



# Employment and disability: Back to work strategies

## info sheet

*'The Council of the European Union... calls on the Member States and the Commission, ...to continue efforts to remove barriers to the integration and participation of people with disabilities in the labour market...'*

European Council Resolution on promoting the employment and social integration of people with disabilities, 15 July 2003.



### WHAT is the context?

The causes of unemployment and exclusion from the workplace are diverse but, in recent years, chronic illness and disability have come to be viewed as key factors. A number of trends and social changes, not least the ageing of the European workforce, have focused increasing attention on measures to retain people with chronic illness and disability in employment.

The issue of how people with chronic illnesses become excluded from the workplace is a complex one and one that is relatively poorly understood. Yet, in many Member States, the number of people in receipt of disability benefits or who leave work permanently for health reasons is higher than the number of people who are outside employment for other reasons.

Most people who leave work due to illness or disability have acquired this problem during their working life. Despite growing concern at EU level and at national level in many countries, knowledge is still limited about the types and effectiveness of measures which could be taken to encourage the retention in employment of people with a chronic illness or disability.

### WHY this research?

The workplace is recognised as a key setting for promoting social inclusion. Access to employment is associated with higher levels of income, autonomy, health and well-being and social networking. Chronic illness or disability can change the possibilities for employment, and this can lead to a spiral of escalating costs for the individual and their family, the workplace and society as a whole.

The main aims of the Foundation's report on employment and disability are to bridge the existing knowledge gap and promote debate among the major stakeholders about this important issue. The report describes initiatives taking place in seven Member States to support the employment of people with chronic illnesses. It proposes a new model for understanding the nature of the problem, aimed at facilitating more timely and appropriate responses.

The study analyses current policy and legislative initiatives in the area, and identifies good practice at company level. It highlights the distribution of cost and benefit implications of policy measures between the main stakeholders. Finally, it puts forward recommendations for specific actions that could be taken to promote social inclusion through employment of people with a chronic illness or disability.

## WHAT are the findings?

### Nature of the problem

- The number of people claiming long-term disability payments is rising in many countries, exceeding 10% of the labour force in some Member States.
- There is evidence that illness plays a major role in the currently high rates of early retirement.
- The nature of the illnesses which give rise to early retirements and increased disability claims is changing: stress-related and mental health problems are now increasingly common compared with work-related accidents and injuries.
- As most people with health problems that prevent them from working have acquired this condition while working – and not due to occupational causes – the design of return to work systems is often inadequate.

### Process of exclusion

- The path to exclusion from the workplace begins when the illness first starts to affect an employee's capacity to work. At this point, a timely and appropriate response is crucial.
- If the right measures are not taken, an extended period of sick leave may follow. Older workers, workers with chronic illness and women in particular are more likely to remain out of work as a result of long-term absence.
- It is widely accepted that 80% of those who are absent for six weeks or more will require some assistance in returning to work.
- The probability of returning to work is less than 50% for those who are absent between three and six months, and just 20% for those who are absent for more than 12 months.
- Workplace factors, such as lack of contact with the workplace during the period off work, lack of procedures for managing disability and a company's culture, can all contribute to the likelihood that someone will fail to return to work.
- The reintegration into work process usually involves a number of interested parties, such as the worker, family, employer, doctor, occupational health and HR staff. Their roles and support systems are crucial in guiding the worker on the path back to work.



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### Assessment initiative

In an attempt to identify gaps in current provisions and pinpoint the need for rationalisation, integration or amendments, the Foundation project has developed an assessment tool. It highlights various aspects concerned with the management of chronic illness and disability during working life, such as:

- the need for change in social security systems;
- the importance of who funds long-term disability;
- responsibilities of the different parties involved in ensuring return to work, and providing incentives;
- the complexity of systems and problems in coordination between relevant agencies;
- the need to improve access to services and benefits.

### WHAT now?

The report's recommendations are addressed to three main actors: policymakers, service providers and companies. Policymakers are encouraged to adopt a more proactive and integrated approach, streamlining systems and access to benefits and services for users. There should be an explicit expectation of a return to work. Actions should be taken to specify the responsibilities, and to strengthen links between the workplace, employees and service suppliers. Data collection should be improved.

Service providers should adopt a more coordinated approach, strengthening links to workplaces. They should adopt a more proactive disability management approach than current models of intervention, which will require upgrading professional skill levels.

Companies are best placed to intervene early and make appropriate adjustments to workplaces, machinery and work practices in order to smooth the employee's return to work. They should actively adopt the policy and practice of disability management.

#### Full text

[http://www.eurofound.eu.int/living/illness\\_disability.htm](http://www.eurofound.eu.int/living/illness_disability.htm)

#### Further information

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#### Foundation work on related issues

*Illness, disability and social inclusion (report)*

<http://www.eurofound.eu.int/publications/EF0335.htm>

*Illness and employment: retaining the link to work (conference report)*

<http://www.eurofound.eu.int/publications/EF0474.htm>

*Access to employment for vulnerable groups (Foundation paper)*

<http://www.eurofound.eu.int/publications/EF0244.htm>

*Integrated approaches to active welfare and employment policies*

<http://www.eurofound.eu.int/publications/EF0204.htm>

*Workplace health promotion in Europe*

<http://www.eurofound.eu.int/publications/EF9724.htm>

*New approaches to improve the health of a changing workforce*

<http://www.eurofound.eu.int/publications/EF9942.htm>

*The employment of people with disabilities in SMEs*

<http://www.eurofound.eu.int/publications/EF9810.htm>

*Quality of life in Europe*

[http://www.eurofound.eu.int/living/qual\\_life/index.htm](http://www.eurofound.eu.int/living/qual_life/index.htm)