditions as non-disabled persons, and it is only an option if their material needs cannot be provided for otherwise.

However, the provinces occasionally have their own legislation on ‘aid for the disabled’ which primarily apply to people with disabilities.

**7.2.5. Accessibility**

As the Austrian legislature is divided up into competences of the provinces and the federal government, the latter cannot - purely for competence reasons as already mentioned - legally prescribe building accessibility, for example.

The provinces, which are responsible for construction law, have partly included provisions on accessible building in their building regulations. However, building regulations generally apply only to new buildings and only apply retrospectively to existing buildings if new building work such as conversions or complete refurbishment is carried out on them. In many cases it is understandable that some buildings or parts of them (particularly in the case of historical buildings) are difficult to make accessible (e.g. St. Stephen’s Cathedral in Vienna, or castle ruins).

**7.2.6. Implementation of the UN Convention on the Rights of Persons with Disabilities**

The UN Disability Rights Convention as a treaty under international law has to be implemented by the Republic of Austria in its legislation, judicature and enforcement. This obligation relates to all regional authorities - in other words the federal government, provinces and local authorities.

In their sphere of competence, the provinces have established contact and monitoring points as defined by the UN Disability Rights Convention. As early as 2012, Styria drew up an action plan for the implementation of the UN Convention, and the province of Carinthia presented its staged plan for the implementation of the Convention in December 2016 (for more information on this issue see Chapter 3.6).

**7.3. Social insurance**

To safeguard against the wide range of risks which everyone is exposed to in their life, Austria has a social security system which has been gradually further developed and refined over the decades, and which naturally also applies to people with disabilities. Like everyone else, they can also become ill or unemployed, have an accident or retire.
In order to represent the joint interests of the social insurance institutions, the Federation of Austrian Social Insurance Institutions was created to cover 21 such institutions, which are organised on the basis of professional groups and provinces.

Figure 1: Austrian social insurance – overview

A characteristic element of the system is that it is largely linked to employment – particularly in relation to health, accident and pension insurance. However, this does not mean that every insured person has to be in work: in health insurance, family members are co-insured, but this depends on the employment of another family member. Pension entitlements after the death of a spouse or partner (widow's and widower's pensions) are comparable with this. For benefits from unemployment insurance, a person’s willingness and ability to work are important conditions.
Overview of the horizontal issue of disability in Austria

Austrian social insurance is a compulsory insurance system: persons who are employed or self-employed have full health, accident and pension insurance cover as long as the statutory conditions are fulfilled (exceeding the marginal earnings or insurance threshold, possession of a business licence etc.). In addition, employees are to a large extent insured against unemployment.

The Austrian social insurance system is based on the insurance and solidarity principles, but there are also strong welfare elements. The insurance principle means a person must have paid contributions in order to receive benefits in the case of the occurrence of a risk event. The solidarity principle means that contributions paid and benefits received do not need to be of the same amount, and that within the community of the insured those who pay higher contributions support those people who pay lower ones. The welfare principle is, for example, realised in the possibility to be co-insured. The benefits received by children and not backed up by their own contributions. The equalisation supplement in pension insurance, which uses budget funding to raise low pensions to a statutory minimum level, can also be viewed in this way. Here, however, this ‘social equalisation’ does not take place within the community of the insured – it is financed via the federal budget. The same applies to subsidies from the federal government to the pension insurance system when pension benefits are not covered by the contributions of the insured.

7.3.1. Health insurance
Benefits and services from health insurance are received by the insured and also by their family members who do not have their own statutory health insurance cover. This applies to spouses, registered partners, cohabiting partners and children up to the age of 18 (if they are in vocational education or studying this is extended up to the age of 27), and under certain circumstances also to parents and other relatives.

Health insurance includes preventive as well as curative measures and extends from preventive check-ups and the annual examination for young people to help in the case of illness (medical care with a free choice of doctors and equivalent services such as physiotherapy, medicines, therapeutic aids, and care at home or hospital stays, etc.).

Sickness benefit is principally paid from the fourth day of inability to work for a duration of up to 26 weeks. Under certain conditions this can be extended to 52 or 78 weeks.

Rehabilitation benefit is just as high as sickness benefit and is conceived as a transitional benefit if a person has temporarily become an invalid or is unable to work (in both cases for at least six months) and occupational rehabilitation is neither reasonable nor expedient.

Reintegration benefit, which employees are entitled to if they agree upon part-time reintegration work after a longer period of sick leave, is paid at the same amount as sickness benefit.
7.3.2. Accident insurance

The benefits and services of accident insurance included measures to prevent work accidents and occupational diseases, medical care by occupational physicians, first aid in the case of work accidents, treatment after accidents, and rehabilitation and financial compensation after work accidents and occupational diseases.

Work accidents are accidents which occur in connection with the insured work or training in terms of their place, time and cause (including accidents on the way to or from work or training). Certain accidents are equivalent to work accidents even if they affect people who are not covered by accident insurance, such as accidents when saving a person from danger or during blood donations, accidents during deployments of members/helpers of aid organisations, etc.

An occupational disease is when a person’s health is damaged by the insured work. They are recognised as occupational diseases if they are listed in the appendix to Section 177 of the General Social Insurance Act (ASVG). They are considered equivalent to work accidents.

The treatment of accidents aims to eliminate – with all suitable means – the health problems or physical damage caused by a work accident or an occupational disease and the related reduction of earning capacity, and attempts to prevent the consequences of an injury or illness from becoming worse.

The priority is to restore the person’s health and ability to work, and to rehabilitate them. The intention is to enable the insured person to return to their previous or another occupation, or to participate as independently as possible in the life of the community.

Financial compensation after work accidents and occupational diseases includes invalidity pensions and pensions for surviving dependants.

7.3.3. Pension insurance

In order to receive a pension, a sufficient number of insurance months needs to be acquired during a person’s working life, and certain (particular) conditions for entitlement must be fulfilled. Alongside old-age pensions there are pensions for invalidity and occupational disability. In the field of pension insurance the motto is ‘rehabilitation has priority over granting a pension’. In order to prevent a person from becoming unable to work, the pension insurance institution can therefore provide rehabilitation measures which aim to restore their ability to work.

The amount of a pension is determined – according to the insurance principle – by both the level of the contributions paid in and the number of insurance months. If the pension is below a specific annually determined amount, it is – as long as the statutory conditions are met – increased to this amount with budget funding. This so-called equalisation supplement is set at different amounts for people living alone and couples. For pensioners living alone
(this does not apply to widows/widowers) who have acquired at least 360 months of contributions to compulsory insurance via employment, an equalisation supplement reference rate of € 1,000 applies.

The financing of pensions in Austria is carried out according to a pay-as-you-go system; i.e. those in work pay via their contributions for the pensions of those who have already retired. The solidarity among the community of the insured thus also has a vertical aspect in the sense of solidarity between the generations.

Men retire on a normal old-age pension at 65, and women currently at the age of 60. From 2024 the normal retirement age for women will be gradually raised from 60 to 65.

7.3.4. **Unemployment insurance**

Employees are insured against unemployment as part of social insurance as long as their income is above the marginal earnings threshold set by law. The social insurance contributions (employers and employees contributions) are transferred to the relevant health insurance institution by the employer.

If the contingency of unemployment occurs, those affected are entitled to unemployment benefit if they have completed the qualifying period and are available for work found for them by the Public Employment Service (AMS). The qualifying period has been fulfilled when, within a specific period of time, the person has accumulated a certain amount of unemployment insurance contribution months as an employee. A person is considered available for placement in work if they are able and willing to take up a job, are capable of work and allowed to do so. The length of time for which unemployment benefit is due depends on the duration of the periods for which unemployment insurance contributions for the employee have been provenly paid.

Unemployment benefit is composed of the basic amount, possible family supplements and, if applicable, an additional supplement. The level of the basic amount is calculated according to the average monthly gross income (including any special payments) in the penultimate year (if the application is made in the first six months of the year) or the past year (if the application is made in the latter half of a year). It amounts to 55% of the net income corresponding to the gross income used for the calculation. A supplement is paid for family members to whose maintenance the unemployed person makes an essential contribution (family supplement). If the basic amount of unemployment benefit is below the equalisation supplement reference rate, it is raised to that level by a supplementary payment, but only up to 60% (if there is no entitlement to family supplements) or 80% (if there is an entitlement to family supplements) of the net income used as a basis for assessment.

If unemployment persists beyond the duration of a person’s entitlement to unemployment benefit, they can apply for unemployment assistance. Apart from the qualifying period, all of
the conditions listed above plus a situation involving hardship must be present. The basic level of unemployment assistance is 92 or 95% of the basic amount of unemployment benefit. Family supplements are added to this if they are justified. In addition, the amount of unemployment assistance is oriented towards the length of time for which unemployment benefit was paid immediately beforehand. The following are taken into account in the assessment of hardship: the net income of the spouse, cohabiting partner or registered partner (after the deduction of personal allowances).

Unemployment assistance can be paid indefinitely (as long as hardship persists), but it is only approved for a maximum of 52 weeks at a time. Then a new application has to be made. The offices of the Public Employment Service (AMS) are pleased to provide information about unemployment insurance.

7.4. The Public Employment Service (www.ams.at)
The entire range of services of the Public Employment Service (AMS) can – in line with the principle of disability mainstreaming – of course also be taken advantage of by people with disabilities or health restrictions, as long as they are available for placement in the labour market.

The services include:

- needs-based information on training and careers;
- comprehensive advice and support in the search for a suitable job;
- individually customised skills training or employment subsidies and support measures;
- and, under certain circumstances, benefits to ensure the person’s subsistence (unemployment benefit2 or unemployment assistance3).

In the regional offices of the AMS, this group of persons is supported by trained rehabilitation advisors. Taking into account their personal situation and problems, solutions are developed which are written down in a binding support agreement. Integration into the primary labour market is the main priority. If this does not succeed after a short period of time, placement in an employment project can be considered. These transitional jobs serve to improve the person’s prerequisites for work so that they can then take up employment in the free labour market.

7.5. The Ombudsman’s Office (www.volksanwaltschaft.gv.at)
The Ombudsman’s Office monitors the public administration and promotes and ensures adherence to human rights. It monitors authorities and offices of the federal government,

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2 http://www.ams.at/service-arbeitsuchende/finanzielles/leistungen/arbeitslosengeld
3 http://www.ams.at/service-arbeitsuchende/finanzielles/leistungen/notstandshilfe
the provinces and local authorities. The Ombudman’s Office looks into complaints made by members of the public and examines whether the administration is acting within the law and complying with human rights standards.

In addition to the individual right of every person with disabilities to make a complaint, the Ombudsman’s Office also has the legal mandate to take action on its own initiative in accordance with Section 16 para. 3 of the Agreement on the Rights of People with Disabilities. The commissions of independent experts which it appoints make regular unannounced visits to and inspections of facilities for people with disabilities (including residential and nursing homes). The objective of this work is to prevent any form of exploitation, violence and misuse.

7.6. Public relations work

7.6.1. The portrayal of people with disabilities in the media
As part of the implementation of the corresponding NAP measure, and including the involvement of experts and the organizations of people with disabilities, a working group has drawn up a 'recommendation on the portrayal of people with disabilities in the media'. It was presented and published in May 2017. As one of the planned implementation measures, the internet platform www.barrierefreiemedien.at was established.

7.6.2. Campaign on the issue of accessibility
To accompany measure no. 44 in the Action Plan (Public relations work on the legislation on the equal treatment of people with disabilities), the Ministry of Social Affairs has carried out a broadly-based campaign on the issue of accessibility in print media, on television and in social media. In addition, a separate area with FAQs on accessibility with a focus on the expire of the transitional period on 1 January 2016 has been established at www.oesterreichbarrierefrei.at.

7.6.3. The science prize 'Inclusion via Natural Sciences and Technology (WINTEC)
As one of the NAP measures, the science prize entitled Inclusion via Natural Sciences and Technology (WINTEC) was held for the first time by the Ministry of Social Affairs in 2015. Since 2016 it has been awarded every two years with increased prize money.

In order to realize the concept of inclusion, projects from all areas of science and academia can be submitted, and are not restricted to natural sciences and technology. The three best entries receive a prize. For more information see www.sozialministerium.at/wintec.
8. NON-STATE ACTORS

The first organization which should be mentioned here is the Austrian National Council of Disabled Persons (Österreichische Behindertenrat - www.behindertenrat.at). It is the umbrella organization of the associations of people with disabilities in Austria and is financially supported by the Ministry of Social Affairs on the basis of a legal obligation in the Federal Disability Act. As the umbrella organization of over 70 associations of people with disabilities in Austria with a total of over 400,000 members, it also offers its individual members and partners a wide range of services. The National Council of Disabled Persons not only makes statements on domestic draft legislation, it also deals with the issue of disability beyond Austria’s borders. It acts as an interface between representatives of Austrian civil society and their international and European partners, particularly the European Disability Forum.

On behalf of the large number of initiatives for independent living, we would like to mention their umbrella organisation Selbstbestimmt Leben Österreich (http://slio.at/index.php). Their goal is the equality of people with disabilities and the assertion of their rights as citizens. They are active in Austria as well as at an international level.

In the field of long-term care, an example worthy of mention is the Interessengemeinschaft pflegender Angehöriger (Interest Group of Caregiving Relatives, www.ig-pflege.at), which advocates the concerns and interests of informal carers. In Austria, most care and support in the home is provided by caregiving relatives. This is usually the wish of the person in need of care, and for family members it is a task which they face courageously and which they often view as something completely natural. Family members often also take on important tasks in accompanying and supporting people in need of care in inpatient settings.

The fundamental idea behind the interest group is to jointly make the – often difficult – framework conditions into an issue, to question them and to work towards their improvement.

In addition, there are a large number of associations, advocacy groups, self-help groups and organizations which cannot all be mentioned here for reasons of space. In this regard we would like to refer you to the website of the Ministry of Social Affairs (www.infoservice.sozialministerium.at).
Overview of the horizontal issue of disability in Austria