



Active inclusion of young people with health problems or disabilities

Executive summary

Introduction

This Eurofound study examines the situation of young people with health problems or disabilities in 11 countries (Denmark, Finland, France, Germany, Ireland, the Netherlands, Poland, Portugal, Slovakia, Spain and the United Kingdom) and at EU level, with an emphasis on assessing the implementation of active inclusion policy at national level. Active inclusion policy seeks to integrate measures in relation to three pillars – adequate income, inclusive labour markets, and access to quality services – for people furthest from the labour market. The main aim of the research is to see how the policy has been implemented to move young people with health problems or disabilities from inactivity into employment. Forty-four diverse and innovative case studies of good practice are analysed to distil the characteristics of service providers, their experiences and the success factors underlying their projects to formulate conclusions that are applicable across the EU. Some of the case studies are dedicated to mental health, a growing concern in the majority of countries that were studied. Particular attention is paid to the ongoing debates around reforms at the national level.

Policy context

Young people with health problems or disabilities in the EU have difficulty with access to employment. The limited information available on this group points to very low employment rates and increasing numbers taking up disability and other benefits, either directly from school or early in their working lives. Statistics on the extent of this group are difficult to find – employment statistics do not document the health status of young people, while health or disability statistics do not easily yield information on the employment status of young people.

A range of policies at EU level are relevant to the situation of young people with health problems or disabilities, but

most significant is active inclusion. Active inclusion, however, has limited reference to these young people if, alongside adequate income, inclusive labour markets, and access to quality services, it excludes education and lifelong learning. Education is a crucial domain for young people facing the transition into employment. Other relevant policies such as those concerned with employment, discrimination and people with disabilities are also potentially relevant, but don't specifically target young people with health problems or disabilities.

Key findings

Legislation and programmes at national level

The research identifies 144 pieces of legislation and 117 relevant programmes in the Member States that address more than one pillar of active inclusion. However, it is clear that most of these initiatives were only partially inspired by active inclusion policy at EU level, even if their provisions and activities are consistent with the policy. Moreover, it is also clear that the targeting of young people with disabilities or health problems by these measures varies considerably across the Member States.

A number of important themes emerge from the study.

- There is a trend towards dealing with the needs of people with health problems or disabilities in mainstream rather than specialist services.
- Sheltered services still have an important role in a number of countries.
- Focussing on transitions from schools-based to employment-based systems is an important and productive way of addressing the problems of these young people.

- Incentives, either in the form of supports to employers or employment quotas, are relatively common, although young people are underrepresented in most quota systems.
- Funding for services is under pressure in many states because of the economic crisis.

Good practice

Several principles can be derived from the case studies.

- An integrated approach to skills development, training and job placement is needed for the transition to employment.
- After training, rapid placement in a real job must be ensured if momentum is to be maintained and skills are to remain relevant.
- Individuals must be empowered to take control of their career path, to make real choices over its direction.
- Employers need support with the recruitment, training and retention of staff with disabilities.
- All projects should aim ultimately at open labour market participation for those who are able and who are interested.
- Good projects evolve over time to conform to the active inclusion approach.

There is strong evidence for what works in relation to the inclusion of young people with health problems or disabilities and also of the difficulties faced in achieving such inclusion. Good practice is characterised by a number of elements, such as taking a proactive approach, providing flexible benefits, promoting better school-to-work transitions and taking a pathways-to-employment approach.

Key issues identified in the case studies include the following:

- active inclusion had only a limited influence on the design and operation of the projects and then only in some countries;

- initiatives which combined actions under more than one pillar tended to be more successful;
- implementing active inclusion policies requires good collaboration between services under the four pillars (including education) – this is difficult to achieve.

Policy pointers

- Young people with health problems or disabilities are currently being missed by both policy and practice; there is a need to shift focus towards them.
- Data collection and reporting need to be significantly improved.
- The role of mental health problems as a factor in the social exclusion of the target group needs to be addressed more effectively.
- There is a need to develop new policy tools to reach the target group.
- Service delivery systems need to be much better integrated to deliver active inclusion.
- Joint action is needed between the major governmental and other stakeholders for active inclusion to be successful.
- There is a need for policy and practice to learn from the evidence that is available. ‘Softer’ evidence from case studies provides insight into what works and what should be incorporated into the improvement of policy.
- Both policy and practice need to take account of a number of critical factors – chiefly the economic turmoil across much of Europe. Young people with health problems are especially vulnerable, and measures to create labour demand for this group are needed.

Further information

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