

NATIONAL ACTION PLAN ON DISABILITY 2012 – 2020

Strategy of the Austrian Federal Government for the implementation of the UN Disability Rights Convention

Inclusion as a human right and a mandate

IMPRINT

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DEAR READERS!

The UN Convention on the Rights of Persons with Disabilities came into force in Austria on 26 October 2008. In order to implement this Convention, the Ministry of Social Affairs has drawn up the National Action Plan on Disability 2012-2020 (NAP on Disability) in cooperation with all other federal ministries. For the first time since the Disability Concept of the Austrian government of December 1992, which in the meantime has been implemented in many fields, there is now once again a comprehensive strategy for Austrian disability policy in the form of the NAP.



I am pleased that civil society, and in particular the organisations of people with disabilities, have been intensely involved in the process to draw up the NAP on Disability.

In accordance with the subheading 'Inclusion as a Human Right and a Mandate', the NAP on Disability is intended to help implement the UN Disability Rights Convention and also support the objectives and contents of the EU Disability Strategy 2010-2020.

The National Action Plan describes the current situation in each special field, formulates policy objectives and contains 250 measures with corresponding timelines and responsibilities. In line with disability mainstreaming, the measures have to be applied by the individual federal ministries according to their responsibilities, because the rights of people with disabilities are human rights, and they cover all areas of life.

I would like to thank all those who have participated in the creation of this action plan for their contributions and their commitment.

Alois Stöger

Federal Minister of Labour, Social Affairs and Consumer Protection

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1. DISABILITY POLICY

Modern disability policy is orientated towards the following key principles:

- Inclusion and participation
- Accessibility
- Disability mainstreaming
- Equal opportunities and equal treatment
- Financial security
- Self-determination
- Self-advocacy
- Involvement
- Awareness-raising

1.1. National Action Plan on Disability

1.1.1. Point of departure

On **5 October 2010** – in connection with adoption of the First Austrian State Report for the United Nations with regard to the **implementation of the UN Disability Rights Convention in Austria** (www.sozialministerium.at) – the federal government stated its intention to draw up a National Action Plan for People with Disabilities (NAP on Disability) in Austria, and that this action plan was to contain the guiding principles of Austrian disability policy until 2020.

The last overall strategy paper on Austrian disability policy was twenty years ago: the **Concept for People with Disabilities of the Austrian Government** of 22 December 1992 (the third government under Chancellor Vranitzky). The background against which disability policy is carried out has fundamentally changed in these two decades. Whereas in the past a rather patronising form of tutelage and the fulfilment of the basic needs of people with disabilities were at the forefront, the focus is now clearly on **the aspects of human rights and equality**. In 2008, Austria ratified the UN Disability Rights Convention, which has set new benchmarks regarding the rights of people with disabilities. The EU is also pursuing the same approach in its current EU Disability Strategy 2010 – 2020.

The Austrian government thus considers it meaningful and expedient to adopt a National Action Plan for the implementation of the UN Disability Rights Convention for the period 2012 – 2020. National action plans are expressly recommended to states by the UN in connection with the implementation of the UN Disability Rights Convention as well as by the WHO in relation to the 2011 World Report on Disability. Developing **longer-term disability policy objectives and measures** and achieving political

agreement about them makes sense – particularly at a time of public spending cuts as a result of the financial and economic crisis. An action plan which covers several years and contains a strategy creates the conditions under which political participation, transparency, predictability, accountability and further development are possible and is thus in the interests of people with disabilities.

Disability affairs are a many-faceted **cross-cutting issue** in Austria with strong federalist components (responsibilities of the Länder). Disability policy at a federal level largely consists 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). The NAP on Disability gathers these strategies and plans under one roof and additionally formulates supplementary disability policy objectives and measures for as many areas of life as possible.

Due to the Federal Constitution, all areas of disability policy which are not explicitly the responsibility of the Federation are **issues of the Länder**. With regard to its measures, the NAP on Disability does not go beyond the responsibility of the Federation. However, as the competences of the Federation and the Länder are closely connected, many objectives of the NAP also have an indirect effect on the Länder.

On 9 February 2012, the Länder issued the following statement on the draft version of the NAP on Disability:

„In line with the concept of inclusion of the UN Disability Rights Convention, the NAP for people with disabilities as a master plan should lead to the sole responsibility of the institutions which bear primary responsibility for the labour market, social insurance and social assistance. In this sense, all of the tasks in relation to work and employment should be assigned to the Public Employment Service, all those related to treatment, medical therapeutic aids, rehabilitation and therapy should be assigned to the social insurance institutions, pension entitlements should be assigned to pension insurance institutions, and the necessary social benefits to the organisations responsible for social assistance. Mixed financing should therefore be avoided in the future in order to bring about effective and transparent administration and thus ensure simpler access to benefits and services for people with disabilities.

In general it can be noted that the federal government has obviously carried out no financial assessment of the listed measures, and that the effects on the Länder are therefore unforeseeable (such as in personal assistance, cover under social insurance law, inclusive model regions in the schools sector etc.).“

In this context, the government wishes to point out that questions related to competences and the organisation of the administration are neither a preliminary issue nor the subject of the NAP on Disability. It is rather the case that how issues are organised (and if need be, reorganised) between the Federation and the Länder so that they are as expedient, costsaving and peopleorientated as possible is a matter for a future general **structural reform**. The Federal Social Office should be particularly mentioned here, which is recognised throughout Austria – especially among people with disabilities – and is thus to be extended as a competence centre and a key point of contact for people with disabilities and companies (see “5.4.3. Measures” on Page 77).

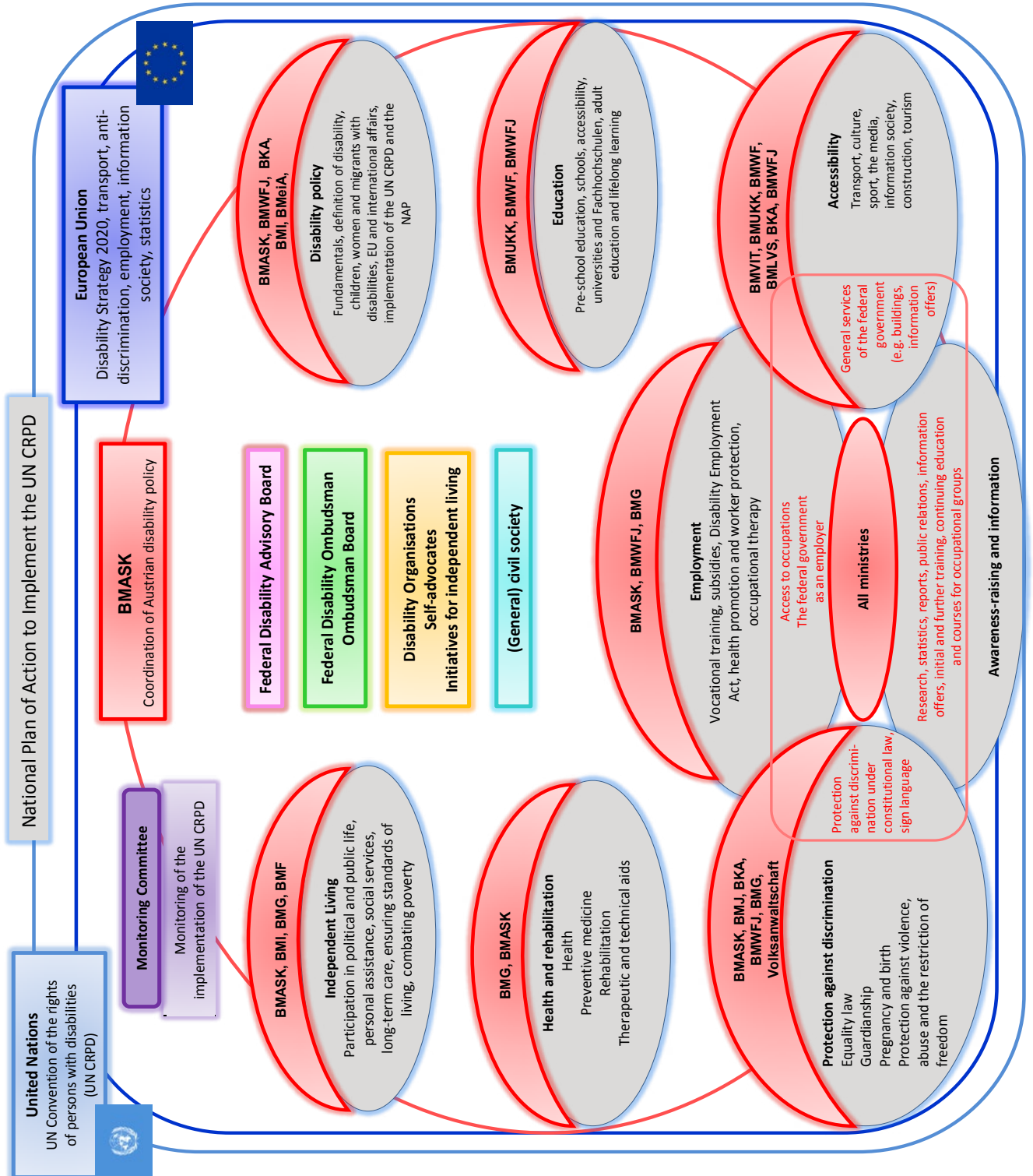
The measures listed in the NAP have already been included in the budgets of the respective ministries for 2012. The measures which have to be funded from future federal budgets have to be budgeted for **according to the financial situation in the individual ministries**. The ministries responsible for the respective measures have to make corresponding provisions for this spending in their budgets. The budgets of the Länder are not encumbered by the NAP on Disability, because an action plan on the part of the Federation cannot create obligations for the Länder.

1.1.2. Objectives

- The NAP on Disability is intended to represent the **guiding principles** of Austrian disability policy **until the year 2020** and to cover the objectives and specific measures in the field of disabilities.
- An important element in drawing up the action plan was the **involvement** of the organisations of people with disabilities and civil society. The people affected had multiple opportunities to **participate** and influence the contents of the NAP thanks to workshops and events on the NAP as well as meetings.
- The supervision of the NAP is to be carried by a **supervisory group** which will involve the Disability Ombudsman and the Monitoring Committee on the implementation of the UN Disability Rights Convention in Austria as well as the representatives of people with disabilities and civil society.
- An important task of the NAP supervisory group is to draw up a **list of priorities** for NAP measures and suitable indicators for measuring progress in relation to the NAP.
- The extent to which the objectives of the NAP Disability have been achieved will be examined by **interim assessments** and an evaluation at the end of the duration of the NAP.
- If the interim assessments conclude that political action is required, the NAP will be supplemented or changed accordingly. This dynamic element of the NAP makes it possible for it to be extended by suitable indicators and by setting priorities in the field of measures.

1.1.3. Measures

No.	Contents	Time	Competence
1	Establishment of a supervisory group for the NAP on Disability involving the organisations of people with disabilities	2012	BMASK
2	Interim assessments on the NAP on Disability	2015 – 2018	BMASK
3	Evaluation and conclusions about the NAP on Disability	2021	BMASK



1.2. The fundamentals of disability policy

1.2.1. Point of departure

The living situations of people with disabilities in Austria have improved in several ways during the last two decades. From among numerous legislative and financial measures, four areas stand out particularly. 1993 saw the introduction of staged, needs orientated **long-term care allowance**, to which there is a legally enforceable entitlement independent of the claimant's income and assets. Also in the 1990s, a legal right (with the freedom of choice) to joint lessons for disabled and non-disabled children until the end of the 8th school year (**integration in schools**) was created. In the field of work, great efforts were made to improve the employment situation of people with disabilities by providing targeted support for projects (the **employment campaign** for people with disabilities). Equality before the law for disabled people received an important impulse with the introduction of **legislation on disability equality** in 2006.

Overall, 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 that (cf. World report on disability 2011) there are around 1 billion people with disabilities worldwide (**15% of the world population**). This WHO estimate is based on the evaluation of numerous studies. Those people who have been confronted with temporary problems related to their mobility or other impairments (e.g. people who have had accidents or are undergoing medical treatment, mothers/fathers with prams and small children) also have experience of disability. For all these groups of persons it is important that disability policy creates conditions from which as many people as possible will benefit. A key aspect is that the environment must be designed to be as **accessible** as possible in every sense.

According to a microcensus survey carried out on behalf of the Ministry of Social Affairs by Statistics Austria between October 2007 and February 2008, approximately 20.5% of the resident population in private households in **Austria** have a permanent impairment. This represents a total of around **1.7 million people**.

In theory, the principles of involvement and mainstreaming have been recognised for a long time now. Nevertheless, the legal, administrative and budgetary plans of the government do not always take the concerns of people with disabilities into consideration. There is as yet still no nationwide **disability mainstreaming** policy which needs to be fulfilled by all relevant entities.

However, there are exemplary signs of functioning disability mainstreaming in practice. For example, the Federal Chancellery (BKA) pointed out to the ministries in an ordinance as early as the 1990s that the umbrella organisation of the disabled persons' organisations ÖAR should be involved in plans for legis-

lation. In this context please refer to the various areas of life in Chapter “3. Accessibility” on Page 43, efforts to create an inclusive schools system in Chapter “4. Education” on Page 61 and the activities of the Labour Inspectorate and the Public Employment Service in Chapter “5. Employment” on Page 71.

1.2.2. Objectives

- People with disabilities should be able to lead **an independent life** in dignity, and they should be enabled to **fully participate in society**. People with disabilities must not be discriminated against or excluded at school, at work or socially. Their rights in these respects need to be strengthened.
- People with disabilities should be appreciated within society, and false images about the reality of their lives should be corrected. There has to be general recognition of the fact that people with disabilities contribute towards diversity in society. This creates opportunities and benefits for everyone (**diversity approach**).
- The **visionary goal** for the year 2020 is, in agreement with the UN Disability Rights Convention – **an inclusive society** in which disabled and other disadvantaged people can participate in all activities of society. Inclusion goes beyond – unlike the integration and rehabilitation approach – 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 differ as little as possible from those of non-disabled people (see the 1992 Disability Concept).
- In relation to plans which are relevant to people with disabilities, the latter should be involved from an early stage and then consulted on an ongoing basis, as foreseen by Art. 4 of the UN Disability Rights Convention (**principle of involvement**). Their involvement should take place on the one hand via the Federal Disability Advisory Board, and on the other hand via working groups and working meetings on specific issues.
- **Disability mainstreaming** must be supported and promoted in the entire federal administration, the federal legislature and jurisdiction. Particular attention should be paid to ensuring that legislative projects and the entire activities of the federal administration are in line with the principles and objectives of the legislation on disability equality.
- Public procurement on the basis of the **federal legislation on the public procurement law** should be increasingly linked to the conditions of accessibility and the employment of people with disabilities.
- The increased self-confidence of people with learning disabilities should be further strengthened by providing the **self-advocacy initiatives of people with learning disabilities** with sufficient state support, and ensuring that they are also heard in the Federal Disability Advisory Board.

1.3. Definition of disability

1.2.3. Measures

No.	Contents	Time	Competence
4	Obligatory impact assessment of the effects on people with disabilities of all planned legislation of the federal government via appropriate commentaries in the introduction to a government bill	2012 – 2020	All ministries
5	Extension of the Federal Disability Advisory Board	2012	BMASK
6	Official recognition of the position of the “Österreichische Arbeitsgemeinschaft für Rehabilitation” (ÖAR) as the umbrella organisation of the organisations of people with disabilities	2012 – 2020	BMASK
7	Depending on the budgetary situation, financial support for the associations of people with disabilities , the independent living movement, self-advocates with learning difficulties, self-help NGOs, parents’ initiatives and projects of general interest in the field of disabilities.	2012 – 2020	All ministries
8	Strengthening of the Federal Social Office as a competence centre and main point of contact for people with disabilities and for companies which employ people with disabilities	2012 – 2015	BMASK
9	Internal recommendations on the use of integrative companies, the adherence to standards related to the equality of people with disabilities, and the fulfilment of the criterion of accessibility within the Public Procurement Act .	2012 – 2020	All ministries, plus the government’s procurement company
10	Extension of the advice provided to people with disabilities by using existing specialist advice centres	2012 – 2020	All ministries

1.3. Definition of disability

1.3.1. Point of departure

The Federal Constitution Act contains no definition of who should be responsible for the issue of disability. Legislation on disability belongs to the so-called cross-cutting issues. A large number of federal and Länder acts contain legal provisions which are of significance to people with disabilities. These acts have varying objectives and thus contain numerous **different definitions of disability**. In the field of the disability equality of, for example, it is a question of comprehensive (in as far as this is possible) protection in the area of the federal administration, and in access to and the provision of goods and services which are available to the public. The Public Employment Service, on the other hand, supports people who have particular difficulty in gaining a foothold in the labour market due to their disability.

Numerous other institutions try to compensate for disadvantages arising through disability, for example via financial support. In this respect it is in the interests of people with disabilities that there are different definitions of disability.

The **2010 Assessment Regulation** created modern medical criteria and parameters to determine the extent of a disability during an examination by medical experts. The Assessment Regulation replaced the Indicative Rate Regulation from 1957 – which was excessively oriented towards persons injured during the war – for all new cases. 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 the BMASK and the Federal Social Office.

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

When using the so-called MAS table (MAS = multi-axial classification system), social aspects are taken into account in **medical examinations** according to the new Assessment Regulation. In this way, social competences are also considered when assessing mental abilities.

1.3.2. Objectives

- Weighting **social aspects** sufficiently and in the best possible way is a constant challenge in the **assessment** of disabilities. The definitions and assessment of disabilities have to reflect the social model of disability as defined by the UN Convention.

1.3.3. Measures

No.	Contents	Time	Competence
11	Application and ongoing evaluation of the new Assessment Regulation in the drawing up of medical reports.	2012 – 2020	BMASK
12	Carrying out the assessment of disabilities in a way which complies with the UN Disability Rights Convention, and examination of the possibility of the establishment of a joint examination centre	2020	BMASK

1.4. Children with disabilities

1.4.1. Point of departure

According to Article 7 of the UN Disability Rights Convention, Austria must take all necessary measures to ensure that children with disabilities, exactly like other children, enjoy all human rights and basic freedoms.

As part of the **check-ups included in the Mother-Child Pass scheme**, care is taken to recognise certain conditions as early as possible so that **early support measures and/or therapy** can take place. Some regional contact points and coordination offices for children with disabilities already exist. The task of these offices is to coordinate the different treatments offered for children with disabilities. Alongside the advantage for those affected of a one-stop shop, it also enables institutions to carry out their administration work more efficiently.

The new **legislation on children's legal advisors** (see Section 104 of the Non-Contentious Proceedings Act) has provided since 1 July 2010 for the option that the authorities can, when this appears necessary, unilaterally nominate a legal advisor for a child in proceedings on the custody and rights of access for minors under the age of 14. Children with difficult living environments as well as children with disabilities benefit particularly from this new regulation.

According to Article 7 paragraph 1 of the Federal Constitution Act, the equal treatment of disabled and non-disabled persons in all fields of everyday life has to be ensured. The 2011 **Federal Constitutional Act on the rights of children** expressly guarantees every child with disabilities an entitlement to the protection and care which take its particular needs into account.

The provision of an increased number of **child-care places** since 2008 has been intended to combat child poverty and contribute towards the compatibility of family life and work. The federal government has provided funding of a total of €100 million for the years 2008 – 2014 for this purpose. Due to the high level of individual care they require, children with disabilities benefit particularly from this state-supported offer.

Family allowance is a well-established benefit provided under the 1967 Family Burdens Equalisation Act (FLAG). For children who are considerably disabled or unable to work, an **increased amount of family allowance** is paid – in 2010 around 70,000 persons received this increased family allowance. There is no age limit to entitlement to family allowance for children who are permanently unable to work, provided that their disability arose before their 21st birthday or during vocational training before their 25th birthday.

Specialised family advice centres are funded in every province which offer **advice for families with disabled family members**. An annual sum of around €500,000 from funding earmarked for family advice is spent on

this focused counselling at (currently) 22 advice centres. Their target group has been defined as families which receive increased family allowance.

1.4.2. Objectives

- Children with disabilities should **be supported** early on and receive the individual therapy they require. Each therapy which is begun at the right time and is of high quality contributes towards reducing the likelihood or severity of a permanent severe disability.
- The parents and family of a disabled child should be particularly supported in their aim of looking after their child **within the family**.
- To enable or ensure that their parents can work, children with disabilities should be able to stay in public or private child care facilities (**in nursery schools or afternoon care facilities**). They should receive pedagogic support and encouragement as close as possible to where they live.
- Tax credits and increased **family allowance** for severely disabled children should continue to be available.
- **Child rehabilitation** services are to be extended on the basis of a study by Gesundheit Österreich GmbH and offered in a meaningful and uncomplicated way. In this context, clear divisions between the responsibilities of different entities should be created.

1.4.3. Measures

No.	Contents	Time	Competence
13	Awareness-raising about the situation and the rights of children with disabilities, also via information on the website www.kinderrechte.gv.at	2012 – 2020	BMWFJ
14	Support for parents of children with disabilities and an easing of their burden via public information offers, including those on the website www.elternbildung.at	2012 – 2020	BMWFJ
15	Subsidisation of specialist family advice centres which offer advice for families with disabled family members .	2012 – 2020	BMWFJ
16	Taking children with disabilities into account as part of the child health strategy	2012 – 2020	BMG
17	Extension of child rehabilitation with clear competences	2012 – 2020	BMASK, BMG, social insurance institutions, Länder

1.5. Women with disabilities

1.5.1. Point of departure

According to Article 6 of the UN Disability Rights Convention, Austria must take all necessary measures to ensure that women with disabilities can enjoy all human rights and basic freedoms fully and equally. Around **20.8% of the female** and 20.2% of the male **population** have a long-lasting impairment. In the age group of the under – 60s, men are somewhat more affected than women, but in the age group of the over-60s, women are somewhat more frequently affected by long-lasting impairments.

Alongside strain caused by their disabilities, women are additionally burdened by genderspecific discrimination (**multiple discrimination**).

Statistical data shows that women with disabilities are not only in a **markedly worse position** than non-disabled women, but also with regard to disabled men. Women with disabilities are disadvantaged in the areas of education, vocational training, employment (frequently poorly paid, typical women's occupations, and receive lower social benefits when unemployed) and old age (low pensions). Women with disabilities are more frequently affected by poverty than men with disabilities.

Women and girls with disabilities are in particular danger of becoming **victims of violence and sexual violence**. They are a particularly endangered risk group – often solely due to a difficulty in communicating which frequently accompanies a disability, such as a learning disability or deafness.

In the current Austrian **Women's Health Report 2010 – 2011**, the following are portrayed in depth: the living situations of women with disabilities, challenges and obstacles in the health care of women with disabilities, and the political framework and measures for change (can be viewed and downloaded at www.bmgf.gv.at).

1.5.2. Objectives

- The **gender perspective** has to be included in all plans related to disability policy.
- The **right to self-determination** should cover all the areas of the lives of women with disabilities, including the right to self-determined sexuality.
- **Violence against women with disabilities** should be the subject of more public debates, and women with disabilities should be supported in recognising violence against themselves and defending themselves effectively when necessary.
- The personal rights of women with disabilities should be strengthened, and their **access to medical services** (particularly to gynaecological examinations) should be improved. Those affected and the persons who look after them should receive sufficient information so that the necessary visits to the

doctor can take place. It should also be possible that respect for the privacy of women with disabilities is preserved during visits to doctors.

1.5.3. Measures (see also the individual measures in the respective chapters)

No.	Contents	Time	Competence
18	Gender-specific evaluations of disability-related statistical surveys, while adhering to the provisions on data protection	2012 – 2020	All ministries
19	Gender-specific support for women and girls with disabilities within the framework of education	2012 – 2020	BMUKK, BMWF

1.6. Older people with disabilities

1.6.1. Point of departure

Advances in medical care and the general improvement of the standard of living in recent decades have made it possible for many people to **reach a higher age than they would have in the past**. Alongside those people who grow old with a disability, there are also a growing number of persons who **become disabled** due to an **age-related loss of their abilities**.

The subject of age and disability is of increasing significance to society, and has been the subject of several conferences in recent years. For example, during the Austrian EU Presidency an international conference took place in Graz on 8–9 June 2006 with the title '**Age and Disability** – people with disabilities are getting older, older people are becoming disabled', and on 30 June–1 July 2011 in Linz there was a European conference organised by the European Association of Service Providers for Persons with Disabilities (EASPD) entitled '**Old, so what? Independent Living for Senior Citizens with Disabilities**'. The conference participants adopted the **Linz Declaration** on independent living for people who are becoming older with disabilities (www.easpd.eu).

The EU has declared **2012** to be the **European Year** for Active Ageing and Solidarity between Generations. The European Year 2012 is intended to highlight the challenges and opportunities of a society which is living longer, and the diversity of possibilities for managing ageing and old age in their many dimensions. Among the numerous measures and activities of this EU year there are also some for older people with disabilities (www.aktivaltern2012.at).

In the survey 'People with Disabilities' by Statistics Austria from 2007, **48.4%** of the **over 60s** stated that they were **permanently limited** due to an impairment in everyday life (by comparison, the figure for the entire resident population is around 20.5%). For 67.7% of those over 60 this means problems with movement and mobility, while for 22.7% it is problems with their eyesight, for 16.9% it is hearing problems, and 40.4% have

1.7. Migrants with disabilities

to deal with multiple impairments. Older women living alone are affected most by multiple impairments. When multiple impairments, old age and living alone occur simultaneously, this leads to a greater need for care among this sector of the population.

The BMVIT initiated the programme ‘benefit’ in 2008 in order to develop ICT-based **products and services for older people**. The same goal is being pursued by the AAL Joint Programme (Ambient Assisted Living) as a European initiative in which Austria has also participated from its outset (2008).

1.6.2. Objectives

- Older people with disabilities should be enabled to live an **inclusive lifestyle**, particularly in relation to their residential environment.
- As far as possible, older people with disabilities should be able to live an **independent life** at home.
- The **opportunities for contact** among older people with disabilities and the exchange between generations should be promoted (e.g. via measures in the field of housing).
- The Federation will make use of its competences in **senior citizens’ policy** and give increased attention to the issue of older people with disabilities and the related problems.
- For the **very old**, opportunities for better participation in society should be created.

1.6.3. Measures (see also measures for the benefit of older people with disabilities in other chapters of the NAP)

No.	Contents	Time	Competence
20	Continuation of the ‘benefit’ programme (a technology programme to develop ICT-based products and services for older people) after an invitation to tender	2011 – 2013	BMVIT
21	Continuation of the EU programme Ambient Assisted Living – AAL after an invitation to tender	2011 – 2013	BMVIT
22	Continuation of the series of folders entitled “Recognising Violence” to raise public awareness for the issue of violence against older people	2012 – 2013	BMASK

1.7. Migrants with disabilities

1.7.1. Point of departure

People with disabilities **and** a migrant background are at an increased risk of becoming victims of discrimination or disadvantages in everyday life and at work. In case in which a person combines both attributes (being disabled **and** a migrant), appropriate legislative, political and social conditions need

to be created to avoid **multiple discrimination**. Disabled women with migrant backgrounds can be affected by threefold discrimination.

Disabled people with migrant backgrounds can assert the rights they have according to the **disability equality law** without restrictions, as neither citizenship nor ethnic origin are a condition for their entitlement to do so. Disabled people who qualify for special support according to the **Disability Employment Act** require Austrian citizenship or that of an EU or EEA state. However, disabled refugees who have been granted the right to stay permanently and who are at least 50% disabled are exempted. Persons with disabilities who receive special support can also obtain subsidies – a relevant example in this context is a subsidy towards the costs of a sign language interpreter for deaf asylum seekers. The **Federal Disability Act** requires that a person have Austrian citizenship or is entitled to remain in the country permanently in order to obtain subsidies from the Support Fund.

On the basis of the Agreement between the Federation and the Länder according to Art.15a B-VG on joint measures to provide basic care for foreigners who require help and protection in Austria (asylum seekers, those eligible for asylum, displaced persons and others who for legal or practical reasons cannot be deported), which is known as the **Agreement on the Fulfilment of Basic Needs, up to 700 places** throughout Austria are to be created for the target group of persons with an increased need for support. Those people who are entitled to an increased level of support particularly include people with disabilities (also those with severe psychiatric diseases).

1.7.2. Objectives

- Policy on migration and the fulfilment of the basic needs of foreign citizens who require help and protection should take into account the **needs of disabled people with migrant backgrounds and disabled foreign citizens who require protection** and should thus provide them and their families with opportunities to participate in employment and everyday life. If support measures begin early and are followed up consistently, these people who have migrated to Austria have a good chance of permanent integration.

1.7.3. Measures

No.	Contents	Time	Competence
23	Support of people with disabilities in the context of taking care of foreign citizens in need of help and protection	2012 – 2020	BMI
24	Exceptions for migrants with language impairments in relation to the obligation to prove their knowledge of elementary German language use (for first-time applicants) according to Section 21a of the Settlement and Residence Act (NAG), higher elementary language use for the fulfilment of Module 1 of the Integration Agreement, and independent language use for the fulfilment of Module 2 of the Integration Agreement (Sections 14 to 14b of the NAG) and the award of citizenship (Section 10a para 2 line 3 of the Citizenship Act (StbG))	2012 – 2020	BMI
25	Targeted promotion of the employment of people with disabilities with migrant backgrounds as part of the employment campaign for people with disabilities and via AMS measures	2016 – 2020	BMASK, Federal Social Office, AMS

1.8. EU disability policy

1.8.1. Point of departure

On 15 November 2010, the European Commission presented the communication ‘European Disability Strategy **2010 – 2020: A Renewed commitment to a Barrier-Free Europe**’. This communication contains the new **EU strategy in the field of disabilities**, which covers the next ten years. The main focuses of the EU strategy are largely similar to those in the Austrian NAP on Disability.

On 2 July 2008, the European Commission presented a proposal for a Directive of the Council on the application of the principle of equal treatment regardless of religion or belief, sexual orientation, age or disability, which goes beyond the existing protection against discrimination in the world of work (**extended anti-discrimination Directive**). The proposal is based on Article 19 of the Treaty on the Functioning of the European Union (TFEU) and contains a ban on discrimination in the fields of social protection, education and access to goods and services for the reasons given above. However, the negotiations in the Council working group on social issues are difficult due to the principle of unanimity laid down in Art. 19 of the TFEU and have therefore not yet been concluded. On repeated occasions in these negotiations, Austria has called for a high level of protection for people with disabilities – particularly in the field of financial services.

In **the field of transport**, four regulations on passengers’ rights have been passed in recent years, which considerably strengthen the rights of people with disabilities in transport by air, rail, sea and bus, and can be viewed as an important contribution to functioning **disability mainstreaming** in EU legislation.

In disability policy, Austria works together with the European Commission and the 26 other member states within the **Disability High Level Group**.

The EU joined the **UN Disability Rights Convention** as a result of a decision by the Council on 26 November 2009 (after **ratification** the Convention came into force in the EU on 23 January 2011). The European Commission works closely together with the Member States on the implementation of the Convention. The conditions for cooperation were laid down by the Council in a special **code of conduct**.

1.8.2. Objectives

- Austria actively supports the objectives of the **EU disability strategy** 2010 – 2020 and backs a thorough implementation of **disability mainstreaming** in all fields of politics and law
- Austria is an active supporter of an **independent mechanism** at EU level which corresponds to the UN Disability Rights Convention (Article 33) and monitors the implementation of the Convention with regard to EU competences, including international relations and cooperation on development.

1.8.3. Measures

No.	Contents	Time	Competence
26	Austria's commitment to improvements in the field of EU disability policy via appropriate cooperation with the European Commission and the other Member States, as well as participation in EU committees, particularly the Disability High Level Group	2012 – 2020	BMASK
27	Efforts in the negotiations on the proposal for an extended EU anti-discrimination directive to achieve the best possible protection for people with disabilities	2012 – 2020	BMASK

1.9. International disability policy

1.9.1. Point of departure

In international committees, Austria has actively promoted the implementation of **disability mainstreaming** for years now, as well as the **rights** of people with disabilities. In 2008, Austria was one of the first EU Member States to **ratify** the **UN Disability Rights Convention** 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.

During its membership of the **UN Security Council** (2009/2010) and particularly during its chairmanship in November 2009, Austria urged the adoption of a reference in Resolution 1894 of 2009 (on the

1.9. International disability policy

protection of civilians in armed conflicts) to the particular effects of armed conflicts on people with disabilities. In the Third Committee of the **UN General Assembly**, Austria is actively involved in the negotiations on the annual resolution regarding the **Millennium Development Goals** and disability, and jointly proposed the resolution.

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

As part of the 67th UN General Assembly, a **high-ranking UN meeting** is planned for September 2013 with the goal of strengthening efforts to ensure the access and inclusion of people with disabilities in all areas of **development work**.

The key Council of Europe document on disability policy is the **European Disability Action Plan 2006 – 2015**. This plan dates back to the European Conference of Ministers in Málaga during the 2003 European Year of Disabilities; it covers all areas of life and was adopted in 2006. In the course of the reorganisation of the areas of responsibility of the Council of Europe, the Council of Ministers also created a new basis for work on disability policy. At the start of 2012, a new committee of experts whose name is abbreviated to **CS-RPD** (Cohésion Sociale – Rights of People with Disabilities) replaced the ad-hoc-committee CAHPAH (Comité Ad-Hoc Plan d'Action Handicap) which had existed since 2008 and in which had been chaired by Austria since 2011.

1.9.2. Objectives

- Austria will continue to advocate that an increased emphasis be placed on the needs of people with disabilities in the relevant committees of the UN and in UN documents (disability mainstreaming at UN level).
- During Austrian membership of the UN Human Rights Council (2011 – 2014), Austria will continue to work with other members towards resolutions in the field of disability.

1.9.3. Measures

No.	Contents	Time	Competence
28	Drawing up resolutions on disability policy in the UN Human Rights Council	2011 – 2014	BMeiA, BMASK
29	Cooperation with other member states of the Council of Europe in the CS-RPD , the expert committee on disability policy	2012 – 2020	BMASK

1.10. Development cooperation and humanitarian aid

1.10.1. Point of departure

In compliance with **Article 32** of the UN Disability Rights Convention, Austria will take suitable and effective measures to realise the objectives of the Convention. According to the WHO, 80 % of people with disabilities live in developing countries. Persons with disabilities are among those people worst affected by poverty and exclusion.

The organisation Austrian **Development Cooperation** (OEZA) is bound to international and national requirements to structure its development programmes in such a way that people with disabilities are involved in them, and that they are accessible to these people. Based on the OEZA policy guidelines of governance and human rights, the OEZA pursues a **twin-track approach** whereby on the one hand specific projects are supported to promote the rights of people with disabilities, and on the other hand people with disabilities are involved in all programmes and projects. At a practical level, the handbook ‘Human Rights’ and the quality criteria on people with disabilities as well as the focus paper ‘People with Disabilities’ serve as guidelines for action.

Austrian development policy covers all state measures which are suitable to promote development in the relevant countries (OEZA and humanitarian aid including international aid for natural catastrophes). According to the provisions of the 2003 Austrian Development Cooperation Act (EZA-G 2003), the OEZA “has to take the needs of people with disabilities into account in a meaningful way” in all measures it takes. The actors who play in role in Austrian policy on development cooperation include the Federal Ministry of European and International Affairs (BMeiA) and the Austrian Development Agency, which are jointly responsible for the OEZA, as well as the Federal Ministry of Finance (BMF), the Federal Ministry of Agriculture, Forestry, the Environment and Water Management (BMLFUW) and the Federal Ministry of Defence and Sport (BMLVS) and the Austrian Development Bank.

Alongside private Austrian aid organisations which work internationally, the Austrian **Army** also provides **aid after natural disasters abroad** and pays particular attention to the special situation of people with disabilities while it is on these missions. Even while it is preparing and training for missions abroad, the army cooperates with the organisations of people with disabilities and makes use of their specialist know-how.

1.10.2. Objectives

- The Austrian Development Agency (**ADA**) should, via the OEZA, continue and optimise the existing measures, instruments and approaches laid down in Article 32 of the UN Disability Rights Convention and the Development Cooperation Act. The OEZA processes for the inclusion of people with disabilities should additionally be improved and disability mainstreaming promoted.

1.11. Implementation of the UN Disability Rights Convention

- The exchange of **good practice** with relevant national and international bodies in various forums, and active **participation in international networks** like the Global Partnership for Disability and Development (GPDD) should continue.
- The subject of the rights of people with disabilities should increasingly become an issue in politics and the activities of the **international financial institutions** and other international organisations and in political and human rights dialogues with partner countries.

1.10.3. Measures

No.	Contents	Time	Competence
30	Rehabilitation and strengthening of the human rights of people with disabilities, also via the continuation of NGO framework programmes	2009 – 2014	BMeiA, ADA
31	Support of people with disabilities in the context of anti-landmine campaigns , for example in Bosnia-Herzegovina and the southern Caucasus	2008 – 2012	BMeiA, ADA
32	The promotion of a university partnership between the University of Vienna and the University of Addis Abeba (Ethiopia) within the framework of the OEZAAPPEAR project: Responding to Poverty and Disability through Higher Education and Research (RESPONDHER), focusing on research, capacity building and the access of people with disabilities to higher education, the labour market and suitable technology	2011 – 2014	BMeiA, ADA
33	Initial and further training of the staff working at the OEZA on the inclusion of people with disabilities with the involvement of the specialist know-how of the organisations of disabled persons	2012 – 2020	BMeiA, ADA
34	Continuation of the working group 'Inclusion of people with disabilities in Austrian development cooperation', among other things to develop practical measures to promote disability mainstreaming in the OEZA	2012 – 2013	BMeiA, ADA
35	Ensuring that there is a Disabilities Representative in the ADA	2012 – 2020 (since 2009)	BMeiA, ADA

1.11. Implementation of the UN Disability Rights Convention

1.11.1. Point of departure

The UN Convention on the Rights of Persons with Disabilities (abbreviated to UN Disability Rights Convention), which was adopted by the UN General Assembly on 13 December 2006, is the first **human rights document** which focuses exclusively on people with disabilities. The UN Disability Rights Convention

has been in force in Austria since **26 October 2008**. The legislature, the administration and the jurisdiction all have to comply with the Convention. As Austria has also ratified the **Optional Protocol** of the Convention, people with disabilities additionally have the possibility to lodge individual complaints with the UN Disability Committee in Geneva.

The Convention applies to **all parts of a federal state** without exceptions. It thus applies to the Federation, the Länder and communities in Austria.

Austria sent its **first Country Report** on the implementation of the UN Disability Rights Convention to the United Nations in October 2010, in which it assessed the first two years since the coming into effect of the Convention in Austria (www.sozialministerium.at).

With regard to the national implementation and monitoring of the UN Disability Rights Convention, according to **Article 33** Austria has to introduce safeguards in three respects:

- The establishment of one or more state **focal points** for issues related to the implementation of the Convention (in accordance with the state's system of organisation).
- The creation or definition of a state **coordination mechanism** which is designed to facilitate the realisation of the relevant measures in various areas and at various levels
- The creation of an independent **mechanism to monitor** the Convention.

The **focal point** of the federal government is the Federal Ministry of Labour, Social Affairs and Consumer Protection (**BMASK**). The **Länder** have to establish their **own focal points** for their sphere of responsibility created by the federal structure in accordance with Article 33 of the UN Disability Rights Convention and the Federal Constitution.

The functioning of the Austrian **coordination mechanism** is ensured by the **BMASK** with the involvement of the **Federal Disability Advisory Board**. The BMASK pays particular attention to the involvement of civil society called for in Article 33 paragraph 3.

Since December 2008 there has been a monitoring mechanism in accordance with Article 33 para 2 of the UN Disability Rights Convention in the competence of the **federal government (Monitoring Committee** according to Section 13 Federal Disability Act).

Article 16 para 3 of the UN Disability Rights Convention contains the obligation to effectively monitor all facilities and programmes which are intended for people with disabilities by independent authorities in order to prevent exploitation, violence and abuse. In December 2011, Parliament decided to

1.11. Implementation of the UN Disability Rights Convention

regulate this **mechanism to prevent violence** jointly with the implementation of the Optional Protocol to the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (**OPCAT**) and to link it to it.

With effect from 1.7.2012 it is planned that the **Ombudsman Board** (with at least six interdisciplinary and multi-ethnic commissions) will be both a national mechanism to prevent (NPM) torture as well as an independent authority according to Article 16 para 3 of the UN Disability Rights Convention. The commissions will be able to carry out monitoring visits (also unannounced) throughout the country. The Ombudsman Board and its commissions have to be granted unrestricted access to all facilities and programmes for people with disabilities and be provided with all relevant information.

In April 2012 a **Human Rights Advisory Board** was established at the Ombudsman Board as a purely advisory body whose members and substitute members were proposed equally by NGOs and federal ministries. People with disabilities are also represented on the Human Rights Advisory Board.

1.11.2. Objectives

- Austria will implement its obligations according to the UN Disability Rights Convention conscientiously and at the same time also fulfil the formal and process-related principles.
- All of the **Länder** are also obliged to nominate or establish **focal points** in accordance with Article 33 para 1, **monitoring committees** in accordance with Art. 33 para 2, and **independent authorities** in accordance with Art. 16 para 3 of the UN Disability Rights Convention.

1.11.3. Measures

No.	Contents	Time	Competence
36	Coordination of the implementation of the UN Disability Rights Convention in Austria with the involvement of the Federal Disability Advisory Board	2012 – 2020	BMASK
37	Establishment of the Ombudsman Board as an independent authority for the prevention of exploitation, violence and abuse in accordance with Art. 16 para 3 of the UN Disability Rights Convention	2012	Federal Chancellery (BKA) and Länder
38	Nomination of focal points according to Art. 33 para 1 of the UN Convention in the Länder (Länder focal points)	2013	Länder
39	Establishment of independent monitoring mechanisms in accordance with Art. 33 para 2 of the UN Convention in the Länder (Länder monitoring committees)	2013	Länder
40	Drawing up and sending of the second Austrian Country Report on the implementation of the UN Disability Rights Convention	2017	BMASK, BMeiA

2. PROTECTION AGAINST DISCRIMINATION

In the **UN Disability Rights Convention**, protection against discrimination is an important principle which is particularly embodied in the Articles 1 (Purpose), 3 (General principles), 4 (General obligations) and 5 (Equality and non-discrimination).

According to this, the signatory states are obliged to prohibit discrimination because of disability, and to guarantee people with disabilities equal and effective legal protection against discrimination.

According to a Eurobarometer survey, over 50% of the population in the EU believes that discrimination due to a disability or old age is widespread in the EU. The **EU Disability Strategy 2010 – 2020** (COM (2010) 636 final) therefore sees protection against discrimination as a key area. The strategy pursues two approaches: firstly to apply the valid EU anti-discrimination regulations and secondly to conduct an active policy to combat discrimination and promote equal opportunities.

The EU is also planning to support and supplement the national strategies and programmes of the Member States with suitable measures. In this context, the Disability Strategy mentions the examination of national legislation on legal capacity (e.g. in the fields of guardianship and participation in elections) and their adaptation to the principles and objectives of the UN Disability Rights Convention, particularly the principle of living independently.

The key goal of Austrian disability policy is to enable people to participate in the life of society on an equal basis and to eliminate all forms of discrimination. Important steps towards this were the inclusion of protection against discrimination in the Federal Constitution and the creation of **legislation on disability equality** which goes far beyond the EU Framework Directive 2000/78 on equal treatment in employment and occupation, and which for the first time includes an entitlement to damages for people with disabilities in the case of discrimination.

2.1. Protection against discrimination in the Constitution

2.1.1. Point of departure

In 1997, protection against discrimination due to disability was included in the Austrian **Federal Constitution**. According to this, nobody may be discriminated against because of his or her disability (Art. 7 para 1). In addition, Art. 7 states that the federal government, the Länder and communities commit themselves to guaranteeing the equal treatment of disabled and nondisabled persons in all fields of everyday life.

2.2. Legislation on equal rights for people with disabilities

However, discrimination can be expressed not only in actions but also in the use of language which conveys a discriminatory attitude in relation to people with disabilities. For example, legal provisions still use terms which describe disabilities as a defect, a flawed state or even as inferiority (e.g. physical deficiency).

2.1.2. Objectives

- Respect and esteem towards people with disabilities also express themselves in language. Outdated terms in legal provisions (e.g. invalidity, deficiency), should therefore be replaced by modern and discrimination-free terms such as 'disability' or 'people with disabilities'. However, care needs to be taken that legal uncertainty due to the use of the new terms in practice is avoided.

2.1.3. Measures

No.	Contents	Time	Competence
41	Examination of federal legislation with regard to the use of discriminating terms and the amendment of such provisions	ab 2012	All ministries
42	Inclusion of a passage on the avoidance of discriminatory formulations in the legislative guidelines of the federal government	2012	BKA

2.2. Legislation on equal rights for people with disabilities

2.2.1. Point of departure

In the past 20 years, the issues of **human rights** and **equality** have dominated Austrian disability politics and policy: People with disabilities are no longer seen as being in need of care, but as individuals who participate in what society has to offer.

In the **legislation on disability equality** in force since 2006 this change is shown particularly strongly.

The ban on discrimination which is regulated by the **Federal Disability Equality Act** and by the **Disability Employment Act** was and is a milestone in Austrian disability policy. For the first time, people with disabilities have a right to damages in the case of discrimination. Experiences made until now have shown that the package of laws on disability equality have made selfdetermination, equal opportunities and accessibility into issues of public interest.

People with disabilities who feel discriminated against are advised and supported by the newlycreated **Disability Ombudsman**.

An **evaluation** carried out in 2010 – 2011 shows that the legislation on disability equality is viewed very positively and has a noticeably positive effect on the situation of people with disabilities. There is a high level of acceptance of the legal provisions; the conciliation proceedings at the Federal Social Office which have to be carried out before a court case have particularly proven themselves to be a way of settling disputes which also raises the awareness of many conciliation parties. Since the coming into force of the package of laws on 1 January 2006, there have been 1,121 conciliation cases (as at 31 March 2012). Of the 1,031 completed cases on 31 March 2012, a **settlement** had been reached in 487 cases (47.2 % of completed cases). In 130 cases (12.6%), the request for conciliation proceedings was withdrawn, whereby experience shows that such withdrawals are usually due to a previous settlement. 414 conciliation cases (40.2 %) ended without a settlement.

A need for improvement was established in the following fields: particularly in conciliation proceedings due to discrimination because of a lack of accessibility, there are often agreements based on creative solutions for individual cases. However, there is a lack of publicly available information on successful conciliation cases (**examples of good practice**) which would help people in similar situations to reach agreement more quickly. The case law on disability equality legislation also remains largely unknown.

If there is no agreement in conciliation proceedings, the legal consequences of discrimination are merely a damages case. There is no possibility to sue for **elimination** and/or to take out an **injunction**.

Class actions have not yet been used, and filing such a suit is made more difficult by special formal conditions.

There are frequent problems in the field of **private insurance** (e.g. additional health insurance, life insurance). The fact that someone is disabled is often used to either refuse to insure them or only to offer insurance with higher premiums, or to exclude certain aspects from the cover.

The work of the Disability Ombudsman is evaluated as positive, but an extension of his powers has been called for.

2.2.2. Objectives

- Better **information** on disability equality legislation and particularly on successful agreements in individual cases should help all those involved to find effective solutions.
- More **effective** combating of discrimination should be achieved through the extension and improvement of legal protection measures available to those affected, both for individual lawsuits as well as class actions.

2.3. Guardianship

- The ban on discrimination for disability reasons should also be strengthened in the field of private **insurance** policies.
- The support which can be offered by the **Disability Ombudsman** should be extended in the interests of people with disabilities.

2.2.3. Measures

No.	Contents	Time	Competence
43	A broadly-based discussion on the design of a right to elimination and injunction in the federal legislation on disability equality in relation to its reasonability criteria.	2014	BMASK
44	Increased public relations work on disability equality legislation as well as barrier-free access to anonymised data on successful settlements in individual cases	ab 2013	BMASK
45	Improvements in the field of class actions	2014	BMASK
46	The collection and accessible publication of case law on disability equality legislation	ab 2013	BMASK, BMJ
47	Working group on protection against discrimination due to disability in the field of private insurance	2014	BMJ, BMF, BMASK,
48	Improvement of the provision of information (publication of examples of best practice by the Disability Ombudsman)	2014	BMASK

2.3. Guardianship

2.3.1. Point of departure

The goal of the **legislation on guardianship** is to offer suitable support and protection to adults who are not or no longer in a position to deal with their affairs without disadvantages for themselves. The legislation on guardianship introduced in 1984 lays down that – in accordance with the requirements of the individual case – guardians are nominated for **one issue**, for **several** specific issues or for **all matters**. In contrast to the old incapacity regulations, this was intended to lead to a reduction in the number of cases and above all to individual solutions for individual cases. However, practice has shown that on the one hand the number of guardianships has risen steeply, while on the other hand little use is made of the possibility to appoint guardians only for certain matters.

The latest comprehensive **amendment in 2006** was therefore intended to ensure that guardians are only appointed in cases where this is absolutely required, particularly when there is a lack of other help (e.g. of an informal kind via assistance from family and friends, or within the framework of self-chosen power of attorney or representation by relatives).

Another main concern of the amendment was to strengthen the **self-determination** of those affected by guardianship. In issues such as medical matters or in relation to moving house, for example, the persons – as long as they are capable of insights and making reasoned decisions – are always asked to decide even if they are subject to a guardianship order. Thirdly, the quality of guardianship should be improved via the introduction of maximum levels and the extension of guardianship by associations (the so-called clearing function).

Currently however, (the restriction of) legal capacity is the only aspect of guardianship which is being considered, and is therefore only regulated in civil law. There is a lack of an overall model which also contains the establishment of structures for **supported decision-making**.

Guardianship has a tense relationship to the principle of **living independently** – which is particularly emphasised in the UN Disability Rights Convention, according to which the signatory states have to take effective and suitable measures to enable people with disabilities to fully enjoy their right to an independent life and their full inclusion into the community and participation in society (Article 19).

2.3.2. Objectives

- The improvements planned in the 2006 amendment to guardianship law should be **more strongly embodied** among judges and in the field of guardianship by associations. The goal is to appoint guardians only in those cases where they are absolutely necessary.
- Guardians should be made more aware of the special concerns of people with disabilities, as should judges who deal with guardianship cases.
- A **reform** of guardianship legislation is planned with the participation of people with disabilities, with the goal of introducing alternatives to guardianship.
- Structures for **supported decision-making** have to be established so that the appointment of guardians can be avoided. Those affected will thus receive support when it comes to making important personal decisions, and also in implementing them.
- **Guardianship by associations** should be used efficiently for those cases which require professional support.

2.3.3. Measures

No.	Contents	Time	Competence
49	Amendment of guardianship legislation with the participation of people with disabilities	2013/2014	BMJ
50	Creation of a model of supported decision-making with the involvement of people with disabilities	2013/2014	BMJ

No.	Contents	Time	Competence
51	Ongoing further training events with the involvement of self-advocates in order to ensure that the current guardianship legislation is applied more thoroughly and to support the further development of guardianship law.	2012 – 2020	BMJ
52	Via increased funding, guardianship associations should be enabled to take over additional cases and functions	2012 – 2020	BMJ

2.4. Pregnancy and childbirth

2.4.1. Point of departure

Due to progress in prenatal diagnosis, the current legal position and the verdicts reached by the Supreme Court, a **debate** on the diverse medical, legal and ethical aspects of the birth of children with disabilities has arisen.

According to current legislation, the birth of a disabled child can trigger **claims for damages** against a doctor treating the patient, even if the disability of the child has not been caused by the actions of the doctor, but when the doctor has negligently, deliberately or knowingly made a wrong diagnosis or has not (or insufficiently) fulfilled his or her obligation to provide information. This can lead to doctors carrying out all of the existing examinations and screenings if possible.

In a discussion on this issue in 2010, the majority of the (scientific, legal and medical) experts present as well as the representatives of the stakeholders involved emphasised that the birth of a child should not, of course, be viewed as a case of **damage** which has been caused. At the start of 2011, the Federal Ministry of Justice (BMJ) presented an amendment to the law on damages which largely excluded the liability of doctors providing treatment. The consultation process for this draft bill did not lead to a uniform opinion. In the large number of critical statements made, arrangements about the introduction of social safeguards for those affected were called for (among other things).

It would therefore be necessary to ensure the provision of accompanying social benefits and services as well as to place particular emphasis on **comprehensive support** for families with disabled children.

In connection with prenatal examinations (such as those within the framework of the mother-child pass which includes obstetric examinations, laboratory tests and ultrasound examinations), comprehensive **counselling** should be offered before, during and after pregnancy for the woman and her partner. In addition, clear rules on the 'state of the art' of medical practice should be drawn up which deal with issues of **diagnosis** and therapeutic measures.

Apart from this, the problem of the implantation of multiple fetuses in the case of in vitro fertilisation and the resulting calls for single embryo transfer should be dealt with.

2.4.2. Objectives

- It is indisputable that the birth of a child with a disability cannot constitute **any sort of damage** per se. Every child with all its characteristics, and of course also with one or more disabilities, is welcome in our society and deserves – particularly in the case of disability – the greatest possible attention and support.
- Explanations and information provided by doctors before prenatal examinations, the announcement of the results and the counselling and support of the families affected have to be carried out with the necessary **sensitivity**.
- The decision on the continuation or termination of a pregnancy must, within the applicable regulations, continue to be one taken **autonomously** by the women in question.
- Children with disabilities and their parents have to be enabled to participate in and be part of society. It is therefore necessary to ensure that they receive the **advice they require and financial support**.
- Before amendments to relevant legislation are drawn up, a broadly-based **discussion process** in the spirit of the UN Disability Rights Convention has to take place, particularly with people with disabilities.

2.4.3. Measures

No.	Contents	Time	Competence
53	Broad discussion process with all affected groups about medical, legal and ethical aspects of prenatal diagnosis	2012 – 2016	BMASK, BMJ, BKA, BMG, BMWFJ
54	Evaluation and extension of offers of psychosocial counselling in connection with prenatal diagnosis and after childbirth, with the involvement of the parents as well as the provision of information about the support available to them	2012 – 2020	BMG, Länder
55	The establishment of relevant training modules in the curricula for medical personnel on the theme of information and advice in prenatal diagnosis	2013 – 2015	BMG
56	Continuation of existing advice from specially trained staff as well as neutral, evidence-based and balanced information via advisory measures (e.g. by means of special brochures)	2012 – 2020	BMG, BMWFJ

2.5. Protection against violence and abuse

2.5.1. Point of departure

Alongside other groups of persons, **people with a disability** are also particularly at risk of becoming victims of violence and abuse, whereby girls and women with disabilities belong to an especially endangered group. Communication impairments are an additional risk factor which make it even more difficult to speak about experiences of violence.

Since 2006 victims have been entitled to **legal support** in criminal proceedings, and since 2009 they have also been entitled to psychosocial support in civil proceedings. This support in legal proceedings is provided by various organisations, and the costs are reimbursed by the Ministry of Justice (BMJ) by granting subsidies. Legal and psychosocial support during court proceedings have until now helped numerous people – the majority of them women and children – to cope better with the strain related to the cases.

In this course of their training, aspiring judges have to take part in various events on the theme of protection of victims held by officially recognised victim protection organisations. In addition, this compulsory training programme includes a two-week practical assignment at a facility for the protection of victims or welfare facility to raise the awareness of this issue among all candidates for the profession.

A database on help for victims and a management centre for victims' aid have also been established.

On the theme of protection against violence and abuse see also Art. 16 para 3 of the UN Disability Rights Convention (Chapter "1.11. Implementation of the UN Disability Rights Convention" on Page 28).

2.5.2. Objectives

- Efforts are being made to establish an efficient **network for protection against violence** within the sphere of the communities.
- Aid for victims should be **extended** in terms of quality and quantity.
- **Violence against girls and women with disabilities** has to become a public issue. It is necessary to provide information about the right of self-determination as well as preventive measures and ongoing support.

2.5.3. Measures

No.	Contents	Time	Competence
57	As part of the 'INNEN.SICHER' strategy (anti-violence strategy and complex victim work), local crisis support points will be established with the involvement of schools, youth welfare authorities, health facilities, communities, and family and social networks. They will also be responsible for the issue of violence against people with disabilities. Proactive victim protection work and networking are planned.	2013	BMI
58	Continuation of the compulsory participation by aspiring judges in events and internships on the theme of protection of victims in cooperation with officially recognised victim protection organisations.	2012 – 2020	BMJ
59	Funding for non-profit organisations and the Platform Against Violence, to which 45 organisations belong, for measures to raise the awareness of disseminators and the general public and for measures to professionalize the counselling system.	2012 – 2020	BKA, BMWFJ
60	Improvement of benefits and services for victims of crime	2013	BMASK

2.6. Legal protection of persons whose freedom has been restricted

2.6.1. Point of departure

Legal protection for those whose freedom has been restricted is offered by the Hospitalisation Act (UbG) and the Residential and Nursing Home Act (HeimAufG). The Hospitalisation Act regulates the issue of **the limitation of freedom** in hospitals and psychiatric departments. The Residential and Nursing Home Act applies to restrictions on the personal freedom of inhabitants of homes and non-psychiatric hospitals.

Both laws were carefully adapted to changed requirements in practice in an amendment in 2010.

The so-called revolving door syndrome (ending hospitalisation too soon leading to repeated hospitalisation within a short period) should be avoided in future by the adoption of a reasonability principle. When examining reasonability, it should be clarified whether the probability that a person's freedom will have to be limited again soon by enforced hospitalisation can be considerably reduced by progress which can be expected to be achieved by treating them via **temporary hospitalisation**. Changes in the law on hospitalisation alone, however, are not sufficient to avoid repeated hospitalisation. What is needed is above all the extension of **social-psychiatric support systems**.

2.7. Sign language

Via the choice of themes for their in-service training events and the participation of self-advocates, the awareness of judges responsible for cases related to the UbG and the HeimAufG (as well as that of patients' ombudspersons and residents' representatives) is raised for the particular level of intervention in a person's life caused by the restriction of their freedom.

2.6.2. Objectives

- Ongoing **awareness raising measures** for the particular level of intervention implied in the restriction of a person's freedom.
- The number of consecutive hospitalisations within a short period of time should be **reduced**. This also requires an improvement of outpatient psychiatric and social support.

2.6.3. Measures

No.	Contents	Time	Competence
61	Continuation of the programme to raise the awareness of judges, patients' ombudspersons and residents' representatives via in-service training events, also with the involvement of people with disabilities	2012 – 2020	BMJ
62	Evaluation of the amendment of the UbG in relation to whether there has been success in reducing the number of stressful consecutive hospitalisations	2012	BMJ
63	Ongoing training and information for staff as well as the implementation of IT-supported patient administration in detention centres	2012	BMJ

2.7. Sign language

2.7.1. Point of departure

Austrian sign language has been enshrined in the **Federal Constitution** since 2005. Art. 8 para 3 of 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 state will bear the costs of sign language interpreters.

The assumption of the costs of sign language interpreting is an important condition for the equal participation of deaf people in the life of society. However, there is a problem in practice concerning the **lack** of interpreters, so that appointments frequently have to be cancelled or postponed.

On the issue of sign language please also refer to Chapters “3. Accessibility” on Page 43 and “4. Education” on Page 61.

2.7.2. Objectives

- Deaf people should be able to communicate in all areas of the federal administration in **Austrian sign language**. This also applies to persons who are very hard of hearing, and deaf and blind people who use Austrian sign language. This requires a sufficient number of sign language interpreters and that the costs of sign language interpreting are assumed by the state.
- When awarding **subsidies**, care should be taken to ensure that communication in Austrian sign language is possible.

2.7.3. Measures

No.	Contents	Time	Competence
64	Close examination of procedural laws with regard to the arrangements on the assumption of costs for Austrian sign language interpretation and if necessary the amendment of such provisions.	ab 2012	All ministries
65	Training course for sign language interpreters	ab 2012	BMUKK, BMWF
66	Inclusion of a relevant passage in the conditions for subsidies , in order to make communication in Austrian sign language possible	2015	All ministries
67	Examination of the possible use of communication assistants	2015	All ministries
68	The promotion of competence in sign language in the general population (schools, in-service training, adult education)	2012 – 2020	All ministries

3. ACCESSIBILITY

3.1. General

3.1.1. Point of departure

The word **barrier** comes from French and means a hurdle or obstacle which restricts and hinders a person. A barrier can be of a physical nature, such as steps in a building, but a negative attitude towards people with disabilities can also be a barrier to access.

Accessibility or freedom from barriers is an **essential** condition for the equality of people with disabilities and their participation in society. Accessibility and the obligation to take suitable measures to ensure it are important prerequisites for the inclusion of people with disabilities and are therefore also included in the **UN Disability Rights Convention** (particularly in Article 9).

However, large sections of society are not aware of how complex accessibility can be. Information in **accessible language, tactile guidance systems** in the field of transport, enabling communication in **sign language**, induction loops or the use of speech to text services at conferences and seminars are aspects of accessible participation for people with disabilities which are still little known.

There is also little public awareness for the fact that accessibility is not a minorities' issue, but also contains advantages for people without disabilities. This is of particular significance against the background of demographic trends. Starting out from the concept of 'design for all' or 'universal design', the physical environment and products and services should be designed in such a way that it can be used as simply, without problems and efficiently by as large as possible a group of persons with different conditions, abilities, preferences or needs.

The EU is aware of the importance of the issue. The creation of accessibility is also a key objective of the **EU Disability Strategy** 2010–2020, COM (2010) 636. The first draft of the **European Accessibility Act**, a European law on the issue of accessibility, is planned for the end of 2012. The goal of this law is to improve the accessibility of goods and services in the internal market.

For more information on the issue of accessibility please also see Chapters "4. Education" on Page 61, "5. Employment" on Page 71 and "7. Health and rehabilitation" on Page 93.

3.1.2. Objectives

- Greater **awareness** of the issue of accessibility must be created in regional authorities, the business world and in the general public.

3.2. Services of the Federation

- The **coordination** of advice and support are planned as well as raising the awareness of the significance of accessibility as a human right.
- The inclusion of accessibility and design for all as a **compulsory subject** in all relevant training courses

3.1.3. Measures

No.	Contents	Time	Competence
69	Support for pilot schemes with the involvement of self-advocates on the theme of accessibility as a catalyst for a lasting increase in awareness	2012 – 2020	All ministries
70	Increased public relations work and the illustration of examples of good practice	2013 – 2020	All ministries
71	Creation of low-cost and barrier-free access to the standards which are essential for accessibility	2015	All ministries
72	Networking of offers of advice and increased information in the area of accessibility via the Federal Social Office	2013	BMASK

3.2. Services of the Federation

3.2.1. Point of departure

People with disabilities have to deal with a large amount of administrative hurdles, applications, medical examinations, interviews etc. in order to assert an individual legal right or submit a request. In this process, they repeatedly encounter obstacles which make access to government benefits and services difficult, such as barriers in the **built environment** or **barriers** in the field of **information** and **communication**.

The federal government has therefore committed itself in Section 8 of the Federal Disability Equality Act to “take suitable and specifically required measures to enable people with disabilities to gain access to its services and offers. In particular, it has to draw up a plan after consultations with the Austrian Umbrella Organisation of the organisations of people with disabilities (ÖAR) by 31 December 2006 to reduce construction related barriers to accessibility in the buildings it uses, and to implement the plan in stages (**Staged Plan for Federal Buildings**).”

In order to achieve accessibility, the **staged plans** specify **construction** measures such as the retrofitting of lifts, the installation and construction of accessible toilet facilities, the installation of tactile guidance systems, induction loops or high-contrast optical markings on glass surfaces. The plans also include further measures such as the creation of parking spaces for people with disabilities in the immediate

vicinity of the main entrance, and also organisational issues. For example, there are already accessible information centres near the main entrance of many buildings which offer not only information but also front office services (e.g. in courts: the certification of signatures or general information from the land registry or the registry of companies).

The Federal Government has always applied the specifications of the Austrian Standard B 1600 for all federal buildings, whether they are new constructions, complete renovations or major reconstruction. Problems with preservation orders, which often occur with historical buildings, can often be solved via constructional or organisational measures.

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 has to be ensured that their contents are also offered in easy to read versions and in Austrian sign language.

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

Information is, however, not only accessible via the internet – brochures, studies, reports etc. are of course also available in print. An increasing number of ministries are publishing **easy to 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.

3.2.2. Objectives

- The goal is to achieve the accessibility of all buildings used by the Federation according to the relevant **staged plan** with the involvement of the responsible bodies (Federal Real Estate Company, the Historical Buildings Authority, and third parties).
- Accessible **online procedures** are to be extended.
- The **information provided** should be designed in an accessible way by 2020 at the latest.
- Existing **funding programmes** for the elimination of barriers are to be continued.

3.2.3. Measures

No.	Contents	Time	Competence
73	Appointment of staff responsible for accessibility in every ministry and their inclusion in the planning processes for all relevant measures (e.g. reconstruction, renovation, new building rentals, safety and fire protection measures, purchase of software, signs etc.)	2012	All ministries
74	Creation of accessibility in federal school buildings according to the specific case, independently of the schedule of the staged plan	2012 – 2019	BMUKK
75	The inclusion of “accessibility and freedom from discrimination” in the real estate strategy of the Federation	2012	All ministries
76	The creation of internal guidelines for accessibility, taking into account Austrian, European and local regulations for the planning and aptitude assessment of buildings abroad	2012	BMeiA
77	Sounding out possible potential in the field of infrastructure and procurement with regard to accessibility and freedom from discrimination with the involvement of and in cooperation with the Federal Procurement Agency	2012 – 2020	BMF
78	Development of the relevant specialist knowledge for easy to read versions and extension of the range of these publications according to the same standards	2012 – 2020	All ministries
79	Ongoing integration of the current requirements with regard to accessible web design into e-government	2012 – 2020	BKA (cooperation between federation, Länder and municipal and communities)
80	Training offers for accessible web design and editing as well as relevant communications work and disability awareness	2012 – 2020	BKA (Federal Academy of Public Administration)
81	Ongoing evaluation of websites with regard to accessibility and usability	2012 – 2020	All ministries
82	Ongoing inclusion of the current requirements with regard to accessibility into the general contract conditions for IT	2012 – 2020	BKA

3.3. Transport

3.3.1. Point of departure

Public transport is a key factor in facilitating **mobility** and thus also **independent living** for people with restricted mobility. Alongside people with disabilities, these include the following persons: peo-

ple with prams, people with heavy luggage, people with little knowledge of the local language, people with temporarily restricted mobility (e.g. after a broken leg), and last but not least, older people. The proportion of older people in the total population is rising, as is the number of persons with age-related mobility problems and difficulties with orientation.

Accessibility increases the quality of public transport and makes it more attractive for all users: “**Accessibility is essential for 10 % of the population, necessary for 40 % of the population and comfortable for 100 % of the population**” (Federal Ministry of Transport, Innovation and Technology: Leitfaden für den barrierefreien Verkehr (Manual for Accessible Transport), 2009)

Due to the importance of theme of accessibility in transport, the EU has issued directly applicable EU Regulations which aim (among other things) to protect persons with restricted mobility from **discrimination**.

For example, the Regulation from 2006 on the **rights of disabled air passengers and air passengers with reduced mobility** prohibits air travel companies (i.e. airlines and airports) from refusing to book flights because of passengers’ disabilities or refusing to allow them to board a plane. This also ensures that people with disabilities can obtain free additional help (e.g. the transport of guide dogs for the blind and mobility therapeutic aids).

The 2007 Regulation on the **rights and obligations of railway passengers** also provides for special protection and assistance for people with disabilities and persons with reduced mobility. Protection against discrimination and similar rights are also contained in the **Regulation on ship passengers’ rights** adopted in 2010 and the **Regulation on bus passengers’ rights** of 2011.

Transport infrastructure such as railway stations, bus stops and **vehicles** are already very well equipped in many areas and are being constantly improved. Some areas, particularly regional ones, are still not sufficiently orientated towards the needs of individual user groups, so that equal opportunities with regard to mobility are only partly given.

In urban areas, much has been improved in recent years, also with the involvement of disabled persons’ associations. In rural areas, however, action still needs to be taken **in some fields**. For example, all of the ‘post’ buses, which provide a large proportion of regional services, are to be made accessible by 2018.

In **rural** regions, public transport is an essential condition for mobility and promotes social justice. The services offered there thus have to be assessed and if necessary made more attractive.

Ensuring basic services in **local and regional rail transport** is the responsibility of the Federal Ministry of Transport, Infrastructure and Technology (BMVIT). The Länder are responsible for other transport services. The BMVIT is taking numerous measures to make public transport accessible for all users. Research and development is being funded, especially the introduction of prototype solutions. Regular conferences are also being held, and overall awareness for accessibility in transport is being raised. In many fields, people with disabilities and their organisations are involved in the measures to create accessibility.

At the Universities of Technology of Vienna and Graz, the field of **accessible construction** has explicitly been made part of the curricula as an optional lecture on the Master's degree courses in Architecture. These lectures can also be attended as optional subjects by students of other Master's courses such as Civil Engineering, Engineering and Electrical Engineering.

A project carried out at the TU Vienna "Fundamentals of the Further Development of Initial and Further Training in the field of **Barrier-Free Mobility**" has revealed that the issue of barrier-free mobility is present in various lectures in transport-related courses, but that specific lectures or tutorials on the subject are rare.

3.3.2. Objectives

- In order to make local public transport more attractive, the priority is to improve it in terms of both quality and quantity, particularly by continuing the **renewal** and **modernisation** of the **rolling stock and vehicles**.
- For all user groups (especially senior citizens, children and young people, people with sensory impairments, reduced mobility or learning disabilities), an **inclusive transport system** should be created via innovative products and services (**design for all**, e.g. announcement systems according to the two senses principle).
- **The award of public transport service contracts** should be increasingly linked to accessibility
- Efforts are being made to establish **uniform** tariff systems.
- More **research and development projects** should be initiated and funded, particularly the development of prototype solutions for accessible transport information systems (e.g. speech navigation therapeutic aids for blind and visually impaired persons, accessible ticket purchasing (e.g. speech output, mechanical keyboards).
- **People with disabilities** and their organisations should be involved in the discussions about developments and problems.
- Consumer rights for **railway passengers** should be improved.

3.3.3. Measures

No.	Contents	Time	Competence
83	Funding of numerous projects on the theme of accessibility (www.ffg.at/verkehr)	2012 – 2020	BMVIT
84	Innovation-stimulating accessibility measures such as the development of a training concept to promote competences on the issues of barrier-free mobility in Austria (Gabamo project)	2012 – 2020	BMVIT
85	Development of prototype solutions for special issues	2012 – 2020	BMVIT
86	Annual research forum on ‘Mobility for all’ : Presentation of research projects and solutions, discussion with specialist audiences (www.forschungsforummobilitaet.at)	2012 – 2020	BMVIT
87	Conclusion of transport service contracts with rail companies: Specification of a defined performance level (possible by changing over from specifying tariffs to specifying performance levels).	2012 – 2020	BMVIT
88	Standardisation of discounts for people with disabilities in the Eastern Austria region via a new tariff scheme in the provinces of Vienna, Lower Austria and Burgenland in an analogue way to other Austrian transport cooperation schemes.	2012	BMVIT, Länder and transport cooperation schemes
89	Coordination meetings at the BMVIT for all those involved in the provision of public transport (if necessary with the involvement of representatives of disabled persons’ organisations) to solve interface problems between the individual transport providers	2012 – 2020	BMVIT
90	Continuation of the series of brochures entitled Accessible Mobility on the theme of ‘barrier-free mobility in public transport’ as well as the issuing of publications on accessibility	2012 – 2020	BMVIT
91	Information on legal norms and examples of best practice in the Accessible Public Transport Manual , a source of support material for experts working in this field which has been developed in cooperation with the organisations of those affected. (www.bmvit.gv.at/verkehr/gesamtverkehr/barrierefreiheit/leitfaden.html).	2012 – 2020	BMVIT
92	Ensuring that there are lectures on the issue of accessibility in degree courses at universities of technology and other institutions, provided that the occupations trained there are used in public transport (particularly architecture, civil engineering, engineering, electrical engineering and information technology)	2012	All ministries responsible for education and training
93	Standard examinations for the Disability Card according to the Federal Disability Act (BBG) (unreasonability of the use of public transport) and for the pass according to section 29b of the Road Traffic Regulations	2013	BMASK, BMVIT, Länder

3.4. Culture

3.4.1. Point of departure

As early as May 2003, the EU adopted a resolution on the **accessibility** of cultural establishments and cultural activities for people with disabilities, whereby the Council called on the Member States to improve the accessibility of cultural establishments and promote the participation of people with disabilities in cultural activities. Reference to the importance of the unrestricted participation of people with disabilities in cultural life is also made in the EU Disability Strategy and the UN Disability Rights Convention.

The challenge in this field is not only ensuring the accessibility of buildings, but to enable people with **sensory impairments** and those with **learning disabilities** to experience and understand the arts and culture, e.g. by means of tactile, visual and audio presentations.

In addition, the active participation of people with disabilities in cultural events should be promoted and the wariness of society with regard to such artistic events reduced.

3.4.2. Objectives

- The extension of **barrier-free** access to and the use of federal cultural facilities is to be intensified (e.g. via tactile, visual and audio support for people with sensory impairments).
- **Additional cultural education projects** are planned, particularly the development of additional offers for schools in order to also involve children and young people with special needs who have previously had little experience of museums.
- In order to further extend cultural participation and activities, specific groups of persons are to be addressed by means of **targeted promotion**, especially people with disabilities.

3.4.3. Measures

No.	Contents	Time	Competence
94	Inclusion of specific measures on the reduction of fears and on improving accessibility for people with disabilities in the framework target agreements between the BMUKK and the federal museums as well as the Austrian National Library (ÖNB)	2012	BMUKK
95	Implementation of the staged plan on the establishment of barrier-free access and the necessary adaptations of the federal museums and the ÖNB	2015	BMUKK

No.	Contents	Time	Competence
96	Free admission for children and young people up to 19 years and increased offers for schools : Projects for children and young people with sensory disabilities and special educational needs convey cultural content while involving sensory perceptions. In the long term, the results will be integrated into the offers of the respective museums (e.g. the project Ornaments and Order in Belvedere Palace, journeys of discovery for children and young people who are blind or partially sighted in the Art History Museum, and the Worlds of Knowledge project in the ÖNB).	2012 – 2020	BMUKK
97	The creation of offers for people with learning disabilities (e.g. literature or plays in easy to read versions)	2013 – 2020	Federation and Länder

3.5. Sport

3.5.1. Point of departure

Sport and exercise are of great importance for people with disabilities, just as they are for people without disabilities. Sport is an essential factor in rehabilitation. Exercise and physical activity provide an essential contribution to the maintenance of health and well-being, and reduce the risk of certain illnesses.

An analysis by the Federal Ministry of Social Security, Generations and Consumer Protection from 1999 shows a financial comparison: sport accidents cost around EUR 301 million, while there is a **benefit** of EUR 567 million due to the avoidance of the consequences of illness.

Disabled sports have a positive special status in the Austrian sports landscape, but are de facto **not** included in general sports from an administrative perspective.

Competitive and top-level sports for people with disabilities at an organised level can be satisfactorily covered by numerous funding programmes. However, this does not apply to grassroots sport or sport for beginners or potential talents who want to get into top-level sport through their performances.

There are currently six defined disabled groups in **competitive and top level sport**: sportsmen and women with specific physical impairments (missing arms or legs, cerebral palsy, wheelchair users), the blind and visually impaired, deaf sportspeople and finally the group of athletes with mental disabilities. There is, however, a lack of specific offers for other disabled groups.

There is hardly any interpreting into **sign language** at sports events, which would facilitate the participation of people with disabilities. This applies equally to sportspersons and spectators. Audio commentaries for blind persons and the severely visually impaired are also very rare.

There are legal provisions stipulating that the **accessibility** of sports stadiums has to be ensured during construction or major renovation work, but in many cases sports facilities are not accessible for people with disabilities.

The subsidisation of sports is currently only to a limited extent the task of statutory **social insurance**. The AUVA (General Work Accident Insurance Institution) is already active in the field of disabled sports to a considerable extent, also financially (e.g. supporting the Paralympics).

3.5.2. Objectives

- The objective is the **inclusion** of disabled sports in general sports. Every measure in sport has to be organised in such a way that people with disabilities can **participate** automatically.
- The goal is the creation of general **accessibility in public areas** (necessary to reach major sporting events, for example).
- The **development** of sports programmes for specific disabled groups should be intensified.
- The continuation of the strategy pursued until now to **improve** the situation in sports facility construction is planned.
- It is necessary to create offers for people with disabilities in the field of **grassroots sport** and the encouragement of individual talent.

3.5.3. Measures

No.	Contents	Time	Competence
98	Specific measures to promote sports and exercise within the framework of health promotion and the prevention of illness.	2012 – 2020	BMG, health insurance funds, BMLVS, Länder
99	The availability of sign language interpreting should be taken into account in the award of subsidies for sports events	2012	BMLVS
100	Accessibility as a condition for public funding for the construction or renovation of sports facilities	2013	BMLVS

3.6. The media

3.6.1. Point of departure

The media are an intrinsic part of our everyday life and permeate all areas of society. The issue of disability is still underreported in the media and above all frequently linked to an image of poor persons in need of charity. People with disabilities are often represented as **supplicants** or **victims**.

Many people, however, have no contact to people with disabilities. They only receive information about disability from the media. A one-sided and limited portrayal results in a distorted perception and has a strong effect on the public image of people with disabilities in a way which does not correspond with reality. In this way, **barriers in the minds** of people without disabilities are consolidated.

Not least, reporting in the media also has an influence on **political decisions**. Issues which are dealt with extensively in opinion-forming media are more likely to be reflected in political action than themes which are withheld or only dealt with on particular occasions.

In addition, the media are an important **source of information** both for people with disabilities and people without disabilities, and also serve as entertainment and education.

Within the framework of its programming mandate, the **Austrian Broadcasting Corporation (ORF)** as one of the most important Austrian media institutions has to ensure that the concerns and needs of people with disabilities are taken into account in a suitable way in all of its programmes. In this context, information and awareness campaigns have been repeatedly carried out together with the BMASK, most recently in autumn 2011 with the media campaign 'My Chance – Your Benefit'.

Furthermore, the presentation and contents of all programmes of the ORF must respect the **dignity** and **fundamental rights** of all persons, and must not incite hatred based on race, gender, age, disability, religion or nationality. The same principles also apply to advertising on the ORF and also for all other audiovisual media services which provide programmes via electronic communications networks. The ORF and other audiovisual media services are, in addition, legally obliged to increase the proportion of **programmes which are accessible** for people with hearing disabilities and visual disabilities, particularly via sign language, subtitles, audio descriptions and easily understandable menu navigation. Much has already been done in this field in recent years. Nevertheless, there are still too few accessible offers, both in the ORF and in other media. For example, information programmes on television or traffic news on the radio are only accessible for people who are hard of hearing if there is no background music.

Disabled sports are given too little media presence.

3.6.2. Objectives

- The number of **accessible programmes** from the ORF and other audiovisual media services should be raised considerably, and new productions should be accessible from the beginning.
- The lives of people with disabilities should be portrayed in the media in a **factual** and **balanced** way in **all** their aspects. Discriminating terms such as “suffering”, “tied to the wheelchair” or “deaf and dumb” should be avoided, and the strengths of people with disabilities should be highlighted.
- The design and presentation of ORF programmes **by** people with disabilities should be promoted.
- The goal is the funding of films about and by people with disabilities within the frame-work of the **promotion of Austrian films**.

Indicators for the achievement of goals:

Percentage of accessible programmes on the ORF

3.6.3. Measures

No.	Contents	Time	Competence
101	Appointment of a working group with the involvement of disabled persons associations and media representatives to draw up a recommendation for the portrayal of people with disabilities in the media	2013	BKA
102	A step-by-step increase of the proportion of accessible programmes on the ORF and other audiovisual media services	2012 – 2020	ORF
103	The ORF.at website is being made accessible in the course of its gradual technical modernisation, and corresponds to the internationally recognised standards for the creation of accessible web contents (WCAG 2.0)	2016 – 2020	ORF
104	The creation of a greater presence for disabled sports in the public media	2012 – 2020	BMLVS

3.7. The information society

3.7.1. Point of departure

The new **information technologies** require lifelong learning, an ability to communicate, networked thinking and the rapid location and selection of information. They make information available at any time, everywhere and in manifold ways. This can further increase the existing ‘digital divide’ and discrimination, because people who are not in networks or have no access to the internet can be (even more) at a disadvantage.

Information and communication technologies offer people with disabilities good **chances** of comprehensive **participation**, but only on the condition that they are available in accessible form. Accessible telecommunications primarily require technical solutions in order to ensure equal participation in the information society.

An example of this is a plan to improve the **accessibility** of self-service terminals, (e.g. ticket machines, information points and cash machines) for people with disabilities and older people. This is cofinanced by the EU from the ICT part of the framework programme for competitiveness and innovation. (APSiS4All). In the EU there are hundreds of thousands of self-service machines, including at least 425,000 cash machines. The project began in September 2011 and will last three years.

3.7.2. Objectives

- Supporting people with disabilities to live **independent lives** by extending and promoting information and communications technologies.

3.7.3. Measures

No.	Contents	Time	Competence
105	The extension of broadband in rural regions will increase its availability and thus support older and disabled people in living independent lives	2010 – 2013	BMVIT
106	The ‘austrian electronic network’ funding programme in the field of digital integration supports the market launch of electronic networks and services which promote independent living and the involvement of all sectors of the population in the information society	2007 – 2013	BMVIT
107	Since the end of 2010, older and disabled persons with a low income have received an additional allowance for the cost of an internet connection in addition to that for telephone line rental	2012 – 2020	BMVIT
108	The analysis of new technological developments, with special emphasis on their use for people with disabilities	2012 – 2020	BKA – cooperation between the Federation, the Länder and municipal and communities
109	Evaluation of measures for the possible adoption of regulations on accessible telecommunications services with the involvement of people with disabilities	2014	BMVIT

3.8. Construction

3.8.1. Point of departure

For people with disabilities, the **accessibility** of the built environment is an essential precondition for participation in all areas of society. The concepts of accessibility and design for all are therefore at the forefront of the demands made of disability policy.

The degree of accessibility depends to a large extent on the provisions of **building laws**. Building legislation is the **responsibility** of the Länder in Austria, which is why there are different provisions in this field in every Land. In spite of many years of efforts, a harmonisation of building regulations has not been achieved.

However, the **ÖNORM standards** on accessible construction do provide for important uniformity in the content of legal provisions. These standards are recommendations, but their contents have been included in the larger part of the building regulations of the individual Länder and are thus obligatory. The granting of subsidies is in part actually linked to the relevant standards being taken into account.

The basis for accessible building is the **ÖNORM B 1600** standard. The planning principles described in it are minimum requirements and cover those building measures which are necessary to take into consideration the different physical possibilities of all people in the built environment.

The new **ÖNORM B 1610** standard is being drawn up on the basis of ÖNORM B 1600 on accessible building. It is intended to contain specifications on the assessment of the accessibility of existing buildings and complexes. This creates the possibility of a voluntary certification of the accessibility of buildings in general.

According to regulations on the award of public contracts, tender documents have to refer to the relevant regulations on accessible construction. Put simply, the **Federal Public Procurement Act** thus pursues the goal of ensuring that public buildings are designed accessibly.

In the **housing sector**, accessibility is an essential precondition for autonomous living. Particularly with regard to the increasing proportion of older people in society, accessible (or at least adaptable) housing construction is a necessity. Remaining in one's own home even if a person needs care should certainly be possible.

Ensuring quality standards in the relevant **training courses** is an essential condition for accessible construction and living. The resolution of the European Council ResAP (2001)¹ on design for all thus

calls for the introduction of the principles of design for all in the **curricula** for all professions in the construction sector, including architecture and town planning, as well as for other professions and jobs which are involved in the field of construction or have an influence on it. It should not be forgotten that creating an accessible environment and the breaking down of existing barriers by means of suitable construction, organisational and other measures also opens up opportunities for **businesses**, particularly SMEs. Accessible construction would principally be able to contribute towards a boost in investment for innovative companies and to create jobs. According to rough estimates (by economic researchers at the Institute of Advanced Studies (IHS)), an investment sum of €100m would create up to 1,400 jobs in the construction sector (employees until the end of construction work).

The **Board for Building Culture**, in which all ministries, the Länder and relevant occupational groups are represented, adopted a recommendation for ‘accessible building – design for all’ in June 2011.

3.8.2. Objectives

- The establishment of building regulations which have been **harmonised** with regard to accessibility and the introduction of criteria for adaptable housing construction for the award of funding for housing construction.
- The promotion of **competence in advising and planning** as well as disability awareness training on accessible construction in all relevant occupations, whereby accessibility has to be understood in a holistic sense (e.g. also includes room acoustics for people who are hard of hearing).

3.8.3. Measures

No.	Contents	Time	Competence
110	Taking accessibility into account in the Board for Building Culture and in the Austrian Standards Institute	2012 – 2020	BMASK
111	The creation or improvement of the tax credits for the creation of accessibility for those affected	2012	BMF
112	The inclusion of accessibility and design for all as a compulsory subject in all relevant degrees and training courses (e.g. architecture, civil engineering, building technology) as well as for the persons responsible for these fields in building authorities and the protection of historical buildings	2013	All ministries
113	The consultation of representatives of disabled persons’ organisations in all major building projects subsidised by the Federation	2012 – 2020	All ministries

3.9. Tourism

3.9.1. Point of departure

People with disabilities have been recognised as an important group of guests in tourism, particularly in connection with the forecasted demographic trends. The number of tourists with reduced mobility or other disabilities will rise along with the increasing proportion of older people. The creation of accessible offers in tourism thus has enormous business potential.

Together with the Federal Department for **Tourism and the Leisure Industry** of the Economic Chamber, the BMWFJ held a series of workshops from the start of 2009 to the end of 2011 on the issues of basic construction criteria, training and the good management of guests, accessible websites and barrier-free leisure offers. As part of these workshops, manuals and information materials were developed for the tourism industry on the various areas of application of accessibility. Also in 2011, the competition 'Tourism for Everyone – Regional Initiatives for Accessible Travel' was held. In addition, stimulating information and advisory projects on this issue are regularly initiated or supported.

3.9.2. Objectives

- **Information and awareness-raising** in the tourism and leisure industries on the theme of accessible and cross-generational tourism for all.

3.9.3. Measures

No.	Contents	Time	Competence
114	Dissemination of the information materials from the Tourism for All series of brochures : <ul style="list-style-type: none"> ▪ Accessible planning and construction in the tourism and leisure industries ▪ An orientation aid for accessible nature tourism offers ▪ Accessible travel – a manual on how to treat guests ▪ Accessible arts and culture offers ▪ The Tourism for All competition brochure 	2012 – 2020	BMWFJ
115	Raising awareness via lectures and competitions such as the EDEN Award 2013 on the theme of accessible tourism/ Tourism for All	2012 – 2020	BMWFJ
116	Construction-related investments in accessibility can receive subsidies within the frame-work of the promotion of tourism companies by the federal government via the Austrian Hotel and Tourism Bank	2012 – 2020	BMWFJ

No.	Contents	Time	Competence
117	Information materials on disabled travellers from abroad on the theme of 'the use of disabled car parks and public transport in Austria' and how to take advantage of related discounts	2012 – 2020	BMVIT
118	Extension of the contents of training for those working in tourism (dealing with and communication with people with disabilities, accessibility also for people with hearing and visual disabilities)	2013	BMWFI

4. EDUCATION

Equal participation in the education sector is of fundamental importance for equal participation in the life of society. Inclusive accessible education is important for people with disabilities for their participation in working life, their financial security and the possibility to lead an autonomous life.

However, not only disabled children and young people benefit from **inclusion** in the education sector, as inclusive teaching approaches can generally increase the quality of lessons (in relation to individualisation and an orientation towards competences).

The possibility of admitting people with disabilities to the teaching profession and the adaptation of teacher training should be examined.

The **EU Disability Strategy** 2010 – 2020 (COM(2010) 636 final) refers to the importance of inclusion in the education system. The promotion of inclusive education is therefore one of the key areas of activity of the strategy.

The strategic framework for European cooperation in the field of general and vocational education (ET 2020, 2009/C 119/02) points out that

„the education system ... should combat all forms of discrimination and enable all young people to interact in a positive way with peers of various origins“.

Article 24 of the **UN Disability Rights Convention** refers to the right to education of persons with disabilities and obliges states to take suitable measures in this field. The goal of the education system should, in particular, be to enable people with disabilities to genuinely participate in a free society, and to fully develop their personalities, their talents and their creativity as well as their mental and physical abilities.

4.1. Preschool education

4.1.1. Point of departure

In order to offer all children the best education opportunities, the federal government concluded an **agreement** with the Länder in 2009 whereby all children in the final year before compulsory schooling must attend an official child care facility on a half-day basis (free of charge).

To accompany this, the BMWFJ – in close cooperation with the BMUKK and in agreement with the Länder – commissioned practical **instructions and educational plans** which are designed to provide

4.1. Preschool education

orientation for teachers to provide child-friendly educational work, and contain suggestions for the optimal support of the individual development of children.

In the training colleges for nursery school teachers and the institutions which train social educators, all students are introduced to **special needs education** during their basic training, so that many of them then begin their specialist training in this field directly after the basic training.

4.1.2. Objectives

- The opportunities for preschool education should be **further improved**
- **Inclusive concepts** for the transition from nursery school to primary school should be developed.
- Ensuring the **professionalisation** of teaching personnel in nursery schools, after-schoolcare, homes and youth work institutions should be achieved via suitable educational offers.

4.1.3. Measures

No.	Contents	Time	Competence
119	Financial support for the obligatory, free attendance of nursery school/preschool in the final year before compulsory school	2012 – 2013	BMWFJ
120	Extension of the existing offers of advice and diagnosis to secure the best possible preparation of the affected families and also of the school system for the requirements of inclusive schooling	2012/2013	BMUKK, BMWFJ and Länder
121	Further and continuing education programmes on the theme of inclusion and special needs education at teacher training colleges	2012 – 2020	BMUKK, Länder and the bodies responsible for teacher training colleges
122	Training in Austrian sign language for teaching personnel	2012 – 2020	BMUKK, Länder, Universities and the bodies responsible for teacher training colleges
123	Further training on listening skills on hearing technology for teaching staff for dealing with children who are hard of hearing	2012 – 2020	Länder, universities and bodies responsible for teacher training colleges

4.2. Schools

4.2.1. Point of departure

The **School Reform Package** of 1993 laid down that integration in schools is a task of primary schools. In 1996, the integration of disabled children into secondary stage I was made legally binding. The education of children and young people with special educational needs can, according to the wishes of the parents, either take place in a special school for the specific disability, or in integrated/inclusive form at a mainstream school (primary school, secondary modern school or the lower stage of a general secondary school – AHS). In order to fulfil their compulsory schooling, pupils with special educational needs currently have the opportunity to attend a special school for up to twelve years, a polytechnical school or a one-year domestic science school (from the school year 2012 – 13).

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.

There are a disproportionately high number of pupils at special schools whose first language is not German. It is therefore necessary to differentiate the establishment of special educational needs more clearly from language support measures so that pupils can receive the right support.

Even more **teachers who are competent in sign language** are needed to teach deaf children and young people. Courses at teacher training colleges and universities are being offered for this purpose.

4.2.2. Objectives

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

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

- The pedagogic and organisational development of schools and lessons
- The improvement of regional support structures
- Support based on needs and requirements
- The training of teachers
- Scientific guidance

4.2. Schools

In the form of the ‘inclusive region’ approach, a way to realise this in practice has been developed: the Federation, the Länder and communities will initially test **inclusive school and teaching** programmes in pilot regions and then extend the latter over time.

- The quality of the establishment of special educational needs should be further improved (e.g. in order to differentiate it more clearly from language support measures)
- Improvements in the field of counselling for the parents and guardians of children with special needs
- Raising public awareness, especially among parents of children without disabilities.
- Increased in-service training courses on Austrian sign language for teachers and also in the care and support of pupils who are hard of hearing.
- Care should be taken to respect the principle of inclusion in the field of educational media and media education.
- The participation in European projects (e.g. MIPIE – Mapping the implementation of policy for inclusive education) is intended to help to identify data which is relevant to planning, to improve the data situation and ultimately to increase the inclusion rate. Participation in the project ‘Teacher Education for Inclusion across Europe’ is being used for the development of teacher training in Austria.

Indicators for the achievement of goals:

Integration rate at all Austrian schools

4.2.3. Measures

No.	Contents	Time	Competence
124	Participative strategy development for the implementation of the UN Disability Rights Convention to realise an inclusive school system	2012/2013	BMUKK
125	Development of inclusive pilot regions . Gathering experiences and subsequently drawing up a detailed development concept and the nationwide extension of Inclusive Regions until 2020	2012 – 2020	BMUKK, Länder and communities
126	Increased number of pilot projects in secondary stage II	2012 – 2020	BMUKK
127	Increased number of integrated classes in the lower stage of general secondary school (AHS) throughout Austria	2012 – 2020	BMUKK

No.	Contents	Time	Competence
128	In-service training programmes for teachers and school inspectors (district schools inspectors) on diagnostic procedures to determine special educational needs and for the professional counselling of parents and guardians	2012 – 2020	BMUKK
129	Further development of in-service and further education for teachers (inclusive education, special needs teaching)	2012/13	BMUKK
130	Inclusive teaching methods as a part of the future training of teachers at teacher training colleges and for students training to be teachers at general and vocational secondary schools	2012 – 2020	BMUKK, universities and bodies responsible for teacher training colleges
131	Nationwide initial and further training in Austrian sign language	2012 – 2020	BMUKK, universities
132	The participation of integrated classes in the media literacy award	2012 – 2020	BMUKK
133	Raising awareness via the project ‘Together we are class’ – illustrations of inclusion by those affected (in Parliament)	2012 – 2020	BMUKK
134	Further development of accessible educational offers	2014	BMUKK
135	Coordination of the independently drawn up curricula of teacher training colleges with regard to inclusive education	2012 – 2020	BMUKK

4.3. Schools – accessibility

4.3.1. Point of departure

Equal participation in schools requires a well designed **support system**. Pupils with disabilities often require technical or personal assistance as well as specially adapted teaching materials in order to be able to participate in lessons on an equal basis.

For pupils with visual disabilities and blind pupils, the required aids (electronic reading devices, braille displays for PCs, PCs with speech output) and school books which have been adapted for pupils with visual disabilities are made available as part of the school books campaign. The ordering and distribution of the school books takes place via the **teaching materials centre** established at the Federal Institute for the Education of the Blind and via the Book Access association which has been commissioned to produce these teaching materials. Alongside school books in large print and braille editions, school books are also developed in digital form and offered for teaching purposes.

For deaf pupils there are teaching materials in Austrian sign language and teachers who are competent in sign language.

Pupils in hospital should not lose contact to their school: they receive the school books they require via the school books campaign.

The subject of the accessibility of buildings is dealt with in the relevant staged plan of the BMUKK (for more details on this see Chapter “3.2. Services of the Federation” on Page 44), More information on the theme of school assistance services can be found in Chapter “6.3. Personal assistance” on Page 85.

4.3.2. Objectives

- **Barrier-free** participation in lessons should be ensured for all pupils.
- The best possible **support** of pupils according to their individual needs is an essential goal of the inclusion of children and young people with disabilities.
- The **quality of lessons**, particularly for the deaf or hard of hearing, should be improved by appropriate measures.

Indicators for the achievement of goals:

The number of barrier-free teaching materials
Integration rate at all Austrian schools

4.3.3. Measures

No.	Contents	Time	Competence
136	The creation and diversification of barrier-free teaching materials , particularly for pupils with visual or hearing disabilities.	2012 – 2020	BMUKK, BMWFJ
137	The creation of teaching materials for pupils with special educational needs for the subject English ; in-service training events on this theme	2012 – 2020	BMUKK
138	In-service training in the field of working with pupils who are hard of hearing (listening skills).	2012 – 2020	BMUKK, universities
139	Creation of information materials for the use of manual and sign language systems	2012 – 2014	BMUKK
140	Development of a bilingual database (Austrian sign language and German) and production of information materials both for teachers and parents/guardians	2012	BMUKK

No.	Contents	Time	Competence
141	Creation of easily understandable teaching materials	2012 – 2020	BMUKK
142	Increasing the competence of teachers in the use of accessible language (spoken and written)	2012 – 2020	BMUKK
143	Drawing up guidelines for the assumption of the costs of sign language interpreting	2012	BMASK, BMUKK, BMWF
144	IICC project – Ill and Isolated Children Connected – maintaining the contact between sick children, their school and their social environment	2012 – 2020	BMUKK, BMWFJ
145	Equipment of schools with audiovisual educational media which comply with medial policy and the principles of inclusion	2012 – 2020	BMUKK, BMWFJ
146	Optimisation of the readability of school books for blind and visually impaired pupils	2012 – 2020	BMUKK, BMWFJ

4.4. Universities /universities of applied science (Fachhochschulen)

4.4.1. Point of departure

The 2002 Universities Act lays down that it is the **task** of universities to take the **needs** of students with disabilities into account. For example, students have a right to be examined in a different way if they can prove a longer-lasting disability which makes it impossible for them to take the examination in the prescribed way, and if the requirements of the examination are not interfered with by the different method.

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

The **Ombudsman's Office for Students** established in 1997 supports students and tries to mediate in issues and problems which arise in everyday student life. The group of students with disabilities is a particular focus of its work. Alongside support and assistance, the office works on the development of suitable parameters for a monitoring system to ensure that the needs of students, and especially those of students with disabilities, are sufficiently taken into account by universities.

The **students' union elections** in May 2011 were organised so that they were **barrier-free** at all 21 universities for the first time. There were templates for all polling stations. The scrutineers were trained intensively for the election process with templates.

4.4.2. Objectives

- The **inclusion** of students with disabilities should, within the framework of the service agreements with the universities and the accompanying talks on their implementation, be increasingly made into an education policy goal.
- An essential aspect in this context is the creation of an **awareness** for the inclusion of students with disabilities.
- Due to the increasing demand, efforts should be made to expand the **training of sign language interpreters and sign language teachers**.

Indicators for the achievement of goals:

The number of persons completing the training courses for sign language interpreters and sign language teachers

4.4.3. Measures

No.	Contents	Time	Competence
147	Raising the awareness for inclusion within the framework of the negotiations on the service agreements for the period 2013 – 2015	2013 – 2015	BMWF and universities
148	Continuation of the pilot scheme 'Successful Studying for the Deaf' at the TU Vienna, and securing the future of the Integrated Studying institute.	2013 – 2015	BMWF and universities
149	Talks within the framework of the negotiations on the service agreements with the universities on a possible increase of the training programmes for sign language interpreters and sign language teachers	2015	BMWF and universities
150	Networking of the existing support services (e.g. Integrated Studying, Uniability – disabled representatives, psychological counselling, service points in the libraries)	2015	BMWF
151	The study 'The social situation of students with health issues at universities and universities of applied sciences'	2012 – 2020	BMWF

4.5. Adult education and lifelong learning

4.5.1. Point of departure

Adult education is predominantly privately financed and also largely organised on a market economy basis. The funding of the BMUKK concentrates on the acquisition of basic education and fundamental competences for adults, obtaining educational qualifications later in life (e.g. a specially adapted university entrance examination for people with sensory disabilities), and educational advice. When awarding funding, care is always taken to ensure that offers are accessible for everyone. The BMUKK has also published a special **information brochure** which includes a checklist on the theme of comprehensive accessibility in adult education ('Barrierfree adult education, a manual for learning together without obstacles').

Non-formal educational programmes (i.e. adult and further education offers which do not lead to officially recognised qualifications) offer special opportunities for people with disabilities because the design of the curriculum is far more flexible than in formal education, as are the certification processes, which can be structured according to the needs of the participants. What is still lacking in this context are clear rules on the binding nature and transparency of the respective educational processes with regard to their usefulness on the employment market and for more advanced courses.

4.5.2. Objectives

- Non-formal education offers for people with disabilities should be assigned to the **National Qualifications Framework** (NQF, a system in which all education and training levels are related to each other, thus enabling comparison). This should lead to an improvement in their usability in employment and to greater recognition of these qualifications in society and the labour market.

4.5.3. Measures

No.	Contents	Time	Competence
152	The principle of accessibility should be given greater emphasis in the award of subsidies	2012 – 2020	BMUKK
153	Creation of a framework for NQF Corridor 2 with the involvement of disabled persons' associations, the establishment of corresponding structures and the assignment of at least 15 qualifications in the field of NQF Corridor 2	2014 – 2016	BMUKK

5. EMPLOYMENT

A high-quality job ensures financial independence, promotes personal development and is the best protection against poverty. Employment is therefore always a key issue in disability policy. Austrian employment policy in the field of disabilities is primarily based on the **nationwide labour market policy programmes** for the disabled of the BMASK and the **longer-term plans of the Austrian Public Employment Service (AMS)**. Employment is also a focus of the **European Disability Strategy 2010 – 2020** (action area 4).

In the **UN Disability Rights Convention**, Article 27 is entitled Work and Employment and begins with the following sentence:

„States Parties recognize the right of persons with disabilities to work, on an equal basis with others; this includes the right to the opportunity to gain a living by work freely chosen or accepted in a labour market and work environment that is open, inclusive and accessible to persons with disabilities.“

5.1. Employment in general

5.1.1. Point of departure

On 1 January 2012 there were a total of 94,910 disabled persons receiving special support according to the **Disability Employment Act**, of whom 61,281 were employed or self-employed at the end of 2011. There were an average of 6,314 unemployed people with disabilities in a narrower sense (disabled persons according to the Disability Employment Act, the Victims' Welfare Act or with a disability card) in 2011. According to the calculations of the **Public Employment Service (AMS)**, the unemployment rate for people with disabilities in a narrower sense was 9.6% in 2011.

In the same year, 36,439 unemployed persons with health-related employment limitations were registered with the AMS. This includes persons whose health-related employment limitation has been confirmed by a medical examination, but who are not disabled in the sense of the Disability Employment Act, the Victims' Welfare Act or a regional disability law.

In the interests of **disability mainstreaming**, all services and subsidies offered by the AMS are also open to people with disabilities. At the same time, these persons can also require very special and disability-specific measures, so that tailor-made interventions are needed. These tasks are fulfilled by the **Federal Social Office (BSB)**.

5.1. Employment in general

In the case of **integrative companies**, both internal and external factors have changed. The internal factors include the development of the reduction in performance of the approx. 1,500 employees with disabilities. An increasing number of employees exhibits a **reduction in performance of over 50 %**. An externally-based factor is the **economic environment**, which in times of increasing globalisation is continuously raising the pressure on integrative companies to **reduce costs and increase productivity**. The **changed environment with regard to measures**, and particularly the project landscape which has been built up over around ten years by means of the funding from the employment campaign for people with disabilities, is an external factor which makes a further development of the integrative companies system necessary.

Currently, different laws use **different terms** when referring to employees (as in employment law, social insurance law and tax law). This can lead to legal uncertainty with regard to the presence of a disability.

Previously, people with disabilities were often afraid of losing their income replacement benefits (lifelong family allowance as well as survivor's pensions due to permanent inability to work, invalidity pensions) when they attempted to work. **Permeability schemes** should therefore be developed to prevent this. The pilot projects 'Reassurance' (for people with learning disabilities at the interface between occupational therapy and working life, and 'Carte Blanche' (especially for people with mental impairments at the interface between invalidity pension and trying to get work) should become standard nationwide. Furthermore, schemes based on a **partial ability to work** should be examined which, for example, simultaneously permit inpatient treatment on social health insurance and fully-insured attempts at work. This could be of particular significance for mentally impaired persons in the rehabilitation phase, or for persons with specific illnesses (e.g. epilepsy).

5.1.2. Objectives

- **Unemployment** among people with disabilities should be reduced.
- All people with disabilities should have the opportunity to receive **independent advice** on work-related issues – particularly in the form of **peer counselling** by people who are affected themselves.
- In all issues related to training and employment, special attention must be paid to the **special form of the respective disability**.
- In the interest of **inclusive employment, pilot schemes for permeability** should be developed and evaluated which ensure that people with disabilities can gradually find their way (back) into working life while maintaining – as far as possible – the support they receive via income replacement benefits. In this context, it should be ensured that **transfer payments** can be restored after an attempt to work in the primary labour market.
- In order to ensure that people with disabilities can participate fully in employment, the approach-

es of **disability mainstreaming** and the **specialisation of job offers** should be meaningfully linked.

- The future of **integrative companies** should be ensured by means of structural adjustments. Integrative companies should be awarded more government contracts.
- Consideration should be given to people with disabilities when creating a modern uniform term for **employees**.

Indicators for the achievement of goals:

Unemployment rate for people with disabilities (AMS)
Number of jobs for people with disabilities in integrative companies

5.1.3. Measures

No.	Contents	Time	Competence
154	Further development of the employment campaign for people with disabilities implemented by the Federal Social Office	2012 – 2020	BMASK
155	Development and evaluation of pilot schemes for permeability for the primary labour market on the basis of previous experiences	2015	BMASK, BMWFJ, Länder
156	Implementation of employment-orientated external case management in the advisory and placement processes of the AMS (which is also available to non-disabled persons)	2013	BMASK
157	Drawing up of a cooperation agreement between the AMS and the Federal Social Office (BSB)	2012	BMASK
158	Drawing up development perspectives for integrative companies on the basis of European examples	2012	BMASK
159	Structural adaptations of integrative companies on the basis of the development perspectives which have been drawn up	ab 2013	BMASK and Länder
160	Increased use of integrative companies for public contracts	2012 – 2020	BMASK
161	Standardisation and clarification of the concept of the employee in the various relevant laws in coordination with the social partners	2020	BMASK and BMF

5.2. Berufsausbildung

5.2.1. Point of departure

The Integrated Vocational Training (IBA) programme introduced in 2003 facilitates tailor-made vocational training for disadvantaged young people (people with disabilities according to the Disability Employment Act, persons with special educational needs after the end of compulsory schooling, persons who have not passed the secondary modern school leaving examination, and young people for whom it is difficult to find a job). It is supplemented by the vocational training assistance scheme of the Federal Social Office, which is one of the accompanying means of assistance. IBA takes place either as a complete apprenticeship with a longer apprenticeship period (extension by one year, in exceptional cases by 2 years), or by providing partial qualifications by limiting training to specific parts of the occupation. IBA can take place in companies or in training centres. By the end of 2011, 5,507 young people had received an apprenticeship contract in IBA.

5.2.2. Objectives

- IBA should be further **extended and improved**, in order to offer training to as many young people with disabilities as possible.
- The successful completion of IBA should be **recognised** in collective agreements and civil service employment regulations.
- Young people with disabilities **in penal institutions** should also have the possibility to conclude IBA with a longer training period.

Indicators for the achievement of goals:

Number of young people with disabilities who have completed IBA

5.2.3. Measures

No.	Contents	Time	Competence
162	Continuation of Integrated Vocational Training (IBA)	2012 – 2020	BMASK, BMUKK and BMWFJ
163	Offer of IBA with an extended apprenticeship period also for young people with disabilities in penal institutions	2012 – 2020	BMJ and BMASK

5.3. Subsidies for participation in working life

5.3.1. Point of departure

The situation of **unemployed persons with health-related employment limitations** is particularly characterised by the fact that they are unemployed for longer than unemployed persons without disabilities (2011: average duration 129 days compared to 88 days) and that the proportion of recipients of unemployment assistance is much higher (2011: 72 % compared to 45 %). In 2011, the AMS supported a total of approx. 41,000 persons with promotional measures.

In recent years, the **Federal Social Office** has developed a package of measures to accompany people with disabilities into the labour market and in the workplace. In 2011, a total of approx. 38,055 people received person-related subsidies, on which a sum of €135.2 million was spent. The effect of this was to obtain or secure jobs for around 20,000 people. Particularly the measures of so-called **accompanying assistance** and **personal assistance in the workplace** have proved successful in safeguarding jobs in the long term. In addition, other allowances (e.g. mobility allowance) and subsidies for accompanying measures (e.g. service for companies) have been paid, so that the BSB funding for the employment campaign for people with disabilities amounted to a total of €149 million in 2011.

Overall, the Austrian situation is still very much determined by the **constitutional delimitation** between the competences of the Federation and the Länder – labour law and social insurance law on the one hand, and the Help for the Disabled scheme on the other. At times this can make transitions and cooperation difficult.

In Vorarlberg there are initial attempts to introduce **inclusive work** (“pilot scheme “Spagat”). However, whether such approaches can be transferred to other regions has not yet been tried out.

5.3.2. Objectives

- **Subsidies for employment:**

These AMS subsidies are to be intensified in the future. They are either integration subsidies for an individual job, for socio-economic enterprises or non-profit employment projects. All of these subsidies aid the (re-)integration of disadvantaged groups of persons into the labour market, particularly people with disabilities.

- The extension of and the provision of quality assurance in **support structures:**

In the transition from integrative to inclusive models of employment as defined by the UN Convention, the measures of the BSB are to be **consolidated and extended**, whereby the principle of living independently has to be observed, all phases of working life should be covered, and services should be offered regardless of the degree of disability – if necessary also for an unlimited period.

5.4. Disability Employment Act

- Extension of **youth coaching**:

This measure for young people in the transition phase from school to working life is to be extended throughout the country. Youth coaching builds on the very good experiences made with **clearing** and is to be offered by the Federal Social Office also for non-disabled young people who need advice and guidance on (further) vocational training and entry into employment. The intensity of the support has to be orientated towards **individual needs**: this should ensure that people with a greater need for support are not disadvantaged.

- Development of pilot schemes for **inclusive work**:

A BSB pilot scheme with one Land with the participation of people with disabilities is to develop standards for the **nationwide project ,Inclusive Work for People with Very Severe Disabilities‘**. The funding for this has to be earmarked and coordinated, and the previous borders of federal and regional competences questioned.

5.3.3. Measures

No.	Contents	Time	Competence
164	Creation of an overall concept for support structures	2012	BMASK and Länder
165	Evaluation of this overall concept	2015	BMASK
166	Development of a pilot project entitled Inclusive Employment	2012 – 2015	BMASK and one Land
167	Evaluation of this pilot project	2016	BMASK
168	Implementation of the results of the two evaluations	2020	BMASK
169	Extension of youth coaching throughout the country	2014	BMASK
170	Special funding for women with disabilities who have been away from the labour market for a long period or have never worked	2012 – 2020	BMASK

5.4. Disability Employment Act

5.4.1. Point of departure

The government programme includes planned measures to increase the employment rate of people with disabilities. The **Amendment to the Disability Employment Act** which came into effect on 1 January 2011 contained a series of measures to this end (particularly a staged increase of the compensatory tax and changes in the special provisions on protection against dismissal).

The legal status of the **representatives of employees with disabilities** was already improved in 2011.

5.4.2. Objectives

- The examination of whether the legislative measures have led to **measurable changes** in the hiring behaviour of employers (increase in the number of the disabled persons enjoying special support in employment, rise in the percentage of occupied obligatory posts, and a reduction in the number of applications for approval of a redundancy).
- **Companies** which offer jobs are indispensable for inclusion in employment. They should therefore be **advised** in a targeted and needs-oriented way on the existing possibilities for employing people with disabilities.
- From the evaluation of the legislation on disability equality carried out in 2010–2011, key points should be derived for the **further development of protection against discrimination**.

Indicator for the achievement of goals:

Rate of fulfilment of obligatory employment of people with disabilities (currently 66% of all obligatory posts are filled).

5.4.3. Measures

No.	Contents	Time	Competence
171	Development of key points for the further development of protection against discrimination with the participation of people with disabilities	2013	BMASK
172	Improvement of protection against discrimination in employment in line with changes in the Equal Treatment Act.	2014	BMASK
173	Evaluation of the amendment to the Disability Employment Act of 1 January 2011	2013	BMASK

5.5. Promotion of health at work and the protection of workers

5.5.1. Point of departure

The **promotion of health at work** starts out from a comprehensive concept of health (as in a modern understanding of public health) and aims to reach all or as many as possible of the employees in a company and to improve their health and wellbeing in the workplace. To this end there are already ongoing projects from the BMASK, the BMG and the social insurance institutions.

- The **Fit 2 Work programme** is an advisory and prevention programme for older employees and people with disabilities or chronic illness with the aim of analysing absences caused by illness and offering rehabilitation measures in order to avoid these people leaving employment prematurely.
- The **Health Street project** is designed to establish a standardised and binding system of the examination and recognition of the ability or inability to work in order to accelerate processes and to extend the time a person remains in working life.

People with disabilities have **special requirements in relation to their workplace** with regard to its design, the environment and the work processes. Due to reduced mobility they are often not able (or with great difficulty) to obtain information from interest groups or authorities.

In accordance with Section 15 of the regulations of places of work, **workplaces in buildings** have to be made accessible if necessary. According to Section 6 of the Disability Employment Act, the company is also obliged in specific cases to take suitable measures to enable disabled employees to carry out their occupation.

5.5.2. Objectives

- **Workers' protection law** makes an essential contribution to health and safety in the workplace, particularly for employees with disabilities or chronic illnesses.
- People's **ability to work** should be preserved and safeguarded. Early preventive measures – particularly in the case of older workers and people with mental impairments – should help to prevent disabilities and chronic illnesses and also reduce costs which arise as a consequence of illness, disabilities and early retirement.
- The situation of employees with disabilities should be improved by means of **accessible information** and with the support of the Labour Inspectorate.
- The relevant employees of the **Labour Inspectorate and the AMS** should receive special training on the issues of disability and accessibility.
- The **working conditions** must also take the needs of older workers into account, so that their experience is preserved for as long as possible. Their health has to be promoted via targeted projects.

5.5.3. Measures

No.	Contents	Time	Competence
174	Further extension of in-company health promotion in order to preserve the ability to work and avoid premature retirement	2012 – 2020	BMASK, BMG (social insurance institutions)
175	The projects In-company Health Promotion and Productive Ageing	2012	BMASK, BMG
176	Information on workers' protection on the accessible website www.arbeitsinspektion.gv.at	2012 – 2020	BMASK
177	The continuation of seminars on the theme of Gender & Diversity for the BSB, the AMS and the Labour Inspectorate	2012 – 2020	BMASK
178	Information events on the barrier-free design of workplaces for the Labour Inspectorate, the AMS and the BSB	2012	BMASK

5.6. Occupational therapy

5.6.1. Point of departure

Due to the division of competences, social insurance is the responsibility of the Federation, while so-called occupational therapy (sometimes also referred to as a day centre or day workshop) is the responsibility of the Länder. A total of **around 20,000** people with disabilities work in occupational therapy facilities in Austria and have until now not been covered by statutory social insurance. The government programme of November 2008 stated that it would examine the possibilities to implement independent **social insurance cover** for these persons. Since 2009 a working group of the BMASK and the Länder has been dealing with this issue. In 2010 the BMASK commissioned a study for a more in-depth view of overall economic issues in particular. The final report of the study will be presented in 2012. The inclusion of those affected in statutory **work accident insurance** has already been realised.

5.6.2. Objectives

- The possibility to be covered by **health and pension insurance** and not to lose their transfer payments in the case of the failure of an attempt to work is to be created for people with disabilities in occupational therapy. To this end, the question of its financing also has to be settled.

Indicators for the achievement of the goal:

Number of persons in occupational therapy covered by social insurance

5.6.3. Measures

No.	Contents	Time	Competence
179	Providing protection under social insurance law for people with disabilities in occupational therapy	2015	BMASK and Länder

5.7. Access to occupations

5.7.1. Point of departure

Completing the training for a wide range of occupations is very difficult for people with disabilities. By changing 19 relevant laws, the 2006 accompanying Act to the legislation on disability equality led to improvements in access to vocational training and in civil service employment regulations, particularly in occupations requiring apprenticeships and health occupations. Nevertheless, there are still **many barriers hindering access to occupations** for people with disabilities.

Access to initial and further training **in sports** is only possible under difficult conditions. Some initial approaches have been created by the association “Karriere danach” (A Career Afterwards), which is active on behalf of all top sportspeople, also those with disabilities.

5.7.2. Objectives

- Equal **access to initial and further education** should be created for people with disabilities
- Training for **the teaching professions** should be opened up to people with disabilities.

Indicator for the achievement of the goal:

The number of disabled students on teacher training courses

5.7.3. Measures

No.	Contents	Time	Competence
180	Examination of the regulations on the licensing for occupations and training with regard to discriminatory terms and their removal	ab 2013	All ministries and Länder
181	Advice and preparation of development stages for access to the teaching professions	2013	BMUKK
182	Further support for the association “ Karriere danach ”	2012 – 2020	BMLVS

5.8. The Federation as an employer

5.8.1. Point of departure

Since 2007 the Federation has fulfilled its obligation to employ people with disabilities as laid down by the Disability Employment Act. In order to further intensify the employment of people with disabilities in the federal civil service, on 1 January 2012 the Federal Chancellery (BKA) created the opportunity – on condition that it is covered by the budget – to take on people with disabilities who receive special support and are 70% disabled or higher **over and above the level set in the human resources plan**. The BKA reports to the Federation twice a year on the number of federal civil servants with disabilities.

In the **Ministry of Finance**, an agreement was concluded between the leadership of the ministry and the Central Committee on the lasting integration of employees with disabilities. Its implementation is to be evaluated annually. The BMF also offers **special support measures** for 50 employees with visual disabilities and takes on one or two leading disabled sportspersons per year.

5.8.2. Objectives

- Taking on more people with disabilities **as civil servants**; providing extensive information and support for senior executives
- Special support for civil servants with **hearing disabilities or visual disabilities**

Indicator for the achievement of the goal:

Number of the people with disabilities receiving special support working for the Federation

5.8.3. Measures

No.	Contents	Time	Competence
183	Evaluation of the incentives provided to increase the hiring of people with disabilities	ab 2014	BMASK and BKA
184	Information and training for personnel managers and senior managers in the civil service on the theme of disability and dealing with people with disabilities (also via the Federal Administration Academy)	2012	All ministries
185	Special information offers for new members of staff with disabilities	2013	BMASK and BKA
186	Mentoring projects on career planning for staff with disabilities	2015	BMASK and BKA
187	Special support measures for staff with visual disabilities	2012 – 2020	BMF

6. LIVING INDEPENDENTLY

The concepts of self-determination and empowerment or the principle of ‘mobile rather than in-patient’ have become key objectives of disability policy, both in Austrian programmes (**Disability Concept of the federal government** of 22 December 1992) and in international documents (**European Disability Strategy 2010 – 2020**). The chapter “6. Living independently” on Page 83 also serves to implement Article 19 (Living independently and being included in the community), Article 23 (Respect for home and the family), Article 28 (Adequate standard of living and social protection) and Article 29 (Participation in political and public life) of the **UN Disability Rights Convention**. Article 19 of the Convention begins as follows::

„States Parties to this Convention recognize the equal right of all persons with disabilities to live in the community, with choices equal to others, and shall take effective and appropriate measures to facilitate full enjoyment by persons with disabilities of this right and their full inclusion and participation in the community ...“

6.1. Living independently in general

6.1.1. Point of departure

Many **monetary benefits and benefits in kind** which have been introduced in the last 20 years in Austria are intended to make it possible for people with disabilities to live an independent life (long-term care allowance, personal assistance, various social services). However, around 13,000 people with disabilities in Austria still live in **residential and care facilities** (data from Vertretungsnetz, July 2010) and do not always have the opportunity to represent themselves. There is frequently a link between the form of housing and benefits and services which contradicts the idea of independent living. People with learning disabilities in particular often cannot freely choose the way they live and their form of accommodation.

Providing support for people with disabilities to live independently is the responsibility of the Länder. It includes on the one hand the **personal assistance** service, which is offered in very different forms depending on the region in question. On the other hand, there are people with disabilities for whom organising their support services themselves is too much, or who do not want personal assistance for other reasons. For these people, **other offers** are necessary.

6.1.2. Objectives

- In the interests of **empowerment**, people with all kinds of disabilities have to be enabled to live as independently as possible and to participate in all areas of society.
- Living independently also includes the possibility of entering into a partnership with someone, marrying or having a family – all of which must be **based on the persons’ own decisions**.

6.2. Participation in political and public life

- Different offers of support services and benefits must be available for the varying needs and different stages of life of people with disabilities. Only a suitable **range of offers** can enable those affected to really lead an independent life.
- In the field of housing, a comprehensive **de-institutionalisation programme** is necessary in all nine Länder. In this process, large institutions need to be broken down and at the same time support services created which also enable people requiring a high level of support to lead an independent life in their own homes. The principle has to be that those affected can **choose** the form of housing which suits them and the support services they need.
- People with learning disabilities must have a **right to have a say and self-advocacy** within and outside institutions. In this context, this self-advocacy has to be supported by financial and organisational measures (e.g. flexible schedules in day centres or occupational therapy).
- **Peer counselling** by people with disabilities should be supported and extended.
- In **some forms of disabilities**, independent living is a particular challenge (e.g. people with autism, people with certain psychiatric illnesses or older people with disabilities). Together with their interest groups, opportunities for independent living for these target groups must be specially considered and further developed.

Indicators for the achievement of goals:

Number of places in homes for people with disabilities
Number of residential places in autonomous forms of housing
Number of supported self-advocates

6.1.3. Measures

No.	Contents	Time	Competence
188	Strengthening of self-advocacy of people with learning disabilities by means of financial support for pilot projects from the self-advocacy organisations	2012 – 2020	BMASK

6.2. Participation in political and public life

6.2.1. Point of departure

For people with sensory or learning disabilities it is frequently difficult to obtain the necessary education and the necessary information in order to **participate in political and public life**.

For people with disabilities, participation in the **information society** is often linked with difficulties.

According to the 1990 Jurors and Lay Judges Act (GSchG), persons who “cannot fulfil the obligations of this office due to their physical or mental state” are excluded from being **jurors or lay judges**. This formulation could lead to the discrimination of people with disabilities.

6.2.2. Objectives

- Political **adult education** has to also be made accessible to people with sensory or learning disabilities.
- Official **documents** have to be written in such a way that they are **understandable** for those affected, also for people with learning disabilities.
- All sectors of the population, particularly people with disabilities, have to be included in the **information society**.
- A change in the GSchG is planned in order to clarify that people with disabilities are not excluded from being **jurors or lay judges**.

6.2.3. Measures

No.	Contents	Time	Competence
189	Accessible adult education on political and public life and information in easy to read versions	2012 – 2020	All federal ministries and Länder
190	The offering of information about participation in elections in accessible and (as far as possible) understandable form, in printed and electronic versions	2012 – 2020	BMI
191	A possible change in the GSchG so that people with disabilities are not excluded from being jurors or lay judges .	2015	BMJ

6.3. Personal assistance

6.3.1. Point of departure

Personal assistance can be defined as a form of personal help which those affected organise themselves and thus become able to live in a more self-determined and independent way.

The responsibility for personal assistance is **shared between the Federation and the Länder**. The Federation is responsible for personal assistance in the workplace (in 2011, 366 persons were subsidised by the BMASK) and for assistance in federal schools and higher education. The Länder are responsible for personal assistance in other areas of life. The arrangements created by the Länder **vary considerably** in their objectives, the persons entitled, the conditions, the organisational form, the amount of

6.4. Social services

subsidies, and how income, assets and other financial benefits are taken into account. Overall, around 1,000 persons have received a benefit or service which corresponds to this model of personal assistance.

6.3.2. Objectives

- Personal assistance as an important aid for independent living should be **extended** and, as stipulated by the UN Convention, offered for **all types of disabilities**. At federal level this is to take place in education and training, and in employment.
- The different rules on personal assistance at regional level should be **standardised throughout the country**.
- Pupils at **federal schools** who require such support are to continue to receive personal assistance in order to successfully complete their school.
- In this context the Länder are also expected to further extend personal assistance at **compulsory schools**.
- It should be ensured that personal assistants have fair **working conditions** and receive reasonable **payment**.

Indicator for the achievement of goals:

Number of persons who take advantage of subsidised personal assistance.

6.3.3. Measures

No.	Contents	Time	Competence
192	Drawing up the concept for the nationwide uniform regulation of personal assistance in all areas, with the participation of people with disabilities	2014	BMASK and Länder
193	Taking personal assistance into account in the financial adjustment between the Federation and the Länder	2015	BMF
194	Drawing up guidelines on the use of personal assistance at federal schools	2012 – 2020	BMASK, BMUKK

6.4. Social services

6.4.1. Point of departure

Social services are intended to enable disabled persons and those in need of care to live in their own homes and as independently as possible. These services (mobile and inpatient support and care services, semi-inpatient day care, temporary care in inpatient facilities, case and care management, and alternative forms of housing) are provided by trained staff and are the responsibility of the Länder.

Due to demographic trends, costs are rising, which means the problem of **sustainable financing** has to be solved.

Until now, the **statistical data** available on social services have been poor and difficult to compare. The families of **people suffering from dementia** who live in residential or nursing homes have high and often unattainable expectations of those running the home and its professional and voluntary staff. This can lead to emotional strain on all sides, complaints and conflicts. A consequence of this is that socially active former family members of people suffering from dementia, whose experience could be used, shy away from voluntary activities in this field.

6.4.2. Objectives

- Earmarked subsidies from the Federation to the Länder in accordance with the **Long-term Care Fund Act** (PFG) are designed to safeguard and ensure the development and extension of social services in the long-term care provided by the Länder and communities until and beyond 2014.
- To improve the transparency, validity, planning and control of the social services offered in long-term care, a **care services database** is being established in accordance with Section 5 of the Long-term Care Fund Act.
- **Family members** should be lastingly integrated into the care and support of relatives suffering from dementia who live in residential or nursing homes. The potential for voluntary work offered by experienced relatives should be better used.

6.4.3. Measures

No.	Contents	Time	Competence
195	Drawing up a concept for the transition to the longterm care fund scheme also beyond 2014 in the working group on the structural reform of long-term care	2012	BMASK, BMF and Länder
196	Establishment of a care services database by Statistics Austria	2012	BMASK

6.5. Long-term care allowance

6.5.1. Point of departure

Long-term care allowance is an earmarked benefit which is solely to cover additional care-related costs. It is intended to ensure that people in need of care receive the help and support they need and to improve their chances of leading an **independent, needs-orientated life**. The persons in need of care themselves decide on which type of care the money is used for. Long-term care allowance is paid in seven stages according to care needs; if the person's state of health deteriorates, an application for

6.5. Long-term care allowance

an increase can be made. Long-term care allowance thus makes an important contribution towards the principle of living independently for people in need of care.

As of February 2012, around 436,000 persons received federal long-term care allowance – of whom around 67,000 are former recipients of regional long-term care allowance. The Long-term Care Allowance Reform Act 2012, Federal Law Gazette I No. 58/2011, transferred the competence for legislation and execution from the Länder to the **Federation**, thus **concentrating** responsibility for long-term care allowance there. In addition, a further **reduction of the number of decisionmakers** in the field of the Federal Long-term Care Allowance Act (BPGG) took place from more than 280 regional bodies and 23 federal bodies to a mere seven entities.

As a result of the pilot project to monitor long-term care allowance carried out with the involvement of specialist carers from October 2010 – February 2011, the change in the staging regulations of the BPGG which came into effect on 1 January 2012 clarified that alongside medical experts, **qualified nursing professionals** can also be used to provide expert reports in the field of long-term care.

6.5.2. Objectives

- In the case of long-term care allowance – particularly with regard to the Federation taking over responsibility for regional long-term care allowance – effective monitoring is to be used to observe the number of recipients and the distribution according to stages.
- The drawing up of expert reports is to be further developed using additional know-how and its evaluation by qualified nursing professionals.
- Accessible information about long-term care allowance is to be drawn up.

6.5.3. Measures

No.	Contents	Time	Competence
197	Evaluation of expert reports on long-term care allowance by qualified nursing professionals	2012 – 2013	BMASK
198	Monitoring of the development of the number of recipients of long-term care allowance and their distribution according to stages	2012 – 2020	BMASK
199	Increased efforts regarding health promotion and preventive medicine for people in need of care	2015	BMASK, BMG and Länder
200	Creation of information about long-term care allowance in an easy to read -version	2012	BMASK

6.6. Caregiving relatives

6.6.1. Point of departure

Caregiving relatives are exposed to **special strain** in terms of their time, physically and mentally as a result of informal care work in the family. This is particularly true for people who also work. Family hospice leave can, however, currently only be taken advantage of for caring for dying relatives or severely ill children living in the same household. The **legal status** of caregiving relatives with regard to a better compatibility of care work and their jobs should therefore be improved.

In order to examine additional possibilities for **family hospice leave** in relation to care, and the possibility of **care leave** for up to six months (including protection from dismissal), talks are currently being held – also in the interests of better compatibility of family life and work – between the BMASK and the social partners.

In accordance with the resolution No. 1559/A (E) of 18 May 2011, the BMASK commissioned a study on the theme of ‘Children and young people as caregiving relatives in Austria’. The objective is to obtain an insight into the situation of **young carers** in Austria and to create familyorientated help schemes to increase the quality of life of these children and young people and to reduce the burdens on them.

6.6.2. Objectives

- In order to ensure the support and care of close relatives, the possibility of **part-time work**, similar to the rules on part-time work for parents, and **care leave** for up to six months (including protection against dismissal) is being examined.
- The need for supporting measures for **caregiving children and young people** should be determined.

6.6.3. Measures

No.	Contents	Time	Competence
201	Examination of the possibility of a legal right to parttime work and care leave for caregiving relatives in agreement with the social partners	2012	BMASK
202	Analysis of accompanying measures for caregiving relatives as part of the working group on the structural reform of care	2012	BMASK and Länder
203	Award and accompaniment of a study on children and young people as caregiving relatives in Austria	2012	BMASK

6.7. Ensuring a standard of living and combating poverty

6.7.1. Point of departure

As people with disabilities have a disproportionate **risk of poverty**, they are a key group in combating poverty. The most sustainable way of combating poverty is to improve income and employment opportunities – this is particularly true for people with disabilities.

The **means-tested minimum income** (BMS) which was agreed upon by the Federation and the Länder and which has been implemented nationwide since 1 October 2011 represents a reform of the system of open social assistance of the Länder. As a general system to reduce poverty it does not have special target groups, but is generally designed to support persons suffering financial hardship by providing a minimum level of benefits.

People with disabilities are entitled to the benefits of the BMS **under the same conditions** as non-disabled persons, and it is only an option if their material needs cannot be provided for otherwise. In the **social compensation** system, benefits (pensions and means-tested benefits) safeguard the standard of living of victims and surviving dependents. However, these benefits lose value through inflation.

For people with learning disabilities, it is often difficult to obtain good and **understandable information** about social benefits and allowances, and to assert their rights.

6.7.2. Objectives

- Understandable and accessible **information and advice** must be offered about all social benefits and services, also for people with learning disabilities.
- People with disabilities should receive **special consideration** in all measures to avoid and reduce poverty.
- As people with disabilities are particularly threatened by poverty, they will benefit to an over average extent from the **advantages of the means-tested minimum income (BMS)** (inclusion in statutory health insurance, limitations on recourse, an allowance for assets etc.)
- The national reform programme for the implementation of the **Europe 2020 Strategy** aims to reduce the number of persons who are at risk of poverty and socially excluded by 235,000 or 16% until 2020. This objective addresses above all sub-objective 2 (Combating long-term unemployment and improving the participation in employment of persons of working age at risk of poverty) and sub-objective 5 (Preventive health care in working life and improvement of the labour market opportunities for people with disabilities). The following are cited: improved employment opportunities for recipients of BMS, focused measures for skills training and to obtain qualifications, health promotion measures and a labour market campaign for people whose health is impaired and for people with disabilities.

Indicator for the achievement of goals:

A combined indicator defined at EU level composed of risk of poverty, material deprivation and jobless households (annual EU-SILC survey carried out by Statistics Austria).

6.7.3. Measures

No.	Contents	Time	Competence
204	Ensuring the continuity of the value of pension benefits in the social compensation system	2012 – 2020	BMASK

7. HEALTH AND REHABILITATION

7.1. Health

7.1.1. Point of departure

According to Article 25 of the **UN Disability Rights Convention**, people with disabilities have a **right to** the highest possible level of **health** as well as non-discrimination in the field of health care. The Convention also obliges Austria to take all appropriate measures in order to ensure that people with disabilities have access to gender-specific health services, including rehabilitation. Austria therefore has to make a full range of high quality and sufficient health care available, and must not treat its citizens unequally in this regard.

In Austria, people with disabilities fundamentally have full access to all services provided by health and work accident insurance (medical treatment, dressings, medicines and medical therapeutic aids, nursing care at home, hospital treatment and medical rehabilitation). The use of the **catalogue of services of statutory health insurance** is primarily based on the presence of an illness requiring treatment, regardless of its cause, extent and duration (the so-called finality principle). At a legislative level, health insurance services are thus formulated in such a way that no difference is made between whether they are taken advantage of by disabled or non-disabled persons.

However, health insurance does offer individual measures whose effects particularly benefit people with disabilities or the chronically ill, such as:

- **E-card:** all of the e-cards used to obtain the medical services of health insurance funds which have been newly issued from 2010 have braille writing on them with the letters 'sv' in braille on the card. This makes it easier for visually disabled and blind people to distinguish the ecard from other plastic cards of the same shape.
- **Ceiling on prescription fees** of 2% of the person's annual net income as a measure to relieve the burden on chronically ill people (since 2008).
- **Exemption from prescription fees** for medicines and exemption from copayments for therapeutic aids.

Since 2001 it has been obligatory, according to binding regulations in the overall contract, for **group practices with state health insurance fund contracts** to ensure "disabled-friendly" access. In relation to the award of **new health insurance fund contracts**, the health insurance funds and medical associations are also strongly promoting barrier-free access to doctors' surgeries. The lack of barrier-free access to medical practices in Vienna has been in the process of being eliminated for some years now

by a staged plan. Applicants for the award of new health insurance fund contracts obtain more points if they oblige themselves to seriously attempt to make their practice accessible (guidelines of the health insurance institutions for the establishment of individual doctors' surgeries for general practitioners, specialists and dentists, as well as for group practices).

Numerous **pharmacies** have been made accessible in recent years by means of adaptations, particularly via broad entrance areas without steps, which have increased usability and customerfriendliness overall and brought them up to modern standards.

In accordance with the EU Directive on Human Medicines, since 2005 the **description of a medicine** on the packaging must also be **in braille**, and the instructions for use have to be available in formats which are suitable for blind and visually disabled persons.

In **health facilities and health and support centres**, the health insurance fund staff are trained to interact professionally and respectfully with people with disabilities whom they are looking after or treating. The Upper Austrian Regional Health Insurance Fund has additionally developed programmes and offers which make it possible to target specific groups of persons. Rehamed Tisserand in the Upper Austrian town of Bad Ischl is particularly worth mentioning in this context. In this institution they have specialised in the care of guests who are deaf or hard of hearing. Several times a year, a recuperation programme is offered which is adjusted according to diagnoses. In addition, the support staff and the health professionals are trained in sign language.

7.1.2. Objectives

- **Inability to work due to disabilities** ('invalidity') of older workers as a phenomenon which occurs in significant numbers (around 90,000 applications p.a. and around 30,000 awards) is to be reduced by advice and prevention programmes as well as rehabilitation measures for directly affected workers. Older employees should be able to maintain their ability to work until they reach retirement age and should not have to leave working life prematurely.
- Employees who have health problems or the long-term unemployed should receive the **rehabilitation** they require. The goal of rehabilitation measures is to avoid invalidity or to eliminate it, and to ensure that there is a high probability that people can be reintegrated into the labour market in the long term. The conditions required to carry out rehabilitation measures should be created.
- In the entire health care system – as in other fields of public interest – **comprehensive accessibility** is to be ensured. This objective refers to inpatient facilities and particularly outpatient clinics as well as all doctors' practices.

7.1.3. Measures

No.	Contents	Time	Competence
205	Establishment of a standard medical examination centre for the fields of pension insurance, the Public Employment Service, work accident insurance, longterm care allowance, disability and social assistance (Gesundheitsstraße – ‘ health street ’)	2018	BMASK, BMG, AMS, social insurance institutions, Länder
206	Extension of psychiatric care , particularly for children and young people	2012 – 2020	BMG, social insurance institutions, Länder
207	Public funding for patient self-help groups in order to strengthen their independence and the peer counselling they offer	2012 – 2020	BMG
208	Increasing the offer of mobile hospice and palliative teams and multi-professional palliative services, hospice and palliative care beds (also in homes) and day hospices	2012 – 2020	BMG, Länder
209	Drawing up a staged plan ‘Accessible Health Care 2020’ with the involvement of people with disabilities	2012 – 2013	BMASK, BMG, social insurance institutions
210	Initial and in-service training of medical and nursing staff with regard to the needs of people with disabilities	2012 – 2020	BMG, BMWF, BMASK
211	Sign language courses and the training of doctors with a good knowledge of sign language in order to enable deaf people to speak confidentially to doctors	2012 – 2020	BMG and Länder

7.2. Preventive medicine

7.2.1. Point of departure

Alongside high-tech medicine, the **social insurance institutions** provide services to promote health and prevent illness. Within social insurance, great emphasis is placed on protection against illness, disease and accidents, the promotion of health and the avoidance of premature inability to work. Targeted preventive medicine can help to avoid chronic illness and other disabilities, or help to prevent them from becoming worse.

Older disabled employees currently leave the labour market in large numbers due to early retirement because of illness and disabilities (pensions due to invalidity and inability to work). The number of early retirements is very high in Austria in comparison with other countries. If the average retirement age in the field of pensions for invalidity and inability to work would increase by one year, this would save the national economy around € 300m per year. It is noticeable that the number of applications for early retirement due to psychological/mental disabilities or illnesses has increased enormously in recent years.

7.2. Preventive medicine

In the 2008 government programme, there was a focus on older workers with measures to increase employment opportunities, employability and the employment rate and on health promotion as a preventive measure to maintain and promote the ability to work. At the end of 2009, the project “Work and Health” was initiated in relation to the newly adopted Work and Health Act, which alongside an examination centre for the ability to work (health street) established a range of offers for occupational secondary prevention (the **Fit 2 Work programme**). Fit 2 Work is financed by the AMS, regional health insurance funds (GKK), the pension insurance institutions (PV), the General Work Accident Insurance Institution (AUVA) and the Federal Social Office (BSB). Its implementation is carried out at a regional level. The Federal Social Office is responsible for coordination.

The **Labour Inspectorate**, via its advisory and supervisory activities, makes an important contribution to maintaining the ability to work and to the implementation of preventive measures and measures to determine and evaluate dangers and stresses in the work-place in order to protect health and safety. This is based on the legislation on workers’ protection.

7.2.2. Objectives

- People with disabilities should be able to earn a living in the free labour market. Measures to **maintain the ability to work** of older employees have a high priority, particularly for people with disabilities.
- Health promotion for **people with learning disabilities** should be increased via specific programmes.
- Sport makes a great contribution towards the promotion of health in the population. **Disability sports** should therefore be supported, because they prevent illness and promote the health of people with disabilities.

7.2.3. Measures

No.	Contents	Time	Competence
212	Full development of the Fit 2 Work programme for employees with disabilities or chronic illnesses and for companies.	2012 – 2020	BMASK, BSB, AMS, social insurance institutions
213	Increased incorporation of sport – and thus also disability sports – into the health care system	2013	BMG, BMLVS
214	Drawing up and implementation of health programmes which particularly take people with learning disabilities into account	2012 – 2020	BMG
215	Promotion of health at work	2012 – 2020	Social insurance institutions

7.3. Rehabilitation

7.3.1. Point of departure

According to **Article 26 of the UN Disability Rights Convention**, Austria is obliged to organise comprehensive habilitation and rehabilitation services and programmes, particularly in the fields of health, employment, education and social services.

For rehabilitation measures in a narrower sense (restoring a person to their original healthy condition), the social insurance institutions (health, work accident and pension insurance institutions) are primarily responsible (**medical rehabilitation**).

Rehabilitation in a broader sense is understood according to the definition of the World Health Organisation (WHO) and the International Labour Organisation (ILO) "...the combined and coordinated use of medical, social, educational and vocational measures for training or retraining the individual to the highest possible level of functional ability" (**medical, occupational, social and pedagogic rehabilitation**). See the relevant measures in Chapter 1–6.

In the field of prevention, health promotion and rehabilitation, the **social insurance institutions** are keen to constantly improve their offers and to adapt them to the current requirements. In this context, the '**2012 rehabilitation plan** for medical rehabilitation' is of particular relevance. It was commissioned by the Federation of Austrian Social Insurance Institutions with the involvement of the social insurance institutions at the Austrian Health Institute (ÖBIG).

To supplement inpatient rehabilitation treatment, offers of **outpatient rehabilitation** are also being developed, such as outpatient cardiological rehabilitation in facilities under contract to the health insurance funds which fulfil a specified set of requirements and services. The Upper Austrian Regional Health Insurance Fund has offered a six-week outpatient rehabilitation programme in the Specialist Outpatient Clinic in Linz since 2011, which is especially for persons who have had part of their lower extremities amputated.

Within the framework of their responsibility and on the basis of the Länder disability and social assistance laws, the **Länder** support measures for rehabilitation and the provision of therapeutic aids, and finance so-called integration subsidies for society and working life for people with disabilities, as well as special social services.

In the 2011 Budget Accompanying Act, the **principle of 'rehabilitation rather granting a pension'** was strengthened. Occupational rehabilitation to avoid retirement was introduced as a compulsory

service for those insured persons whose ability to work is reduced. The insured person thus has a legal entitlement to rehabilitation if s/he at least probably fulfils the conditions for a pension due to invalidity, inability to carry out their occupation or inability to work.

A specific challenge for the health care and social systems is posed by the approx. 800 **patients in a persistent vegetative state** living in Austria. Alongside medical treatment, these severely disabled persons primarily need rehabilitation and intensive long-term care in an institution or at home.

7.3.2. Objectives

- The following branches of rehabilitation are to be extended: **psychiatric** and **oncological** rehabilitation (cancer patients). Outpatient rehabilitation is currently being tested, and depending on whether it fulfils requirements it will be deployed in larger urban areas.
- The offers of early and long-term rehabilitation for **persons in a persistent vegetative state**, supplemented by interdisciplinary case management, is to be improved, especially in order to relieve the strain on the family and personal environments of these patients.

Indicator for the achievement of goals:

Waiting times are an indicator in relation to inpatient psychiatric rehabilitation: the target has been achieved if waiting times are shortened to three months.

7.3.3. Measures

No.	Contents	Time	Competence
216	Survey of needs and the extension of psychiatric rehabilitation on the basis of the 2012 rehabilitation plan	2012 – 2015	BMASK, BMG, social insurance institutions
217	Creation of needs-orientated oncological rehabilitation centres	2012 – 2015	BMASK, BMG, social insurance institutions
218	Extension of outpatient cardiological rehabilitation with a scientific assessment on the basis of the 2012 rehabilitation plan	2012 – 2020	BMASK, BMG, social insurance institutions
219	Needs-orientated extension of remobilisation centres on the basis of the 2012 rehabilitation plan	2016	BMG, social insurance institutions
220	Legislative arrangements to harmonise the current rehabilitation services – which can vary depending on the cause of the disability and insurance status	2020	BMG and BMASK

7.4. Therapeutic and technical aids

7.4.1. Point of departure

Therapeutic and technical aids are specific products, devices, equipment or technical systems which are used for the rehabilitation of physically, cognitively or sensory disabled persons in order to treat the consequences of illness or compensate for disabilities. In many cases they are a precondition for successful participation, and although they cannot eliminate disability they can make everyday life easier and compensate for disabilities or mitigate the functional limitations they cause. The technical maturity of these therapeutic aids is continuously improving, and there are a constantly increasing number of them available.

In Austria, around 63,000 people with speech impairments are dependent on their 190,000 family members for their **communication**. Support from therapeutic or technical aids would also enable this group of persons to live independently in many cases.

The social insurance institutions pay wholly or partly for those therapeutic aids which are included in the **catalogue of therapeutic aids of the Federation of Austrian Social Insurance Institutions** and have been prescribed by a doctor. The social insurance system is, however, tied to the legislative framework. Therapeutic aids which are not financed by social insurance can be financed via the help for the disabled scheme of the Länder. It has been common for many years now for the social insurance institutions and the Länder to share the costs.

The field of statutory health insurance is characterised by the principle that the treatment of the sick has to be sufficient and expedient, but may not **exceed what is necessary**. Some insurance institutions provide for patients suffering from incontinence, for example, or for those who require enteral nutrition, who are now partly supplied directly by contract companies. Oxygen supplies and wheelchairs are provided in the same way.

Hilfsmittelinfo is an information service for consumers provided by the **BMASK** in the form of an internet database which is independent of economic interests (www.hilfsmittelinfo.gv.at). Following on from the EU project 'Handynet', technical aids for people with disabilities, older people and those in need of care have been documented in a database since 1999. It has been available on the internet free of charge since 2002. It includes 8,000 illustrated data sets which provide detailed information about uses and applications, where to purchase the items and estimated prices on the Austrian market.

7.4.2. Objectives

- As therapeutic aids for people with disabilities can be subsidised by several bodies, the competences and procedures are to be made **more transparent** for those affected.
- In the long term, the creation of **central contact points for therapeutic aids** for people with disabilities should be targeted, as it is only in this way that transparent and effective financing in this area can be achieved.
- Disabled children should receive as much of the therapeutic aids they need as possible.
- Transparency and information are important in order that the financial burdens involved in the purchase and maintenance of therapeutic aids remain within certain limits. The existing database in the internet (www.hilfsmittelinfo.gv.at) will be continued to this end.

7.4.3. Measures

No.	Contents	Time	Competence
221	Closer and institutionalised cooperation of all costbearing bodies in the field of therapeutic aids	2015	BMASK, BMG, social insurance institutions, Länder
222	The creation of central contact points for therapeutic aids for people with disabilities, particularly as an optimal access point for disabled children	2015	BMASK, BMG, social insurance institutions, Länder
223	The closing of gaps in the financing of the required therapeutic aids for people with disabilities	2020	BMASK, BMG, social insurance institutions, Länder
224	Continuation of the internet database 'Hilfsmittelinfo' (www.hilfsmittelinfo.gv.at)	2012 – 2020	BMASK

8. AWARENESS-RAISING AND INFORMATION

8.1. Research

8.1.1. Point of departure

According to **Article 4 of the UN Disability Rights Convention**, Austria has generally committed itself to:

... „undertake or promote research and development of universally designed goods, services, equipment and facilities, as defined in article 2 of the present Convention, which should require the minimum possible adaptation and the least cost to meet the specific needs of a person with disabilities, to promote their availability and use, and to promote universal design in the development of standards and guidelines;

To undertake or promote research and development of, and to promote the availability and use of new technologies, including information and communications technologies, mobility aids, devices and assistive technologies, suitable for persons with disabilities, giving priority to technologies at an affordable cost.“...

Alongside a sufficient offer of care services and ensuring the financial security of people with disabilities, it is becoming increasingly important to support people with disabilities with **intelligent technical products**. The current situation is still characterised by a failure of the market, as the necessary products are not available in a satisfactory form (with regard to prices, amounts and features).

The **institutes** ‘Integrated Studying’ at the University of Linz and at the Vienna University of Technology (Fortec: rehabilitation technology) as well as the Centre for Sign Language and Communication with the Hard of Hearing of the University of Klagenfurt are researching the needs of people with disabilities and their possible support via technical developments. These institutes are successfully involved in EU research programmes.

8.1.2. Objectives

- The development of products and services **for older people** in the field of information and communications technologies (ICT) is to be continued. The use of these products and services should help people to increase their quality of life, cope better with everyday life, and to remain in their own homes as long as possible.
- Research into the needs of **people with disabilities** and their possible support by technical developments is to be continued; the Integrated Studying institutes at the **University of Linz** and the **Vienna University of Technology** and the Centre for Sign Language and Communications for the Hard of Hearing at the **University of Klagenfurt** are to be maintained.

8.2. Statistics

- The **influence of sport on health** should be backed up by a valid basis in terms of materials in order to facilitate appropriate reforms.
- At public universities, an extensive academic examination of issues related to **care and support sciences** should take place.
- In order to promote research into the field of disabilities, a university chair for **Disability Studies** is to be established in line with international examples.
- In order to counteract the chronic lack of sign language interpreters, there should be an increased number of Bachelor's and Master's degrees offered in **Austrian sign language**.

8.1.3. Measures

No.	Contents	Time	Competence
225	Increased research on the situation of people with disabilities	2013 – 2020	BMASK and other ministries
226	Long-term studies on the influence of sport on the health of people with disabilities	2012 – 2020	BMLVS

8.2. Statistics

8.2.1. Point of departure

According to **Article 31 of the UN Disability Rights Convention** (statistics and data collection), Austria is obliged to collect appropriate information, including statistics and research data, which enable it to draw up policy concepts to implement the Convention.

In the **EU disability strategy 2010 – 2020**, the field of data collection and statistics is accorded great significance. The EU plans to extend the collection of periodic statistics which are relevant to disabilities in order to have sufficient data on the situation of people with disabilities at EU level, and particularly in the individual EU member states. These EU statistics particularly include its statistics on income and living conditions, **EU-SILC** (currently however there are no questions foreseeable which go beyond the Minimal Health Module), the **EU labour force survey** with its ad-hoc module on the “employment of people with health impairments“, the **European Health Survey** and finally the European Health and Social Integration Survey/**EHSIS**)

Austria has some (in part) very **detailed statistics** and data on the issue of disabilities. Particularly in the fields of the employment of people with disabilities and in relation to the payment of benefits to people with disabilities, Austria has a solid amount of valid data.

In 2007 – 2008, Statistics Austria carried out a **microcensus special survey** on the theme of people with disabilities. From the EU-SILC 2006 survey, Statistics Austria carried out a **special survey** on the theme of people with disabilities.

8.2.2. Objectives

- In the field of disabilities, Austria will participate in the future **statistics processes** carried out by the EU, because only in this way can data be obtained on the situation of people with disabilities which is comparable across the EU.
- For the communication and planning of policy on disabilities, the survey and evaluation of statistical data is important. However, it should not be overlooked that the surveys have to comply with strict **data protection law provisions**, are made in agreement with the **representatives of people with disabilities** and have to be carried out with **respect for the dignity** of those affected. In this context it is necessary that a suitable way of surveying disabilities is developed which does not violate people's dignity. The representatives of people with disabilities should therefore be consulted during the design of such surveys as well as in the drawing up and evaluation of the questionnaires.
- All statistics should be **surveyed and evaluated gender-specifically**.

8.2.3. Measures

No.	Contents	Time	Competence
227	Participation in EU-wide standardised and systematic statistical surveys by Eurostat on the situation of people with disabilities	2015 – 2020	Statistics Austria, BMASK
228	Regular evaluation of the EU-SILC data on people with disabilities	2012 – 2020	BMASK
229	Development of a suitable way of surveying disabilities when obtaining statistics.	2012 – 2020	BMASK, BMG, Statistics Austria
230	Commissioning a survey 'People with Disabilities in Austria' for the the second country report on the implementation of the UN Disability Rights Convention	2016	BMASK

8.3. Reports

8.3.1. Point of departure

According to Section 13a of the Federal Disability Act, the government is obliged to draw up a **Report on the Situation of People with Disabilities in Austria** on a regular basis. After the first report in 2003, the Federal Ministry of Social Affairs drew up in 2008 a second disability report in cooperation with the

other ministries, an extensive documentation of the situation of people with disabilities in Austria. This was adopted by the Ministerial Council on 23 December 2008 and subsequently presented to the National Council of Parliament (www.sozialministerium.at).

After publication in printed form, the BMASK had both **disability reports** translated into **easy to read versions** for the target group of people with disabilities (www.sozialministerium.at).

The first Austrian **country report** on the UN Disability Rights Convention was adopted on 5 October 2010 by the Ministerial Council and also translated into an **easy to read version**.

The **Women's Health Report 2010 – 2011** similarly contains several issues relevant for disabilities such as 'the living situations of women with disabilities', 'challenges and barriers in the health care of women with disabilities' and 'the political context and measures for change' (see www.bmgf.gv.at).

8.3.2. Objectives

- The regular publishing of official reports by the Federation on the situation of people with disabilities in Austria is to be continued. This statutory reporting obligation should be **linked** to Austria's reporting obligations towards the UN in relation to the UN Disability Rights Convention as well as the planned interim assessments of this NAP on Disability.
- In addition, it is also necessary in the interests of disability mainstreaming that individual **ministerial reports** (economic report, youth report, women's report, higher education report and schools report etc.) also refer to the disability perspective.

8.3.3. Measures

No.	Contents	Time	Competence
231	The regular production and publication of disability reports in accordance with the Federal Disability Act (BBG) in coordination with the country reports on the basis of the UN Disability Rights Convention	2014 – 2018	BMASK
232	The publication of the disability reports in accordance with the Federal Disability Act and the country reports on the basis of the UN Disability Rights Convention in easy to read versions	2015 – 2019	BMASK
233	Taking into account the perspective of people with disabilities in annual reports and other publications from ministries	2012 – 2020	All ministries

8.4. Public relations work and information offers

8.4.1. Point of departure

According to **Article 8 of the UN Disability Rights Convention**, Austria is obliged to intensify public awareness for people with disabilities and to promote their rights and their dignity.

The BMASK and the BSB provide information on the cross-cutting issue of disability for a broad public by producing relevant publications such as the “**Einblick**” (Insights) **series** to support those in search of advice, and via its website (BMASK ordering service). An important aspect of this is raising public awareness for the living situations of people with disabilities.

In magazines which are published by the organisations of people with disabilities or individual persons , disabled and non-disabled people can inform themselves about a wide range of aspects of life with disabilities. The state provides funding to support the publishing of these magazines.

8.4.2. Objectives

- Via ongoing, regular updating of the publications and making them available to a broad public free of charge, **state public relations work and disability awareness-raising** is carried out. Communication with interested members of the public via a separate website is of key significance.
- In order to inform specific groups and to raise public awareness, **targeted campaigns** on the issue of disabilities are to be carried out. The one-month – disability related – long job campaign ,My Chances – Your Benefits’, which was organised by the Federal Social Office and the Public Employment Service and began on 12 September 2011, can be viewed as an example of such a campaign. The public relations and awareness raising work carried out by the **organisations of people with disabilities** will continue to be supported with public funding. It is important in this context that all forms of disabilities are an issue and that those affected receive the necessary specialist information.
- Via **accessible information** (easy to read versions and sign language videos) about the UN Disability Rights Convention and the activities of the independent Monitoring Committee, information should be made available to as many people as possible, with or without disabilities, and especially for family members of people with disabilities.
- A respectful and **up-to-date portrayal** of people with disabilities in the media, particularly on public radio and television, should be promoted (e.g. a reorientation of Austrian Television’s donation campaign “Licht ins Dunkel” – Light into the Darkness).

8.4.3. Measures

No.	Contents	Time	Competence
234	Public offers of disability-specific specialist information via the internet on www.sozialministerium.at, www.sozialministeriumservice.at and www.help.gv.at	2012 – 2020	BMASK, BKA
235	Publication and updating of disability-specific information brochures and publications as well as opportunities to download these publications from the internet	2012 – 2020	BMASK
236	Holding of information seminars on the theme of accessible websites as part of the BMWFJ's media information for young people	2012 – 2020	BMWFJ
237	Awareness-raising and dissemination of information about the UN Disability Rights Convention and the rights of people with disabilities, also in easy to read versions	2012 – 2020	BMASK
238	The information campaign 'Letting people with disabilities participate – Austria's path to inclusion ' – with the involvement of people with disabilities	2016	BMASK
239	Financial support for information events by the associations of people with disabilities on disability policy issues	2012 – 2020	BMASK
240	Extension of the online advice pages for people with disabilities on state websites	2012 – 2020	All ministries

8.5. Initial, in-service and further training and courses for occupational groups

The UN Disability Rights Convention brought about a paradigm shift in the way the issue of disabilities is seen (particularly Article 12 'Equal recognition before the law' and Article 19 'Living independently and being included in the community'). This also requires a rethinking in all occupational groups which have to do with people with disabilities in their work.

8.5.1. Point of departure

In the field of justice, discrimination awareness and sensitisation training is being offered to **judges**. It is related to the problem of discrimination in general, which also and particularly includes people with disabilities. A fundamental rights module was developed in 2007 with the involvement of academics (including the Ludwig Boltzmann Institute for Human Rights in Vienna) and professional associations. This three-day event has been obligatory as preparation for those wishing to become a judge since 2008, and deals with basic rights in the everyday work of a court, including the decisions of the ECHR on the issue of discrimination. Anti-discrimination law has also formed part of the material for the judges' examinations

since 2008. In addition, the judiciary organises regular events dealing with the issue of anti-discrimination.

There are currently no nationwide advisory services for people who are confronted by violence against **older people with disabilities** in their (working) environment. Victims' aid organisations which are able to provide counselling are not seen as suitable contact points and are seldom contacted. The two issues of 1) how to interact with people with disabilities, and 2) the opportunities for disabled children to take part in sports lessons, are underrepresented in the training of **sports teachers**. This leads to sports teachers frequently suggesting that disabled pupils be exempted from school sports lessons.

In the **training of the staff** of individual ministries – such as the BMASK – relevant issues such as social and occupational integration, equal treatment at work, participation in society and accessibility are dealt with comprehensively.

The training series 'A World of Difference' organised by the **Security Academy (SIAK)** is a cornerstone of the **initial and in-service training in human rights for police officers** and raises their awareness so that they can counteract discrimination in all forms. The focus of these seminars is not on specific groups, but is designed to make the participants aware of diversity as a positive aspect and also includes people with disabilities in this scope.

Inclusive education is relevant for **teachers** in all types of schools, and is an essential theme for the creation of an inclusive schools system. Particularly in the field of special needs education, there is a great **need for further training and continuing education** for the many different relevant categories (e.g. education of the deaf and hard of hearing, education of the blind and visually "impaired", education in institutions, education of the physically disabled, further training in the field of behavioural sciences etc.).

8.5.2. Objectives

- In connection with violence against older people with disabilities, **counselling competence on the issue of violence within institutions** has to be developed. This can then be used for putting forward complaints from a wide range of areas (e.g. the field of medicine or senior citizens' organisations).
- Many occupational groups should be trained on the issues of disabilities, the rights of people with disabilities and inclusion in their **specialist initial and further training**, above all:
 - Federal employees in general
 - Teaching staff at all types of schools
 - Sports teachers
 - Health care employees
 - Police officers
 - Prison officers.

8.5. Initial, in-service and further training and courses for occupational groups

Gender-specific aspects should be taken into account in this initial and further training, and the training could be carried out in cooperation with the organisations of people with disabilities.

8.5.3. Measures

No.	Contents	Time	Competence
241	Drawing up of a curriculum for the further training of counsellors for violence against older (disabled) persons , whereby experts on women's issues shall be involved in the development of the curriculum and events should be held in all Länder	2012 – 2013	BMASK
242	Continuation of the initial and further training programmes in the judiciary on the themes of disability and the rights of people with disabilities	2012 – 2020	BMJ
243	The training of sports teachers should include elements on people with disabilities	2012/2013	BMUKK, BMWF
244	Inclusion of the topic of people with disabilities in the basic training and the internal further training of all federal employees	2014	All ministries and the Federal Administration Academy
245	Internal training courses as required on dealing with people with disabilities in a service-oriented way	2012 – 2020	All ministries
246	Initial and further training in human rights for police officers – via the training series 'A World of Difference'	2012 – 2020	BMI
247	One-day events for prison officers on dealing with special groups of prisoners, and on recognising the needs of different groups of inmates (those with noticeable psychological problems or substance dependences etc.)	2012 – 2020	BMJ
248	Nationwide in-service training in teaching methods for persons with "impaired" hearing or vision, for teaching in institutions and teaching the physically disabled	2012 – 2020	BMUKK
249	In-service training events on the theme of inclusion for all types of schools	2012 – 2020	BMUKK
250	Further training and disability awareness training for AMS staff	2012 – 2020	BMASK, AMS

9. LIST OF ABBREVIATIONS

AAL	–	Ambient assisted living
ADA	–	Austrian Development Agency
AGG	–	Arbeit- und Gesundheit-Gesetz; Work and Health Act
AHS	–	Allgemeinbildende Höhere Schule; General secondary school
AMS	–	Arbeitsmarktservice; Public Employment Service
AUVA	–	Allgemeine Unfallversicherungsanstalt; Work Accident and Pension Insurance Institution
BBG	–	Bundesbehindertengesetz; Federal Disabilities Act
BEinstG	–	Behinderteneinstellungsgesetz; Employment of People with Disabilities Act (Disability Employment Act)
BGBL.	–	Bundesgesetzblatt; Federal Law Gazette
BGStG	–	Bundes-Behindertengleichstellungsgesetz; Federal Act on the Equal Treatment for People with Disabilities (Federal Disability Equality Act)
BKA	–	Bundeskanzleramt; Federal Chancellery
BM	–	Bundesminister; Federal Ministry
BMASK	–	Bundesministerium für Arbeit, Soziales und Konsumentenschutz; Federal Ministry of Labour, Social Affairs and Consumer Protection
BMeiA	–	Bundesministerium für europäische und internationale Angelegenheiten; Federal Ministry of European and International Affairs
BMF	–	Bundesministerium für Finanzen; Federal Ministry of Finance
BMG	–	Bundesministerium für Gesundheit; Federal Ministry of Health
BMI	–	Bundesministerium für Inneres; Federal Ministry of the Interior
BMJ	–	Bundesministerium für Justiz; Federal Ministry of Justice
BMLFUW	–	Bundesministerium für Land- und Forstwirtschaft, Umwelt und Wasserwirtschaft; Federal Ministry of Agriculture, Forestry, the Environment and Water Management
BMLVS	–	Bundesministerium für Landesverteidigung und Sport; Federal Ministry of Defence and Sport
BMS	–	Bedarfsorientierte Mindestsicherung; Meanstested minimum ncome
BMUKK	–	Bundesministerium für Unterricht, Kunst und Kultur; Federal Ministry of Education, the Arts and Culture
BMVIT	–	Bundesministerium für Verkehr, Innovation und Technologie; Federal Ministry of Transport, Innovation and Technology
BMWF	–	Bundesministerium für Wissenschaft und Forschung; Federal Ministry of Science and Research
BMWFJ	–	Bundesministerium für Wirtschaft, Familie und Jugend; Federal Ministry of the

8.5. Initial, in-service and further training and courses for occupational groups

		Economy, Family and Youth
BPGG	–	Bundespflegegeldgesetz; Federal Long-term Care Allowance Act
BSB	–	Bundesamt für Soziales und Behindertenwesen – Bundessozialamt; Federal Office for Social and Disability Affairs (Federal Social Office)
BVA	–	Versicherungsanstalt öffentlich Bediensteter; Insurance institute for public sector employees
B-VG	–	Bundes-Verfassungsgesetz; Federal Constitution Act
CAHPAH	–	Comité – Ad-Hoc Plan d’Action Handicap; Disability Committee of the Council of Europe (until 2011)
CS-RPD	–	Cohésion Sociale – Rights of People with Disabilities; Disability Committee of the Council of Europe (from 2012)
EASPD	–	European Association of Service Providers for Persons with Disabilities
ECHR	–	European Court of Human Rights
EEA	–	European Economic Area
EHSIS	–	European Health and Social Integration Survey
EU	–	European Union
EU-SILC	–	Statistics on Income and Living Conditions
EZA-G	–	Entwicklungszusammenarbeitsgesetz; Development Cooperation Act
FAO	–	Food and Agriculture Organization (of the UN)
FFG	–	Österreichische Forschungsförderungsgesellschaft; Austrian Research Promotion Agency
FLAG	–	Familienlastenausgleichsgesetz; Family Burdens Equalisation Act
GKK	–	Gebietskrankenkasse; Regional health insurance fund
GPDD	–	Global Partnership for Disability and Development
GSchG	–	Geschworenen- und Schöffengesetz; Jurors and Lay Judges Act
HeimAufG	–	Heimaufenthaltsgesetz; Residential and Nursing Homes Act
IBA	–	Integrative Berufsausbildung; Integrative vocational training
ICT	–	Information and communications technologies
IHS	–	Institut für höhere Studien; Institute for Advanced Studies
ILO	–	International Labour Organisation
NAG	–	Niederlassungs- und Aufenthaltsgesetz; Settlement and Residency Act
NAP	–	Nationaler Aktionsplan; National Action Plan
NGO	–	Non-government organisation
NPM	–	National prevention mechanism
NQF	–	National Qualifications Framework
OEZA	–	Österreichische Entwicklungszusammenarbeit; Austrian Development Cooperation

OFG	–	Opferfürsorgegesetz; Victims' Welfare Act
OGH	–	Oberster Gerichtshof; Supreme Court
OPCAT	–	Optional Protocol to the Convention against Torture and other Cruel; Inhuman or Degrading Treatment or Punishment;
ORF	–	Österreichischer Rundfunk; Austrian Broadcasting Corporation
ÖAR	–	Österreichische Arbeitsgemeinschaft für Rehabilitation; Austrian umbrella organisation of the organisations of people with disabilities
ÖBIG	–	Österreichisches Bundesinstitut für Gesundheitswesen; Austrian Federal Institute for Health
ÖNB	–	Österreichische Nationalbibliothek; Austrian National Library
PC	–	Personal computer
PFG	–	Pflegefondsgesetz; Long-term Care Fund Act
PV	–	Pensionsversicherung; Pension insurance
PVA	–	Pensionsversicherungsanstalt; Pension Insurance Institution
SIAK	–	Sicherheitsakademie; Security Academy
SMEs	–	Small and medium-sized enterprises
StbG	–	Staatsbürgerschaftsgesetz; Citizenship Act
StGB	–	Strafgesetzbuch; Criminal Code
SPF	–	Sonderpädagogischer Förderbedarf; Special educational needs
StVO	–	Straßenverkehrsordnung; Road Traffic Regulations
TFEU	–	Treaty on the Functioning of the European Union
TU	–	Technische Universität; University of Technology
UBG	–	Unterbringungsgesetz; Hospitalisation Act
UN	–	United Nations
UNDP	–	United Nations Development Program
UNICEF	–	United Nations International Children's Emergency Fund
VO	–	Verordnung; Regulation
WCAG	–	Web Content Accessibility Guidelines
WHO	–	World Health Organisation

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