



## Report on the social inclusion and social protection of disabled people in European countries

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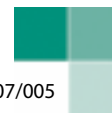
### Background:

The [Academic Network of European Disability experts](#) (ANED) was established by the European Commission in 2008 to provide scientific support and advice for its disability policy Unit. In particular, the activities of the Network will support the future development of the EU Disability Action Plan and practical implementation of the United Nations Convention on the Rights of Disabled People.

This country report has been prepared as input for the *Thematic report on the implementation of EU Social Inclusion and Social Protection Strategies in European countries with reference to equality for disabled people*.

The purpose of the report ([Terms of Reference](#)) is to review national implementation of the open method of coordination in Social inclusion and social protection, and in particular the National Strategic Reports of member states from a disability equality perspective, and to provide the Commission with useful evidence in supporting disability policy mainstreaming.

The first version of the report was published in 2008. This is the second version of the report updated with information available up to November 2009.



## Summary of changes since 2008

### Housing and homelessness:

In June 1 2009 a departmental order came into force, giving residents in certain nursing homes and protected housing most of the same rights as tenants in general. It gives them, among other things, rights to make improvements in their apartments. (Bekendtgørelse om lejerrettigheder til beboere i visse botilbud efter serviceloven).

According to a recent study carried out by the National Federation of Social Educators (Socialpædagogerne 2009), many people with disabilities still live in accommodation that does not correspond with the general requirements of social housing. Of a total of approximately 17.000 people, more than 10.000 people live in accommodation that is too small. 6.400 people live in accommodation of less than 20 m<sup>2</sup>. The study also claims that public investment in housing for disabled people has gone down by 65% in the period 2001-2007. There is, however, still considerable controversy regarding this figure.

The Equal Opportunities Centre for Disabled Persons is in the process of establishing an independent think tank on the subject of housing for disabled people and deinstitutionalisation. According to the Centre of Equal Opportunities (2008), a number of disability organisation representatives and municipal civil servants maintain that the development in some ways is moving away from community and independent living, as the municipalities have begun to build larger residential units again, e.g. with 30 or 50 apartments.

### New strategies and actions for the inclusion of disabled people:

August 23 2009 Denmark signed the UN convention on the Rights of Persons with Disabilities, but not the Optional Protocol

### New changes in incomes, benefits and pensions:

October 1 2008: new rules on home training of children with disabilities came into force. Now parents can get a benefit for training their disabled children at home, provided that the training fulfils the need of the child, follows documented methods, and the parents are able to give the training. (A change in Law on social service § 32).

July 1 2009: new rules on citizen-managed personal assistance came into force. The rules have been relatively unchanged since the scheme was introduced in the 1970s. Now the target group has been extended because it is no longer a requirement that the receiver is able to manage the help him or herself, but it can be managed by a closely related person, an association or a private enterprise. (A change in Law on social service §§ 95 and 96; the original scheme was an experimental one in the city of Aarhus, normally called "Århus-ordningen")

### New changes in long-term care and support:

From 2009 persons using personal assistance (BPA) have been able to choose for a private firm or a user-governed organisation to act as the employer. The Danish disability organisation (DH) has established a non-profit user-governed organisation; LOBPA, for this purpose. The intention is that LOBPA will not just administer the helpers for the individual member, but also engage in recruitment and education of helpers and negotiation of working agreements with trade unions, etc. The intention is to make arrangements so that the members get the most possible independence out of it, and the helpers at the same time have acceptable working conditions.

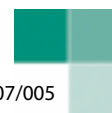
In 2009 there is an intention to start a pilot project for assistance budgets for persons with intellectual disabilities, where another person, a private company or the newly established non profit company LOBPA will take the responsibility of employer.



### **Implications of the economic crisis:**

The municipal economy is short of money, but this is a consequence of government tax reductions which have been in force for a number of years rather than the economic crisis.

The crisis has had less impact for many people with disabilities than for some other groups, as disability pensioners have no risk of losing their income because of unemployment (Peter Birch Sørensen: Skattestop, internationalisering og kommunestyre).



## **PART ONE: SOCIAL INCLUSION PLANS (GENERAL)**

### **1.1 Please describe how and where disabled people are included in your country's published plans for social inclusion and protection?**

The principle of mainstreaming has been advocated since the 1940s by Niels Erik Bank-Mikkelsen, and since 1980 it has been institutionalised in the work of the Central Disability Council. In 1993 it was made official policy by parliamentary declaration.

On August 23 2009 Denmark signed the UN convention on the Rights of Persons with Disabilities, but not the Optional Protocol.

Disability is mentioned several times in the National Report, as follows:

- 2.3 Education: research shall be carried out on the results of education of children and young people with disabilities. The effects of special education shall be elucidated. In addition there are some general remarks on improving the conditions of disabled people.
- 2.4 Employment: a section on disabled people (including initiatives that develop from "protected employment" to "protected work", and a section on persons with mental health conditions.
- 2.5 Housing: 4 lines on housing for people with disabilities.
- 2.8 Abuse: a short section on disabled people who experience abuse.
- 2.8 e-Inclusion: Mention of the development of Danish speech recognition and other ICT tools for disabled people.
- 4.3.4 Free choice: mention that disabled can choose between providers of home services and employ their own assistants.
- Annex 2. Mentions employment initiatives for people with mentalhealth conditions.

### **1.2 In reality, what major actions has your country taken and what are the positive or negative effects on disabled people? (Policy or practical examples)**

Since 1993 there has been a policy on physical and informational accessibility, taking part in education (accessibility, provisions for blind and deaf people, etc) and opening of the job market (see request 2).

The main instrument of this policy has been the Central Disability Council, which was established in 1980. In the first period it was mainly concerned with replacing earlier special schemes with more general ones, following the philosophy of mainstreaming. In 1993, however, it was strengthened with a secretariat with a staff of 12 persons, now 18. These people carry out analysis, conferences, communicate with departments and public agencies, and seek to influence legislation. In 2006 the secretariat strengthened its research profile as one of the employees obtained a Ph.D. degree on the topic of disabled people as political actors. From 1998 the government has had a cross-departmental group on disability policy and a minister with responsibility for this field. Reforms have been made to education encompassing e.g. double study support for disabled students and support for necessary adjustments such as translation (to sign language, and Braille), etc. The legal rights of disabled people have been strengthened with the social legislation of 1998 (Act on Legal Rights). One effect of this structure is that many details in relation to the conditions of disabled people and the working of laws and administration are taken care of.

There has been a study in 2000 on attitudes to persons with disabilities (SFI00:14; SFI02:14), but not much policy explicitly concerned with attitudes and discrimination.

Disabled people's organisations occupy half of the places in the Central Disability Council, and so are deeply involved in the planning and evaluation of policies.



### 1.3 What is the most recent research about disabled people's equality and social inclusion in your country?

Apart from work on employment, there has not been much research on disabled people's equality and social inclusion in the latest decade. A comprehensive is however just made (SFI08:10) and (SFI08:18).

SFI08:18 confirms a number of results from an earlier study (SFI97:1). Of the population in age groups 16-64, 25 % say they have a disability, and 15 % have one or more concrete functional limitations concerning legs, arms, hands, sight, hearing, behaviour or intellect. Just 11 % of all persons with disabilities have been born with them, whereas 89 % have acquired them. The risk of acquiring disability is growing with age, from 0.1 % a year for children to 2 % a year when they are 60. So many people who acquire a disability have been previously well integrated in society and so have some social capital.

When disabled people are compared to non-disabled with the means of logistic regression we see that all seven types of functional limitation cause limitation in activity. This includes social activity. Relations with parents and children, other family and friends are less frequent. Meaningfulness and happiness diminish. Societal activities such as attending association meetings or doing voluntary work are also less frequent and disabled persons less often have jobs.

These findings are perhaps not so unexpected. The most interesting aspect is, of course, if the research can be repeated some years later and the results compared in order to evaluate the effect of disability policy in the period. 1995 research (SFI97:1), unfortunately, did not succeed very well in measuring disability, whereas new research seems much more reasonable in this respect. It is possible however make some comparisons; among these are opinions on municipal casework. So the percentage reporting that the municipality was not willing to pay has decreased from 56 % to 34 %, and those saying that agencies were not well enough coordinated has also decreased, from 57 % to 47 %. So it seems that disabled people have noticed that expenditure in the period increased by 150 %.

- What is the evidence about inequalities between different groups of disabled people? (e.g. disabled women, young people, older people, people with different kinds of impairments, migrants or ethnic minorities, etc.)

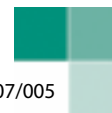
SFI08:18 makes a number of logistic regressions in order to isolate the "effect" of seven types of functional limitations from other factors, such as gender, age, co-habitation, and education. The general result is that there is very seldom interaction between the individual dimensions of functional limitation and the other factors.

So while there are not special problems for groups like women, young people, older people, the effects of life situation and functional limitation most often are additive.

It appears however that a number of women appraise their disability as more serious than it is, whereas a number of men do the opposite. It seems also that women with a given functional limitation have greater needs than the men with same functional limitation. This merits further research. Findings are in accordance with some, but not all earlier results.

- What new research is needed on equality and social inclusion in your country?

We have a general knowledge of the connection between income and disability and social conditions and disability. So we know that parents with children with disabilities more often than other parents have other social cases as well, but we do not know much about the reason for that. For both children and adults we do not know exactly how much poverty is the cause of disability and how much disability is the cause of poverty. So further research is needed here.



## **PART TWO: INCOMES, PENSIONS AND BENEFITS**

### **2.1 Research publications (key points)**

There is no awareness of any problem of poverty among people with disabilities. There may be a problem, but this could be more a case of poor people acquiring disabilities than of disabled people becoming poor. In any case, we have no research from recent years, but it is planned for the future.

### **2.2 Type and level of benefits (key points and examples)**

The main benefit / pension available to disabled people in Denmark is the førtidspension.

In 2009 a disability pension (førtidspension) is 188,448 DKK, (€22,295) a year for a single person and 160.176 DKK, (€21,500) a year, for a married or cohabitating person.

These amounts are reduced if the other incomes become greater than €7,933 for single and €15,919 for married people. The pension is reduced to zero if other income is €50,040 for single and €38,483 for married people. If the person gets an income from work which corresponds to a normal income, the authorities may re-evaluate the case and terminate the pension. This is not automatic it has to be noticed and an initiative taken.

For persons awarded the førtidspension before 2003 under the old law, the situation is a little different. There were three types, high, middle and low, combined from elements, of which some were taxed and others not. The new amount corresponds to the old middle pension, whereas the old amount is a little higher. The old low pension was also given to some people for merely social reasons.

The Førtidspension is part of the rehabilitation system. If a person has a reduced working capability, has a need for an income, and applies to the municipality, there will be an attempt to improve his or her working ability by means of activation, rehabilitation or other means. The goal is that the person should be able to maintain himself or herself with a job that has ordinary conditions; or if that is not possible with a job according to the social chapters of the labour agreement, or if that is not possible by a flexjob.

If self-maintenance cannot be obtained in any of these ways, and after all possibilities have been tried, the person's working ability is considered to be permanently reduced.

The criterion for the førtidspension is not disability or any medical diagnosis, but simply "working ability". Working ability is defined as the ability to fulfil the demands that a job involves: carrying out concrete job tasks so as to obtain an income for full or partial maintenance.

The municipal caseworker evaluates working ability on the basis of the resources of the citizen and the barriers that may be present for using or developing these resources. There is a comprehensive method that must be used for making the assessment.

Only when it has been established that working ability is permanently reduced, may the førtidspension be allocated. Until that point it is a case of activation or rehabilitation, or perhaps some kind of treatment (e.g. psychiatric or psychological) .

There has not yet been any systematic effort to get førtidspensioners back to work.

The current law on the førtidspension is from 2003, but it replaced an earlier law of 1984, and the original scheme was from 1921.

The number of recipients of the new førtidspension is 40.414.

The earlier law was more complicated, as there were three levels of pension corresponding to: 100 % invalidity, 67 % invalidity and 50 % invalidity. The numbers of recipients of these old schemes are 60.897 (100%), 97.313 (67%) and 47.261 (50%). However the last number also includes a small number that receive the pension on social grounds. Numbers are not available for the groups who receive the low pension on the grounds of disability and social indication.

So, the total number of recipients of the førtidspension that have been granted the pension on the basis of 67 % invalidity is 198.624.

Statistics on recipients of the førtidspension can be found at [www.statistikbanken.dk](http://www.statistikbanken.dk), whereas statistics and analyses on the award of the førtidspension can be found at [www.ast.dk](http://www.ast.dk). Details of the scheme (and other social schemes) can be found in "Sociale ydelser".

### 2.3 Policy and practice (summary)

The financial status of disabled people is not currently an important political question and there is political consensus about this. OECD economists and members of the (very) liberal think tank CEPOS have argued for a reduction of benefits, but no political parties dare to do so.

In 1988 a so-called active policy on førtidspension was initiated.

For the first years it was mostly something that concerned the administrative structure, moving the financial burden from purely the state to shared between state and municipality. The authority to award pensions was also gradually moved, but from 1995 it began to result in fewer persons being awarded the førtidspension. The reduction in the years 1996-2002 amounted to 80 %, The legal change in 2003 has not had much effect.

The førtidspension, as a type of disability pension, represents a deviation from the usual policy of mainstreaming in disability. Strict mainstreaming would mean that every disabled person, even those most disabled, should be offered a job that matches his or her abilities and get a normal wage for this.

However The limitation of the førtidspension in the late nineties was surely a step in the direction of mainstreaming. It has been accompanied by endeavours to bring more disabled people into the labour force, as described in request 2.

Disability does not give any right to pension, only reduced working ability.

- Do pensions and benefits in your country encourage older disabled people to stay in paid employment?

The flex job scheme contributes to encouraging disabled people to stay in paid employment.

On the other hand, the efterløn (a scheme of voluntary early pensions that was introduced 1979 in order to reduce unemployment) contributes older people – both disabled and not disabled – retiring, from age 62. And for the group older than 62, efterløn. (The efterløn may be obtained from 60, but at a reduced rate).

In the last 7 years there has been a policy of tax reductions, which nearly all political parties support. For this reason, all social expenditure is under pressure, the førtidspension included.

There is likely to be an increase in the number receiving the førtidspension for psychiatric reasons. The number receiving these has increased to 47 % in the latest statistics from around 30% earlier. Psychiatrists hold that the large majority of these cases could have been cured, if they had been treated in time.

With regards policy debate concerning the increase in disability due to psychiatric reasons, this theme is taken up in the press nearly every time new statistics on førtidspension are published.

The problem is however complicated. First it has to be noted that there have always been many førtidspensioners with psychiatric diagnoses. Second it is evident that the use of drugs is partly responsible for the increasing numbers. Nevertheless, psychiatrists hold that the numbers of førtidspensioners with psychiatric diagnoses could be reduced considerably if cases were found and treated before they got serious.

Implications of the economic crisis:

The municipal economy is short of money, but this is a consequence of government tax reductions which have been in force for a number of years rather than the economic crisis. The crisis has had less impact for many people with disabilities than for some other groups, as disability pensioners have no risk of losing their income because of unemployment. (Peter Birch Sørensen: Skattestop, internationalisering og kommunestyre)





## **PART THREE: CARE AND SUPPORT**

### **3.1 Recent research publications (key points)**

CLH 2006 reports that persons with disabilities, who in theory have the same rights to free choice e.g. of hospital, actually have less, for various reasons because of their functional limitations.

There has been much debate in relation to the exposure of unacceptable circumstances in some “institutions” for intellectually disabled people. Some instances, where staff members have used unacceptable language and behaviour have received a lot of press coverage.

In that connection I hold that there is a need for research on the functioning of such long term care organisations of, and on the relations between staff and users that develop there.

Another interesting topic concerns diagnoses like ADHD, tourettes, autism, asperger. What is the effect of giving a child a diagnosis early in the life? Does it lock the child in development, or does it open up opportunities for the right support? We need research to inform these questions.

### **3.2 Types of care and support (key points and examples)**

In 1998 all types of institutions were abolished. That did not mean that all inhabitants were thrown onto the street and encouraged to find an apartment on their own. More individual dwellings were developed and furnished with kitchens, and the residents were given their individual førtidspension. In return for this, they pay rent, for services like meals and hairdressing, but not for cleaning because home help is free. All things considered, they have become normal citizens.

But in most respects the old “institutions” are the same. Naturally, it has not been easy to make any dramatic changes to the way the disabled inhabitants are treated. Even if the cleaning staff in many places have changed, so that it is now an ordinary home help that comes, also to the former institutions, most of the other personnel have remained the same. They have to go through a long process before they receive assistance that is dramatically different from the institutional.

An evaluation of the experience of abolition of the concept of institution states that for the first four years this reform had some effect, but that much is not yet functioning as it ought to (Socialministeriet 2002).

Another question is about housing for disabled people. If one acquires a disability, there is a good possibility of getting the necessary house modifications free. Elderly people have a good chance of getting an apartment on ordinary conditions but accessible for disabled people. For children with disabilities the situation is a little more difficult as they grow up. In principle they have a right to an accessible apartment of their own, but the municipalities have not been too eager to construct these, as they know that this will give them expenses for many years ahead.

As to care, disabled people have the same right to free choice of home care as elderly people. In addition they have a right to find a carer, who is then paid by the municipality.

On October 1 2008, new rules on home training of children with disabilities came into force. Now parents can get a benefit for training their disabled children at home, provided that the training fulfils the need of the child, follows documented methods, and the parents are able to give the training. (A change in Law on social service § 32).

There are a number of personal assistance schemes. Personal assistance may be given to disabled people in jobs, for a maximum of 20 hours a week for a 37 hours employment, and relatively for part time work. Personal and secretarial assistance is also given to disabled persons who follow a vocational education course. This scheme comes under legislation of the Employment Ministry, who finance the schemes out of their budget (so it is tax financed).

Persons who are employed as personal assistants are often staff from the workplace or education, or they may be other persons who have necessary knowledge of the work. They may also be relatives of the disabled person, like all colleagues may, but this is not usual.

Furthermore, a disabled person may apply for up to 15 hours of help per month for going out. Young, active persons with significant physical disablement can employ assistants themselves for up to 24 hours a day. These schemes come under legislation of the Welfare Ministry, and are financed by the municipalities (so they are also tax financed). They have nothing to do with work, people without work are eligible, as well as people in work. But the latter scheme presupposes that the applicant is an active person who can make good use of the scheme. Disabled persons may employ relatives, but this does not often happen.

On July 1 2009, new rules on citizen-managed personal assistance came into force. The rules have been relatively unchanged since the scheme was introduced in the 1970s. Now the target group has been extended because it is no longer a requirement that the receiver is able to manage the help him or herself. Assistance can also be managed by a closely related person, an association or a private enterprise. (A change in Law on social service §§ 95 and 96; the original scheme was an experimental one in the city of Aarhus, normally called "Århus-ordningen")

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In 2009 there is an intention to start a pilot project for assistance budgets for persons with intellectual disabilities, where another person, a private company or the newly established non profit company LOBPA will take the responsibility of employer.

Temporary care services are used in some cases to help disabled children in the home, where the parents take care of the child. If that is a great burden, they may employ another family to take care of the child e.g. a weekend every month or every second month, which is paid for by the municipality.

Respite care may also be used to relieve a spouse, parents or near relatives who are caring for a person with reduced physical or psychical functional ability, most often by arranging for a stay in a nursing home or an institution.

For people with disabilities all adaptations of housing are paid for by the municipality, if it accepts they are necessary. If it is an owner-occupied residence, there are detailed rules concerning adaptation and the possible added value to the house.

Moreover, if a person with disabilities or parents with a disabled child has to move to a more accessible place, there are rules about financial support for the extra rent that this involves.

There is accessible housing, but not enough, with the consequence that many young disabled persons have to stay with their parents for some years after they become 18 years old.

In earlier years we had supported housing for disabled and elderly people with some need of support, and nursing homes or institutions for disabled and elderly people with greater need.

Now the possibilities for receiving support are the same for all types of housing, and the disabled person can choose more freely where to live.

For intellectually disabled and mentally ill people there are also the so-called flat shares (bofællesskaber). This is a large flat or a house which is modified so that a number of persons can live there with their own rooms and some common rooms and a kitchen. It may be a small place with 4-8 persons, or a larger one with 10-30 people. (There has been some criticism the recent years because originally the smaller size was the norm, but for staffing reasons for some years the authorities have preferred the larger size, holding that it was possible to give better support there. Critics hold that this trend is against the principle of integration).

The former institutions, which today formally are considered the person's own home but in reality run more or less as before, may be considered a type of supported housing.

On June 1 2009 a departmental order came into force, giving residents in certain nursing homes and protected housing most of the same rights as tenants in general. It gives them, among other things, rights to make improvements in their apartments. (Bekendtgørelse om lejerettigheder til beboere i visse botilbud efter serviceloven).

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Until the municipal reform 2007, work rehabilitation services were a responsibility of the counties. Now with the reform it is a little unsure what will happen. Some rehabilitation centres have been taken over by the new regions, which are just enterprises which do not pay taxes (but nevertheless they have an elected council). Most of them have been taken over by the larger municipalities, and in that connection they are often modified to better suit the needs of the administrative unit. There is not yet any appreciation of what that means, but one could suspect that the governmental goal of "the shortest possible way to the labour market" (which means less education, more job training) will prevail.

Protected work places are encouraged to place their employees on ordinary workplaces (without formally changing employer). This is called "supported employment".

There are various transport schemes. CLH 2001 distinguishes between forms of these and purposes with support. Support may involve accompaniment on public transport, support to own a car, or general cash support from the municipality for transportation purposes. The regional bus enterprises have different services for disabled people, most of them limited to mobility. As to purposes, CLH 2001 distinguishes between transportation to work, to education, to treatment and for leisure purposes. Support for owning a car is mostly given for work purposes, and also in some cases for further and higher education, but it is also possible – although rare – for it to be given without such a purpose. There are detailed rules for covering most of the expenses for transportation for treatment. There is least provision for leisure purposes. Disabled persons can have 104 trips a year, which means they can go somewhere and back once a week. This scheme may be combined with some of the other forms of help with transport.

Not surprisingly, CLH 2001 concludes that there are unmet needs under each of the four purposes.

As the concept of institution is abolished, and disabled persons receive the same sort of help according to the same rules and by the same personnel in disability residences as in other housing, there are no limitations with regard to where people have to live.

Home help may be chosen freely by the disabled person, so that they are not obliged to have a municipal home help. For elderly persons home help is provided by municipal staff. Disabled people (that is home help recipients under 65 years) may also receive assistance from municipality staff but they may also propose a person themselves, who then will be employed by the municipality. This person may or may not be a relative.

Most necessary care and support is free. Things like rent and payment for meals should, in principle, be for same amount as corresponding expenses for non -disabled persons. The principle is that the disability should not make anything more expensive for the person.



## PART FOUR: SUMMARY INFORMATION

### 4.1 Conclusions and recommendations (summary)

In Denmark as well as in European other countries, there is a growing interest in evidence and documentation of methods in social policy. This means that it is necessary to set goals, although politicians are reluctant to do so.

My personal opinion is that equality is impossible. Equal treatment is understood to be where disabled people should have all opportunities to make use of their capabilities and to take part in social contexts. There is a wide degree of equal treatment as to material conditions. What is missing first and foremost are conditions so that disabled people can find a meaning with their life. That is too often a problem of the individual, for disabled as well as for non-disabled people.

In terms of legislation and assistance with expenses, The situation for disabled people in Denmark is improving. Since 1995 the costs of disability minus the disability pension has risen by a factor 2.5 in constant prices. Great steps have been taken in the direction of equal opportunities in education and jobs, driven by the activities of the Central Disability Council and the Equal Opportunities Centre. These developments seems likely to continue, even if the tax reduction policy in the long run should be a challenge.

There are always issues for particular groups. Recent analysis (SFI 08:18) shows, however, that disability generally has the same effect on all groups in relation to their life situation and school and professional backgrounds. So the differences between the groups have nothing to do with disability, they are similar for non-disabled people.

We need more places like the Egmont High School (see best case example) or Hans Knudsen institute or Videnscenter for Handicapidræt. These are endeavours whose primary goal is to develop the self-confidence and self-reliance of people with disabilities, through study, work and self development.

### 4.2 One example of best practice (brief details)

#### *Egmont High School*

This is a folk high school where about half of the students have disabilities. They run ordinary folk high school courses that last for some months, and shorter courses. Many disabled young people participate in their summer courses for one or two weeks. The school integrates young people with disabilities and ordinary young people, it gives interesting and meaningful things to engage in, it gives many young disabled persons good friends, and fulfils in that way the same function as ordinary folk high schools do for non-disabled youth. It functions in the same way as other folk high schools in Denmark.

#### *Hans Knudsen Institute*

This is a protected workshop originally founded by rev. Hans Knudsen in 1872. His idea was that Christians had to help disabled people provide for themselves. So he organised treatment, devised many adapted tools, and established workshops. The idea is to have a high production standard combined with good craftsmanship, and not just produce simple things as protected workshops often do. They stress that the workers feel proud of their work. During the latest decade they have been pioneers in developing into a workplace for people with mental health conditions.

#### *Videnscenter for Handicapidræt (Knowledge Centre of Disability Sports)*

This was established as one of about 20 knowledge centres in the 1990s. As they discovered that activation in sports often gave the disabled person a motivation to have a job, they also began to establish jobs with wage support for disability pensioners (an option for persons that have the førtidspension). For that reason they have today the best expertise in the country for establishing such jobs.



### 4.3 References

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