

Overview

of the horizontal issue of disability in Austria

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1 Introduction

People with disabilities, their family members and the people to whom they relate form a large group within the population and are thus 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 the issue 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 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 projected 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 0.4% had problems with speaking (around 26,000 persons).

Among the persons with mobility issues, 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 using 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 hearless people, Austrian sign language was enshrined in the federal constitution in 2005. Art. 8 para. 3 of the Act on the Federal Constitution 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 federal government 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 (Bun-debehindertengleichstellungsgesetz).

2 International affairs

In international committees, Austria has energetically 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.

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. 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 The participation in employment of people with disabilities

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).

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
- EU/EEA citizens;
- are Swiss citizens or refugees who have been awarded political asylum,
- or 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 Sozialministeriumservice. This initiates a so-called determination procedure, in the course of which their degree of disability is determined by a medical expert. The Sozialministeriumservice 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. An anticipated period of over **six months** is considered non-temporary.

When using the so-called MAS diagnosis (MAS = multiaxial classification system, axis 6), **social aspects** are also taken into account in **medical examinations** in accordance with the 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).

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 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:

- persons with a visual impairment or blindness
- 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 over the age of 55 receiving special support.

If the number of 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 disabled person receiving special support who is not employed in their company in 2020 (i.e. the number by which the obligatory figure is undercut), employers with 25-99 employees have to pay € 267 per month; employers with 100-399 employees € 375, and employers with 400 or more employees € 398. These figures are increased annually by the pension adjustment factor.

The compensatory levy is calculated retrospectively per calendar year by the Sozialministeriumservice, which issues an official decision on the amount. If an objection to the decision is submitted, the Federal Administrative Court rules on it.

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 companies 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.

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 on.

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 obtained 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 involving disabled persons receiving special support and concluded after 1 January 2011, a longer probationary period therefore applies. For employment relationships 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 present, for example, when – at the 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 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.

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 must be elected. Disabled persons' representatives must themselves be people with disabilities. 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 the group of blue-collar employees and that of salaried employees both contain at least five people with disabilities, 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** and a deputy 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 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.

3.1.4 Support funding

For the promotion of the occupational integration of people with disabilities in 2019, the Ministry of Social Affairs reserved around € 201.3 million from the compensatory levy fund, the federal budget including the inclusion package and the European Social Fund (ESF). In addition, as part of the mandatory training programme, it put aside approximately € 33.5 million from the budget of the Public Employment Service.

This funding finances the proven support programmes of the Sozialministeriumservice for the participation in employment of people with disabilities and for the further development of offers and new offers within the framework of the inclusion package. Taking the current situation in the labour market into account, the offers are strategically refined and subsequently introduced in all of the provinces by the Sozialministeriumservice. 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.

In the programme period 2014 – 2020, the ESF funding is being particularly used for the co-financing of measures for young people at the interface between school/training/working life as part of the Occupational Assistance scheme.

Projects

Netzwerk Berufliche Assistenz (NEBA – Network for Occupational Assistance) 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 programmes are key instruments of the Austrian labour market policy for people with disabilities.

Its youth coaching, Fit for Training (formerly known as production schools), vocational training assistance, support in the workplace and job coaching programmes represent the heart of the subsidy landscape of the Sozialministeriumservice.

Youth coaching

The main focus of this programme is 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 socio-emotional difficulties, lack a nationwide social safety net or support system. **Youth coaches have the task of drawing up 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, 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.

Fit for Training (previously referred to as production schools)

In the Fit for Training Programme, 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. This combines 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 obtain self-awareness and self-confidence and in this way train and develop skills which are required to start training for their desired occupation. In some Fit for Training offers, young people are carefully prepared for the challenges of Fit for Training in a so-called Fit for Training pre-module. This can also have the function of preparing them for other labour market policy programmes or for training courses, or for the job market itself.

Vocational training assistance (Berufsausbildungsassistenz)

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 specifically 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, care is taken to maintain regular contact to the company and vocational school in order to be able to recognise any problems or difficulties at an early stage and to react to them.

Vocational training assistants 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.

Work assistance scheme (Arbeitsassistenz)

Work assistance 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. Work assistance supports people with disabilities in preparing for an occupation, and provides support in obtaining and keeping a job.

An important part of this scheme is also 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 em-

ployer, and an inclinational and suitability profile is drawn up. If these efforts were successful, work assistants are also available to the employer in the induction phase (up to three months).

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

It makes contact with companies if a job is at risk, and acts as a mediator in talks with superiors.

Job coaching

This service is addressed to businesses in the private sector 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 teams provide advice and support to enable women and men with disabilities to cope with their 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.

Interface to the Public Employment Service

The main task of the Public Employment Service is to ensure the livelihoods of the unemployed via unemployment benefit and to help them find a new job. The Public Employment Service supports the integration into the labour market of **people with disabilities via numerous support and promotion 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.

Education Till 18 (AusBildung bis 18)

The Sozialministeriumservice has been entrusted with the national and regional operative implementation of tasks which have been assigned to it as part of the Education Till 18 programme in accordance with the Training Obligation Act (Ausbildungspflichtgesetz, APfIG). The goal of Education Till 18 is to support young people during their educational and training careers, and to promote them in such a way that all under-18s conclude training which goes beyond compulsory schooling.

As part of obligatory training until 18, young people receive special support on their way into working life. In the form of the so-called coordination offices in the federal government and the provinces, contact points have been created for young people and their parents. It is there that advice and support measures are initiated. This is facilitated by close links to the Public Employment Service and the measures of the Occupational Assistance Network (NEBA), particularly youth coaching. An individual support plan is drawn up with the young people which is designed to reflect their wishes and talents.

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 school or vocational training.

Integration subsidy ('Come back')

This subsidy provided by the **Public Employment Service** is available to all employers with a few exceptions. The subsidy is paid for employment relationships of long-term unemployed persons who have:

- have been registered as unemployed for least six months (in the case of persons under 25), or
- for at least twelve months (in the case of persons over 25).
 - Inclusion support and inclusion support Plus

 - Inclusion support and inclusion support Plus can be received by companies which are obliged to hire people with disabilities (i.e. companies with 25 or more employees in Austria) if they employ a person with disabilities receiving special support who has provenly been granted an inclusion allowance by the Public Employment Service.

Inclusion bonus for apprentices/trainees

The inclusion bonus supports companies when they hire apprentices/trainees who are registered disabled persons and can be obtained during the entire period of training or an apprenticeship. The age of the apprentices/trainees is not relevant here. The amount of the bonus depends on the applicable rate of compensatory levy.

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, institutions 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

In the case of ongoing 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)

This can be taken advantage of by people with disabilities of working age who are at least at 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 within the statutory maximum 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.).

3.1.5 Becoming self-employed

People with disabilities who want to try and earn a living with a self-employed business 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 levy. The decision made by the Sozialministeriumservice depends on the financial situation of the applicant.

There are also bridging 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, a maximum of six to nine months' time is granted for a person to prepare the founding of a business. Guidance is provided here by professional start-up consultants.

The acquisition of qualifications specific to the field of business can also be subsidised. 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**.

3.1.6 Prevention management – www.fit2work.at

Prevention management focuses on maintaining or restoring the ability to work (particularly that of older workers and unemployed persons) 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 emergence 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.

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 problems 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 **consulting 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.

3.1.7 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 a vehicle for a disabled person which is 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, holders of a parking permit, which is also issued by the Sozialministeriumservice, are entitled to use specially marked parking spaces for the disabled.

3.1.8 Social enterprises

Around 1,700 people with disabilities currently work in the employment module of 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.

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. At the time they are hired, this has to be at least half the level of performance of a person without disabilities carrying out the same work. If this is not the case, they cannot work in a social enterprise.

Alongside jobs, social enterprises also offer training places for people with disabilities. In autumn 2015 a new main focus was established in the preparation for work module: a social enterprises apprenticeship. People with disabilities are not only offered a low-threshold opportunity to acquire skills, but also gain access to high-quality vocational training in the form of an apprenticeship. For the year 2020, an average of around 120 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). Holding a disabled person's pass does not create a **right** to financial benefits. However, one does receive discounts at various events with the pass.

The disabled person's pass can be obtained by the following persons whose normal place of residence is Austria and who belong to one of the following groups:

- disabled persons receiving special support (see Section 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.

In this context, a person is considered disabled if their degree of disability or the reduction of their ability to work is at least 50 percent.

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 with which a 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 has been able to 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 relevant 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, and
- to unload a wheelchair, also in pedestrian zones.

In addition, pass holders are exempted from parking fees.

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 to provide care due to illness, a holiday or other important reasons, can also receive support. This payment has 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

Persons with a visual impairment or blindness

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.

Hearless 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 a 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 of € 190 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.

Expenditure (not on a regular basis) 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.

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 the 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 Equality

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 (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) 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 statutory 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 people with a visual impairment. 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.

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 the person has been treated in a certain way 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.

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 be taking place **due to** the disability
- the way the person is treated 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.

Indirect discrimination

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

3.4.1.1 Harassment

If somebody is harassed due to a disability, this is also considered to be discrimination.

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 their dignity and creating an intimidating, hostile, undignified, offensive or humiliating environment for them.

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 the access to information (e.g. websites, trade fairs and information events, offers of advice).

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**. Consumer transactions occur 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 discrimination, if it has been established in court, is the payment of compensation by the discriminating person.

In the case of **harassment**, it has also been possible to take out an injunction since 1 January 2018.

- **Accessibility**

To accompany the transitional provisions, the legislature has introduced an obligation to draw up staged plans which are intended to establish measures to create the greatest possible accessibility in certain areas for the transitional period. According to the **staged plan for federal buildings**, all of the buildings used by the federal government had to be examined for constructional barriers. Then the possibilities to eliminate the barriers were investigated. **This staged plan** contained the procedure for the staged creation of the greatest possible level of accessibility and was implemented by 31 December 2019.

At the same time, public transport operators have drawn up a plan for the elimination of barriers in connection with their vehicles, systems and facilities (**staged plan for transport**).

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."

This means that people with disabilities should principally have access to publicly offered services – whereby in individual cases a reasonableness test is always carried out (in particular the examination of the cost and effort involved in eliminating the barriers).

- **Reasonability**

In individual cases, a court carries out a test of reasonableness. Whether a measure is reasonable particularly depends on the cost and effort which would be connected with it, and also on the financial means of the entity responsible for the barriers (whereby the possibility of public subsidies should be taken into account here), and how much time has passed since 1 January 2016.

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 for 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 damaged, the **Austrian National Council of Disabled Persons** can initiate a class action. **From 1 January 2018, this option to assert the rights of victims of discrimination has also been available to the Disability Ombudsman's office and the**

claimants' association. In a class action, it can be established that certain circumstances constitute discrimination. **In the case of large companies, since 1 January 2018 there has also been the possibility to initiate a class action to cease and desist and to eliminate a discrimination.**

- **Conciliation**

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 both sides agree to it.

Within the framework of this conciliation procedure, the parties can also take advantage of the option of free mediation by an external mediator (who is registered on a list kept by the Sozialministeriumservice). 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 term **world of work** covers employment relationships and employment contracts and the remaining **field of employment**.

This refers to the following forms of training and employment: all employment relationships in the narrower sense (employment contracts), apprenticeships and trainee contracts (e.g. interns), all employment and training contracts with the federal government, and 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 (see Section 3.1.3 on protection).

The following persons are protected against discrimination: people with disabilities, persons close to them, and 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 in the table below clarifies the differences between statutory protection against discrimination and statutory protection against dismissal:

Table 1 comparison

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

3.5 The Disability Ombudsman

The Disability Ombudsman has been in existence since 2006. S/he is responsible for providing **advice and support** to people who feel **discriminated** against in the meaning of the Disability Employment Act or in the meaning of the prohibition of discrimination in the Disability Employment Act. To this end, they can hold consultations throughout Austria. The Disability Ombudsman is **independent** and not subject to directives in his/her activity.

In addition, s/he 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, Health, Long-term Care 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 as defined by 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 (Disability Rights Convention, UN CRPD) is an international treaty in which the signatory states commit themselves to promote, protect and guarantee the rights of people with disabilities.

The UN Convention on the Rights of Persons with Disabilities has been in force in Austria since 26 October 2008. It has to be taken into account in legislation and its enforcement (administration and judicature) by the federal government, the provinces and local authorities.

The Ministry of Social Affairs has been designated as the point of contact for coordination at a federal level. In the provinces, these tasks are carried out by the offices of the provincial governments.

3.6.1 Monitoring committee – www.monitoringausschuss.at

On this basis of the UN CRPD 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 The Ombudsperson's Office

On the basis of the federal Act on the Implementation of the Optional Protocol of the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment of 18 December 2002, in 2012 the Ombudsman's Office was given the task of acting as an independent authority to prevent exploitation, violence and abuse. To this end, commissions were established to efficiently monitor all institutions and programmes for people with disabilities, such as long-term stay facilities for people with disabilities or psychosocial issues, as well as day centres for disabled persons (mechanism to prevent violence). A human rights committee has been established by the Ombudsperson'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 dis-

crimination, accessibility, education, employment, an independent life, health and rehabilitation, raising awareness and providing information. A resolution by the Ministerial Council extended the NAP by one year until 31 December 2021.

The NAP Disability contains 250 measures divided up into eight main focuses. 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 on the NAP Disability** at the Ministry of Social Affairs. It includes representatives of all the ministries, the provinces, the social partners, the scientific community, the organisations of people with disabilities, the Monitoring Committee and the Federal Disability Ombudsman.

At the end of 2018, 68% of the 250 measures had already been implemented. A further 27.6% have been partly implemented or are in the preparation phase. Only in the case of 4.4% of measures have no steps yet been taken towards implementation.

The NAP 2012-2020 and the interim assessment for 2012-2015 are available in the downloads area as a PDF. The NAP 2012-2020 is available in German and English as well as in an easy read version.

<https://www.sozialministerium.at/NAP>.

4 Long-term care

4.1 Long-term care benefit

Around 466,000 people 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 exceeds 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. A 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 against at the Labour and Social Court.

Due to the structural reform of the Austrian social insurance system, there are now the following three social insurance institutions from 2020 onwards:

- Social Insurance Institution for the Self-Employed (SVS)
- Social Insurance Institution for Public-Sector, Railway and Mining Workers (BVAEB)
- Pension Insurance Institution (PVA)

Since its introduction in 1993, long-term care benefit has lost value to the lack of regular valorisation. All stages of federal long-term care benefit were last increased by 2% in January 2016. From 2020, the annual valorisation of long-term care benefit will take place using the same factor as is applied to the adjustment of pensions. The resulting amounts are set annually by a regulation of the Ministry of Social Affairs.

There are seven stages of long-term care benefit. The decisive factor is the respective amount of care required in hours per month (see Table 2).

Table 2: Long-term care benefit – an overview

	Care requirements per month in hours	Amount
Stage 1	More than 65 hours	€ 160.10
Stage 2	More than 95 hours	€ 295.20
Stage 3	More than 120 hours	€ 459.90
Stage 4	More than 160 hours	€ 689.80
Stage 5	More than 180 hours and an exceptionally high level of care required	€ 936.90
Stage 6	More than 180 hours if, during the day and night, care has to be provided at irregular times so that the work cannot be coordinated in advance, or when the permanent presence of a carer is required because it is probable that the patient would otherwise harm themselves or others.	€ 1308.30
Stage 7	More than 180 hours if no goal-directed movements of the person's four extremities with functional implementation are possible, or if a comparable condition is present.	€ 1719.30

The extraordinary amount of care of Stage 5 is awarded particularly when a carer has to be available on an on-call basis day and night, but not where their constant presence or checking on the person in relatively short intervals is required, and this can be planned. 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).

Classification as a Stage 6 case is made when a care plan made in advance cannot be adhered to 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 the granting of long-term care benefit is a report by a medical officer. Qualified nurses can also act as experts for the assessment of applications for increases in long-term care benefit. The assessments are usually carried out in the form of home visits. The person in need of care can also request to have a person they trust (e.g. their 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 to 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 age of 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 people: Stage 4
- deaf and blind persons: Stage 5

4.1.2 Wheelchair users

Are defined as someone who is at least 14 and is largely 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 also 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: long-term care benefit Stage 3
- Wheelchair users without stool/urinary incontinence or bladder/bowel paralysis and without restrictions in their upper extremities: long-term care benefit Stage 4
- Wheelchair users with a functional limitation of the upper extremities (getting into or out of the wheelchair independently is not possible): long-term care benefit 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 the long-term care and support services offered by the provinces and local authorities, and towards their needs-based extension and development. 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
- 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 the 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. This funding is provided in equal parts by the federal government, the provinces and the social insurance institutions.

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;
- cooperation in the development of regular funding for hospice and palliative facilities.

4.4 Support for caregiving relatives

A large 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 system:

- 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 due 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 whom increased family allowance is claimed, 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.
- Certain family members providing care largely at home for an insured person who is entitled to long-term care benefit from Stage 3 are co-insured with this person in terms of health insurance.
- If they are in need of social protection, certain caregiving relatives can under specific circumstances insure themselves free of charge 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 a 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 financial 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 of this kind. Caregiving relatives who feel stressed can also take advantage of a stress management consultation with a psychologist.

4.5 Care leave benefit

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

From 1 January 2020, employees have a legal right to take two weeks of full or part-time care leave. The employer has to be informed of the timing of the start of the intended care leave or part-time care leave as soon as it is known. Upon request of the employer, the employee has to provide evidence of the need for care of a family member and of their relationship to the employee.

During these two weeks of care leave or part-time care leave, its extension can be agreed upon. If no agreement on care leave or part-time care leave is reached during these two weeks, the employee is entitled to up to two additional weeks of full or part-time care leave (a total of four weeks). The periods of leave taken in this way form part of the maximum statutory duration of agreed care leave or part-time care leave. The legal entitlement applies in companies with more than five workers.

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 for their seriously ill children.

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

This applies to persons who:

- have agreed on care leave or part-time care leave with their employer or are taking it on the basis of their legal right;
- 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 in order to take care leave or family hospice leave.

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 once 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.

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 for services to persons in need of care and support. It is jointly financed by the federal government and the provinces (in a ratio of 60% to 40%).

The subsidy can amount to up to € 1,100 per month for employment relationships or 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 of € 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:

- the presence of 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 either 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.

A total of around 16.6 million hours of mobile services were used in 2018. According to information from the provinces, a total of 153,486 persons were supported by mobile services in 2018.

4.7.2 Semi-inpatient services

Geriatric day centres or day care facilities are becoming increasingly significant in the Austrian care and support sector. In 2018, a total of 8,188 people were looked after in semi-inpatient facilities.

4.7.3 Inpatient services

In 2018, around 95,100 persons were cared for in residential and nursing homes.

4.7.4 Additional social services of the provinces

In the provinces, 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 care home) are provided. People in need of care can also be accompanied for several hours a day in and around their homes in order to promote and maintain an independent lifestyle and ease the burden on caregiving relatives.

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

4.7.5 Social support professions

Thanks to an agreement between the federal government and the provinces on social support 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 support 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 Institute for Care Studies 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 female

- 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 sense 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 young carers 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 www.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 on

14 December 2015 by both of the ministers involved. Overall, seven targets and 21 related recommendations for action were drawn up.

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.

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, and 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 of this condition 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.

The dementia strategy Living Well with Dementia, which was elaborated in 2015, has been further developed and implemented since 2016 by the federal government, the provinces, representatives of the organisations providing support, and specialists in the field. In order to support a coordinated approach, the Dementia Strategy Platform was founded in 2016. The website www.demenzstrategie.at creates transparency about projects and initiatives, and documents to what extent the targets and measures of the Austrian dementia strategy have been implemented.

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

4.10 Quality assurance

4.10.1 Quality assurance in care at home

As part of quality assurance in care provided at home, since 2001 home visits to recipients of long-term care benefit who are looked after in their home environment have been commissioned by the Ministry of Social Affairs.

In addition, since 2009, obligatory home visits to recipients of subsidies for 24-hour care have been carried out in accordance with Section 21b of the Federal Long-term Care Benefit Act. The home visits are coordinated via the competence centre for quality assurance in home care, which is based at the Social Insurance Institution for the Self-Employed, and conducted by qualified nurses.

Since 2015, free home visits can be arranged upon the request of a person in need of care or their caregiving relatives.

4.10.2 The Austrian quality certificate for employment agencies offering 24-hour care services

Together with the Austrian Economic Chamber and with the involvement of other experts, the Ministry of Social Affairs has developed the Austrian quality certificate for employment agencies offering 24-hour care services. The quality certificate is intended to be a visible sign of high quality standards and to strengthen the situation of all those involved.

The quality certificate is voluntary, and creates the opportunity of certification for employment agencies that fulfil higher quality standards which go beyond the statutory obligations. The qualifications required by carers are assessed, particularly regarding their training and practice as well as language and social skills, and there are regular home visits for quality assurance purposes.

The right to use the certificate is granted for a period of three years, after which recertification is possible. During this period, annual monitoring reports are made. In the case of infringements, the certificate can also be withdrawn. The certification procedure is carried out by the Association for the Promotion of Quality in the Care of Older People, which has many years of experience in connection with quality development and assurance.

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 for financial benefits and rehabilitation programmes. The legislation also lays down different benefits for individual groups of persons.

5.1 War victims

Austrian citizens and citizens of other countries 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 have innocently suffered 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 Wars, 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 have suffered damage to their health due to military service or training in the Austrian Army have been able to receive 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 statutory work accident insurance are due on the basis of the General Social Insurance Act (Allgemeines Sozialversicherungsgesetz). See point 7.3.2– statutory insurance against accidents at work. Entitlement to benefits awarded according to the Armed Forces 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** 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**:

- pensions, medical care measures and other preferential treatment.

5.5 Victims of harm caused by vaccinations

Persons who have 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**.

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 have suffered damage due to Contergan (thalidomide) who have received a one-off payment from the Federal Ministry of Health and have not received benefits according to the German Contergan Foundation Act, have been entitled to a pension benefit according to the Contergan Foundation 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 abuse in children's homes

On 1 July 2017, the Act on Pensions for Victims of Abuse in Children's Homes came into effect. Pensions are awarded to victims who, as children or young people, suffered violence in the period from 10 May 1945 until 31 December 1999 in homes, hospitals, psychiatric hospitals or sanatoriums, or in comparable institutions of the regional administrative authorities and local authorities associations, as well as in private institutions entrusted by the former to look after them, corresponding church-based institutions, or in foster families.

These pensions become due when the person has reached normal retirement age, or when they receive a pension based on their own insurance record.

6 The Sozialministeriumservice - www.sozialministeriumservice.at

The Sozialministeriumservice with its nine offices in the provincial capitals 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 promotion of 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 (see Chapter 3.1.5 Subsidies).

Youth coaching and Fit for Training (formerly production schools) are also essential elements of the mandatory training scheme adopted in July 2016 (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 also Chapter 3.1.6 Prevention Management www.fit2work.at).

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 in recent years. 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, etc. In this work 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 (see Chapter 3.4 Equality).

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 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 responsibilities in this matter. Austria's ratification of the **UN Disability Rights Convention** means that all ministries have to implement the convention. A specific example of this is the National Action Plan for People with Disabilities 2012-2021, 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 fewer 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, all of the children in the class are given the same 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 of teaching which take special educational needs into account are offered instead.

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 disabilities in vocational secondary schools and the upper school years of general secondary 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 methodological 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 realise this in practice has been developed: from the school year 2015/16, the provinces of Carinthia, Styria and Tyrol began the development of inclusive model regions. The concept of inclusive model regions is also included in the Styrian Action Plan for the implementation of the UN Convention on the Rights of Persons with Disabilities.

7.1.2 University degrees

Depending on the severity of their 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 medical certificate.

In 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 € 801 (as at 2020). The costs of technical aids which are necessary for the degree programme can also be assumed by the Sozialministeriumsservice.

Since the establishment of the institute Integriert Studieren (Integrated Studying), 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). 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 1997, 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 2012-2021) was a further important step towards the realisation of the UN Convention. In the NAP Disability, accessibility is a special focus point.

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 2016, accessibility has been a right in **all areas of life** according to the **Federal Disability Equality Act**.

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.

Due to EU directive 2016/2102, public websites have had to be designed so as to be accessible for their users since 23 September 2019. To this end, the Web Accessibility Act (Web-Zugänglichkeits-Gesetz) has been enacted at a federal level. Alongside the federal government, this also applies to institutions which fulfil tasks in the public interest and which are either predominantly financed by the federal government or are subject to its supervision. Websites which were already online at this time have to be made accessible by 23 September 2020, and mobile apps by 23 June 2021. The provinces and local authorities have enacted corresponding legislation in their sphere of responsibility. This is designed to grant people with visual disabilities in particular the right to unrestricted use of public websites.

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.

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

The promotion of accessibility by the Sozialministeriumservice:

In 2018, against the background of the general political objective of the creation of accessibility, the Accessible Businesses Campaign was initiated in order to create incentives for companies and support them in offering their products and services in a barrier-free way and thus facilitate unrestricted accessibility for **people with disabilities**. Equal participation in public life and the breaking down of barriers are an essential element of an independent life and make an important contribution towards the promotion of the economy. A one-off subsidy can be granted for non-constructural projects to create accessibility.

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 their parents' income (since 2018):

- from birth € 114
- aged 3 and over € 121.90
- aged 10 and over € 141.50
- aged 19 and over € 165.10

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 2018, **increased** family allowance has amounted 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:

- the degree of disability of the child is at least 50 percent, or
- 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 matters 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 if 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
- assistance for participation in working life
- occupational therapy
- help in achieving social inclusion.

7.2.2 Occupational therapy

At the interface to the federal government, 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. The person being cared for still receives 20 percent of their pension, the special payments and € 45.20 as monthly pocket money from their long-term care benefit. Since 1 January 2018, the state can no longer seize the assets of persons accommodated in long-term care institutions.

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 Social assistance

Disability can also lead to an increased risk of poverty. The benefits of the social assistance scheme are therefore just as important in providing a livelihood for people with disabilities as for all other persons affected by poverty.

In the field of support for the poor, a basic federal law was created for the first time and came into effect on 1 June 2019. It contains specifications which the provinces have to implement in their own legislation. Until these new implementing laws come into force, the current Minimum Income Act continues to apply in the respective province.

Please note: the basic law on social assistance has no influence on arrangements or regulations which the provinces have created especially for people with disabilities, e.g. via their own legislation on support for the disabled.

Benefits in accordance with the basic law on social assistance are intended to support the general subsistence and housing needs of their recipients. Financial support can be provided to ensure appropriate housing (= cost of rent, household items, heating and electricity, other general service charges and taxes) as well as for regular expenditure on food, clothing, hygiene articles and other personal needs. An entitlement to social assistance 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.

Social assistance is paid twelve times a year, and benefits in kind will play an increasing role in the future. According to the provisions of the basic law on social assistance, the maximum rate in 2020 amounts to € 917.35 for people living alone and € 1,284.29 for couples. The originally planned maximum rates for children were considered to be unconstitutional by the Constitutional Court. The provinces can set the level of these benefits themselves. In 2020, the reference rates for children amount to between around € 165 and € 247 per child.

From the second, third or fourth child in the household, some provinces have lower monthly reference rates.

For single parents, the provinces can grant a supplement depending on the number of children, with which the basic rate of social assistance can be increased (between around € 28 und € 110 per month and child; figures for 2020).

In addition, the provinces have to grant an obligatory supplement of around € 165 per month to **people with disabilities** (figure for 2020), unless they – due to other special provisions – already award higher benefits to people with disabilities which can be counted as part of social assistance.

Overall, **people with disabilities** are given special consideration in the basic law on social assistance, also via the following measures:

- All of the benefits to cover special needs in the case of care or a disability remain untouched by the basic law. Special needs of **people with disabilities** can therefore continue to be taken into account without limits and may not be counted as part of social assistance.
- Persons who are permanently unable to work can also be granted social assistance indefinitely.
- People with disabilities can also be exempted from the pro-rata reduction of benefits due to the ceiling on household incomes, because they should receive their benefits in their entirety.

In the case of persons who are able to work – with a few exceptions – social assistance is linked to a willingness to do so. If social assistance is claimed but reasonable work is turned down, their benefit can be reduced, and in exceptional cases completely withdrawn. Certain groups of persons – such as **people with disabilities – are exempted from having to work, as was the case until now.**

Health insurance: 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, the minimum income/social assistance continues to ensure unlimited access to medical care.

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 refurbishments 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. the tower of St. Stephen's Cathedral in Vienna, or castle ruins).

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

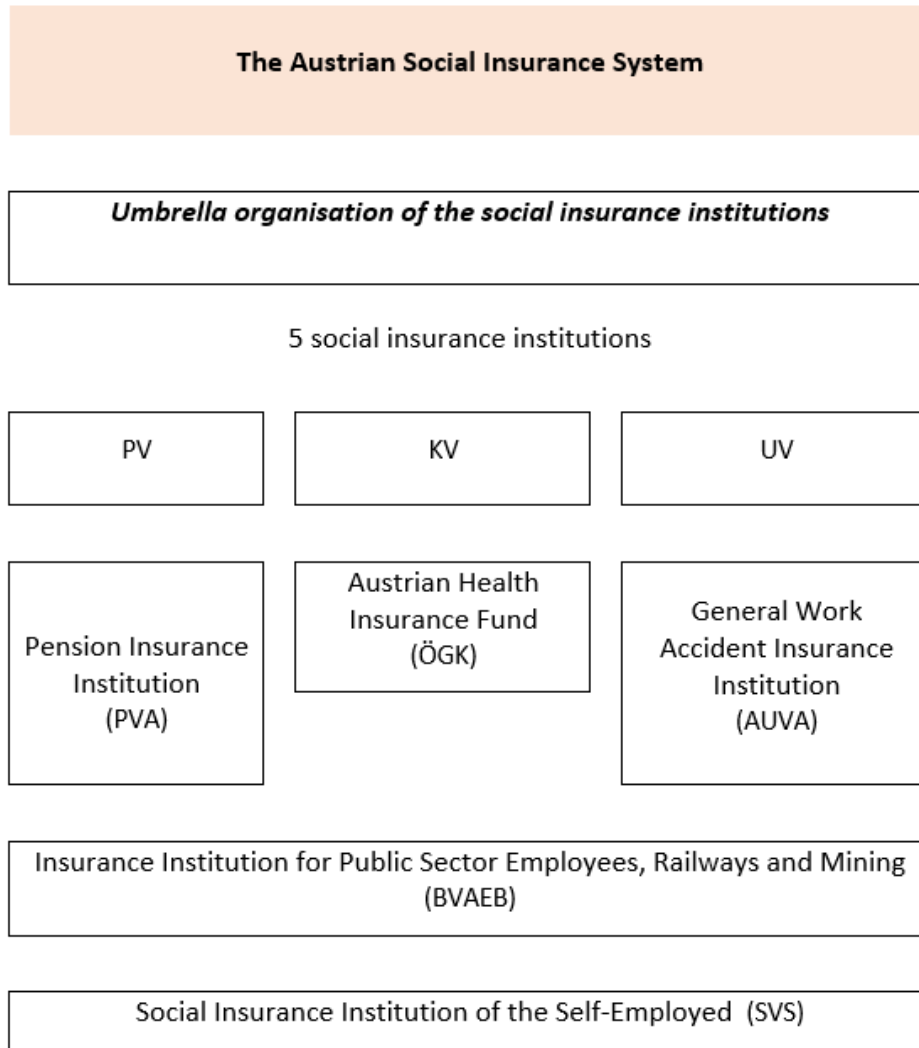
The UN Disability Rights Convention as a treaty under international law has to be implemented by the Republic of Austria in its legislation, judicature and enforcement. This obligation relates to all regional authorities – in other words the federal government, provinces and local authorities. In their sphere of competence, the provinces have therefore established contact and monitoring points as defined by the UN Disability Rights Convention.

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.

The coordination of the work of the social insurance institutions is carried out by their umbrella organisation. There are five social insurance institutions, which are organised according to occupations and also have a federalist element.

Figure 1: The Austrian social insurance system – an overview



Source: Federal Ministry of Social Affairs, Health, Long-term Care and Consumer Protection

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.

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 co-insure one's children. The benefits received by children are not backed up by their own contributions. The equalisation supplement in pension insurance, which uses general tax revenue to raise low pensions to a statutory minimum level, can also be viewed in this way. Here, however, this 'social balancing' 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. Here, family members particularly refers to spouses, registered partners, partners who have been living in the same household with the insured person for ten months and have been running the household free of charge during this time, children up their 18th birthday (if they are in vocational training or studying, this is extended until they reach the age of 27), and under certain conditions also 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. Increased sickness benefit is paid from the 43rd day.

Rehabilitation benefit is of the same amount 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.

Increased sickness benefit is also used as a basis for the calculation of reintegration benefit, to which employees are entitled when they agree with the company on part-time work for reintegration after a longer period of sick leave. The benefit is paid on a pro-rata basis depending on the agreed weekly working hours.

7.3.2 Work 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 the members/helpers of aid organisations, etc.

An occupational disease is given 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 to be 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 pension insurance the main principle is that providing 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.

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

As part of social insurance, employees are insured against unemployment 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 paid 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 also 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.

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.

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 benefit and, under certain circumstances, benefits to ensure the person's subsistence (unemployment benefit¹ or unemployment assistance²).

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 within 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, the provinces and local authorities. The Ombudsman's Office looks into complaints made

¹ <http://www.ams.at/service-arbeitsuchende/finanzielles/leistungen/arbeitslosengeld>

² <http://www.ams.at/service-arbeitsuchende/finanzielles/leistungen/notstandshilfe>

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 UN CRPD (see chapter 3.6.2 The Ombudsman's Office).

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, a working group with the involvement of experts and disabled persons' associations has drawn up a recommendation for 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 The Inclusion via Natural Sciences and Technology Prize (WINTEC)

As one of the first NAP measures, the Inclusion via Natural Sciences and Technology science prize (WINTEC) was held by the Ministry of Social Affairs in 2015. Since 2016, the prize money for WINTEC has been increased.0}

With the goal of realising the strategy of inclusion, projects from all areas of science and academic 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 organisation which should be mentioned here is the Austrian National Council of Disabled Persons (Österreichische Behindertenrat - www.behindertenrat.at). It is the umbrella organisation of the associations of people with disabilities in Austria, which operates throughout the country 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 organisation of over 80 associations, it represents the interests of 1.4 million people with disabilities. It makes the wide-ranging topic of disability into an issue at various events, meetings and working groups, and in this way offers a platform for exchange and social transformation – going towards an understanding of disability based on the UN Convention on the Rights of Persons with Disabilities.

The tasks of the Austrian National Council of Disabled Persons are diverse: it is represented in numerous working groups and committees, and numerous laws state that it must be called upon to send representatives for consultation. The National Council of Disabled Persons not only makes statements on domestic draft legislation and political papers, 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 (EDF).

On behalf of the large number of initiatives for independent living, we would like to mention their umbrella organisation, Selbstbestimmt Leben Österreich (<http://slioe.at>). 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 **Interessensgemeinschaft 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 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 organisations 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)



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