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Czechia

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European Disability Expertise (EDE) provides independent scientific support to the Commission's policy Unit responsible for disability issues. It aims to mainstream disability equality in EU policy processes, including implementation of the United Nations Convention on the Rights of Persons with Disabilities.

This country report has been prepared as input for the European Semester in 2022.¹

¹ For an introduction to the Semester process, see <https://www.consilium.europa.eu/en/policies/european-semester/how-european-semester-works/>.

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1 Executive summary and recommendations

1.1 Key points and main challenges for Czechia in 2022

The new five-year National Plan for the Promotion of Equal Opportunities for Persons with Disabilities came into force in 2021. Similar to previous disability plans, the new plan falls short in formulating objectives in a form which would allow systematic and regular monitoring but provides an important reference point for the Semester.

Disability and the labour market

The employment rates of persons with and without disabilities are close to the EU averages for both groups but the disability employment gap significantly widens among older workers. The participation of persons with disabilities in the open labour market remains unsatisfactory. The key task for the Government spelled out in the National Disability Plan 2021-2025 is to make employment support services, particularly in the open labour market, more effective. Strengthening the technical expertise of the Labour Office personnel in supporting the employment of persons with disabilities is considered as one of the key drivers of change.

Disability, social policies and healthcare

Older people with disabilities are at higher risk of poverty and exclusion than those without. The disability poverty gap for older adults is similar to that of working aged adults. Unlike in all other groups, adults over 65 years with disabilities in Czechia were more at risk of poverty and inclusion than across Europe on average. Despite large EU investments in deinstitutionalisation over the past decade, progress towards community-based services remains unsatisfactory. Social services are not yet fully person-centred and, for the most part, do not comply with Article 19 CRPD. The funding apparatus continues to incentivise residential care rather than for independent living.

Disability, education and skills

The amendment of the Education Act contributed to better support for inclusive education. The number of learners with disabilities in mainstream education at all levels is gradually growing. Nonetheless, inequalities in education remain a significant challenge of social inclusion. From an education perspective, the degree of disability inclusiveness in strategies for digital transformation appears generally low. In addition, Universal Design approach is not considered as a guiding principle of digital developments, and it is absent in almost all strategies.

Investment priorities for inclusion and accessibility

The RRF addresses, to some extent, most of the priorities relevant to the challenges identified in this report. The priorities include fostering digitalisation, railway infrastructure and sustainable mobility, reforms in education, health, and financing large-scale renovation programmes to increase the energy efficiency of residential and public buildings, childcare and long-term care facilities. Disability is rarely mentioned for the most parts of RRF, however.

1.2 Recommendations for Czechia

These recommendations are based on the evidence and analysis presented in the following chapters of our report.

Recommendation: Provide concrete implementation benchmarks for the National Plan on Promoting Equal Opportunities for Persons with Disabilities 2021–2025, monitored effectively at regular intervals, particularly for objectives related to EU funding.

Rationale: The National Disability Plan lacks a coherent monitoring mechanism which would regularly offer a picture on how well the Plan is being implemented in all agendas including employment, education and social service and health.

Recommendation: Focus employment policy and support for people with disabilities on the open labour market and amend the Employment Act to better stipulate public and private employers to employ people with disabilities in the open labour market.

Rationale: Measures aimed at motivating public and private employers to engage persons with disabilities in the open labour market are with limited effectiveness. Employees with disabilities tend to be engaged in sheltered labour market rather than in the open labour market.

Recommendation: Develop and implement measures in order to better support growth of community-based services and to prevent use of EU funding (RRF) for reconstruction institutional type facilities.

Rationale: The RRF investments for Czechia aim at supporting the establishment of additional social care facilities, either by the reconstruction of existing buildings or by constructing new buildings. RRF lacks clarity in how investments in renovating institutional type residential facilities will be prevented and how the article 19 of UN CRPD will be respected for all investment projects.

Recommendation: Develop and implement a comprehensive system of technical support and guidance for mainstream schools.

Rationale: There is an absence of prior technical knowledge and skills of teachers to educate children with special educational needs in mainstream schools.

Recommendation: Establish a central authority to manage and coordinate digital transformation effectively across education, employment support service, health and other public domains while taking Universal Design into account.

Rationale: The degree of disability inclusiveness of the specific strategies on digital transformation appears generally low. The Universal Design approach is not considered as an overarching principle in digital developments.

2 Mainstreaming disability equality in the Semester documents

Country Reports and Country Specific Recommendation of direct relevance to disability policy were not published in this exceptional policy cycle. For a commentary on the last published documents please see our country fiche for the previous Semester 2020-21.

2.1 [Recovery and Resilience Plan](#) for Czechia (RRP)

The following key points highlight where the situation of persons with disabilities or disability policies was considered in the plan. We address the most relevant of these and other issues arising from the RRP/NRP in the next chapters.

- P. 11 The situation and needs of people with disabilities are addressed in several parts of the plan, including in relation to the new construction code, renovation of buildings and their improved accessibility, digitalisation, eHealth and social care.
- P. 11 The plan envisages investment in digital equipment of schools to ensure access to learning for disadvantaged pupils and students.
- ANNEX: p. 48 T COMPONENT 2.1: SUSTAINABLE TRANSPORT. this investment will focus on rail infrastructure development projects, considering, inter alia, gender gaps and adequate access to services for disadvantaged and vulnerable persons.
- ANNEX: p. 111 Reform 2: Support of disadvantaged schools: The support will focus on training for teachers to work with heterogeneous groups and disadvantaged pupils, as well as on effective cooperation with school psychologists, teachers' assistants and school social workers.
- ANNEX: p. 115 COMPONENT 3.3: MODERNISATION OF EMPLOYMENT SERVICES AND LABOUR MARKET DEVELOPMENT This component aims among others at modernising and expanding social services in compliance with the principles of deinstitutionalisation and independent living, as described in the UN Convention on the Rights of Persons with Disabilities.
- ANNEX: p. 115 COMPONENT 3.3 Reform 1: Development of labour market policies expanding the target groups that can participate in retraining organised by the Labour Office to employed people at risk of outplacement and employed people seeking upskilling, expanding the target groups that can participate in retraining organised by the Labour Office to employed people at risk of outplacement and employed people seeking upskilling and establishment, by 31 December 2025, of at least 14 regional training centres (under the responsibility of the Labour Office) sufficiently equipped to provide life-long learning in the area of digital technologies and industry.
- ANNEX: p. 116 COMPONENT 3.3 Reform 3: This reform addresses the challenge of fragmented governance and financing of long-term care and a low proportion of community-based and home-based services in Czechia. The measure consists of a legislative reform, which shall aim at integrating health and social long-term care, ensure a stable system of adequate financing of quality long-term services, provide incentives for community-based and home-based care, allow access of private providers and improve supervision of social care.
- ANNEX: p. 117 Investment 3: Development and modernisation of social care infrastructure: Investments shall support the establishment of additional social

care facilities infrastructure, either by reconstruction of existing building or by new constructions; Investment into home-based and community-based care settings shall be favoured and the principle of freedom of choice and independent living shall be respected for all investment projects.

2.2 Semester links to CRPD and national disability action plans

Relevant recommendations and issues arising from participation in the United Nations Convention on the Rights of Persons with Disabilities (CRPD) are highlighted in each chapter.

It is also important that Semester plans align with the national disability strategy. In Czechia, this refers to the National Plan for the Promotion of Equal Opportunities for Persons with Disabilities for the Period 2021–2025. The national plan for 2021-2025 was approved by government in July 2020 and follows broadly the structure of the UN CRPD.²

² An English version is available at https://www.vlada.cz/assets/ppov/vvozp/dokumenty/National-Plan-for-the-Promotion-of-Equal-Opportunities-for-Persons-with-Disabilities-2021_2025.pdf.

3 Disability and the labour market - analysis of the situation and the effectiveness of policies

In 2015, the UN CRPD Committee made the following recommendations to Czechia:

[Article 27 UN CRPD](#) addresses Work and Employment.

'52. The Committee calls upon the State party to ensure the same wage for all persons with disabilities, regardless of their disability classification. It also urges the State party to develop measures, intensify efforts and allocate sufficient resources to promoting the employment in the open labour market of persons with disabilities, especially women.'

More recently the 2019 List of Issues requested the following:

'22. Please provide information on: (a) Employment rates among persons with disabilities, disaggregated by age, sex and impairment type, in both the open labour market and sheltered employment; (b) Measures taken to promote the employment of persons with disabilities in the open labour market, particularly through the prohibition of discrimination on multiple or intersectional grounds, in accordance with Council Directive 2000/78/EC establishing a general framework for equal treatment in employment and occupation; (c) The availability of supported employment programmes and vocational and professional rehabilitation programmes, as outlined as an objective in the National Plan for the Promotion of Equal Opportunities for Persons with Disabilities 2015–2020, especially with reference to the availability of work in rural and urban areas; (d) Whether some persons with disabilities (those considered as having the third degree of disability) can still only register as 'interested for work' and not as 'job seeking', and on the reasons for such a distinction.'

3.1 Summary of the labour market situation of persons with disabilities

Data from EU-SILC indicate an employment rate for persons with disabilities in Czechia of 55.2 % in 2019, compared to 81.2 % for other persons against a national employment target of 75 % and approximately 3.9 points above the EU27 average. This results in an estimated disability employment gap of approximately 26 percentage points (EU27 average gap 24.2, see Tables 2-4) or an employment chances ratio of 0.7.

The same data indicate unemployment rates of 12.6 % and 3.3 %, respectively in 2019 (see Tables 5-7) and the economic activity rate for persons with disabilities in Czechia was 63.1 %, compared to 83.9 % for other persons (see Tables 8-10). These indications are broken down by gender and age in the respective tables in annex.

Czech employment rates follow similar patterns to the EU average but the gap for people with severe impairment is wider than expected. This gap widens among older workers. In the years before the COVID-19 crisis employment increased and the disability gap began to narrow. Unemployment was low and also narrowed to 2019. More persons with disabilities entered the labour during this period and the activity gap narrowed overall, but it remains wide among older workers.

The disability sample survey 2018³ confirmed that disability, in conjunction with age and level of education, has a significant impact on economic status. Most persons with disabilities are in receipt of old-age pensions, with nearly a third receiving a disability pension. According to the study, a mere 19 % of all persons with disabilities, (estimated 215 000) were engaged in employment. Two-thirds of those worked full-time, more men (76 %) than women (55 %) and people under 50 also worked full-time more frequently.

3.2 Analysis of labour market policies relevant to the Semester

For reference, see also the 2021 [Recovery and Resilience Plan](#) for Czechia and the National Plan for the Promotion of Equal Opportunities for Persons with Disabilities for the Period 2021–2025.

The National Disability Plan 2021–2025 reports on barriers in the labour market situation of persons with disabilities. These barriers include limited effectiveness of employment support services provided by the Labour Office, due to incomplete technical expertise of Labour Office personnel for an individual approach to people with disabilities and the professional conduct of vocational rehabilitation. The RRP addresses the labour market situation of persons with disabilities only generally, with the aim to modernise the employment policies with particular attention given to providing life-long learning in digital technologies and industry. Limitations in the effectiveness of employment support services are not addressed.

In 2021, the Ombudsman's Office carried out research on the employment of people with disabilities in the public sector. The results have shown that the reality is unsatisfactory and engagement of people with disabilities in employment is minimal. One of the main reasons reported is that employers have the option of paying compensation instead of employing people with disabilities directly.⁴

Persons with disabilities tend to be employed in sheltered labour market rather than in open labour market. Employment policy and support for people with disabilities in the labour market should primarily aim at placing these people on the open labour market with the majority of the population. Barriers in labour market situation of persons with disabilities include limited effectiveness of support measures provided by labour offices, discrimination in employment, absence of flexible work conditions, and fragmentation of support services for persons with disabilities.⁵

A core task of the previous disability plan⁶ was to review the employment support system. This task has not been fulfilled. Only partial steps have been taken, dealing primarily with employment in the sheltered labour market. It is necessary to make

³ <https://www.czso.cz/csu/czso/vyberove-setreni-osob-se-zdravotnim-postizenim-2018>.

⁴ https://www.ochrance.cz/aktualne/stat_neumi_zamestnat_lidi_s_postizenim_ukazal_vyzkum_zast_upkyne_ombudsmana/.

⁵ *Employment Policy Strategy 2020*, Ministry of Labour and Social Affairs.

⁶ Government Board for Persons with Disabilities National Plan for the Promotion of Equal Opportunities for Persons with Disabilities 2021–2025 Approved by Czech Government Resolution No. 761 of 20 July 2020 Prague 2020. https://www.vlada.cz/assets/ppov/vvozp/aktuality/National-Plan-for-the-Promotion-of-Equal-Opportunities-for-Persons-with-Disabilities-2021_2025.pdf.

support measures in open labour market employment for persons with disabilities more effective and sustainable.

Previous national disability strategies highlighted the importance of a comprehensive and interconnected system of support services for persons with disabilities (health, social care, education and training, employment, life-long learning). To date, a comprehensive rehabilitation system does not exist in Czechia.

Accessible employment services including relevant information provided by the labour office is seen as a facilitator of gaining and retaining engagement in employment for people with disabilities. The information about services and support for persons with disabilities in employment is available online on the MoLSA portal. MoLSA claims that the portal presents the information aligned with the accessibility principles stipulated by the Accessibility Act. However, the actual on-line submission of applications to labour offices is reported as highly problematic.⁷ It is therefore necessary to make on-line submissions for employment support services possible.

⁷ Úřad vlády České republiky. Oddělení sekretariátu Vládního výboru pro osoby se zdravotním postižením (2020), *Souhrnná zpráva o stavu přístupnosti veřejné správy a veřejných služeb pro osoby se zdravotním postižením*. (Office of the Government of the Czech Republic. Secretariat of the Government Committee for Persons with Disabilities. Summary report on the state of accessibility of public administration and public services for persons with disabilities) <https://www.vlada.cz/cz/ppov/vvozp/dokumenty/zprava-o-pristupnosti-verejne-spravy-a-verejnych-sluzeb-pro-osoby-se-zdravotnim-postizenim-185863/>.

4 Disability, social policies and healthcare – analysis of the situation and the effectiveness of policies

In 2015, the UN CRPD Committee made the following recommendations to Czechia:

[Article 28 UN CRPD](#) addresses Adequate standard of living and social protection.

'54. The Committee calls upon the State party to review the legislation on the provision of benefits to persons with disabilities, with genuine participation of persons with disabilities, to reintroduce the additional social allowance in order to bring the standard of living of families with children with disabilities above the subsistence level. The State party should also broaden the range of and facilitate access to assistive devices for children with disabilities, regardless of age.

56. The Committee calls upon the State party to revise its legislation on disability pension beneficiaries and the newly established method of calculating the relevant period from the beginning of disability until the entitlement of retirement pensions, as it has resulted in the amount of the pension received by persons with disabilities at the third level being below the minimum subsistence level.'

More recently, the 2019 List of Issues requested the following:

'23. Please provide information on measures taken to: (a) Revise benefit and pension legislation and policy concerning persons with disabilities and their families, in particular to bring the concept of disability and the assessment criteria used to calculate social protection entitlements, such as the disability pension, into line with the Convention; (b) Reintroduce the additional social allowance to bring the standard of living of families with children with disabilities above subsistence level.'

[Article 19 UN CRPD](#) addresses Living independently in the community.

'39. The Committee urges the State party to step up the process of deinstitutionalization and to allocate sufficient resources for the development of support services in local communities that would enable all persons with disabilities, regardless of their impairments, gender or age, to choose freely with whom, where and under which living arrangements they will live, in line with the provisions of article 19 of the Convention.

40. The Committee recommends that the State party take all measures necessary to ensure that policy processes for deinstitutionalization, including the development of the National Plan on Promoting Equal Opportunities for Persons with Disabilities 2015–2020, have a clear timeline and concrete benchmarks for implementation that are monitored effectively at regular intervals. In particular, the Committee urges the State party to abolish the placement of children under 3 years of age in institutionalized care as soon as possible.'

The 2019 List of Issues requested:

'16. Please provide information on: (a) Steps taken to achieve deinstitutionalization, including details on the time frame within which the full deinstitutionalization of all persons with disabilities (particularly children under 3 years of age, persons with intellectual or psychosocial disabilities and older persons with disabilities) will be achieved; (b) The use of financial resources, including European Structural and Investment Funds, and on the transition plans to enable persons with disabilities to freely choose their living arrangements in the community. Please provide an update on the completion of actions to support independent living, as set out under objectives 6.1 to 6.15 of the National Plan for the

Promotion of Equal Opportunities for Persons with Disabilities 2015–2020; (c) The availability and accessibility of community-based services for persons with disabilities, including housing services, an open labour market, social services and human rights-based mental health care. Please indicate whether coverage of these services is sufficient and detail measures to ensure their sustainability.'

[Article 25 UN CRPD](#) addresses Health.

'50. The Committee calls upon the State party to intensify its efforts to make information on health care accessible for persons with disabilities and parents of boys and girls with disabilities, including by making information on relevant services available and accessible to persons with disabilities and their families and by providing sufficient sign language interpreters to deaf persons when they seek health care.'

The 2019 List of Issues requested:

'21. Please provide information on measures taken to: (a) Train and raise awareness among health-care professionals on the rights of persons with disabilities; (b) Ensure that information and communications regarding health-care services are available in accessible formats to all persons with disabilities, including persons with intellectual disabilities and persons who are blind or deaf, in both urban and rural communities; (c) Provide access to full health-care and rehabilitative services, including sexual and reproductive health services, for persons with disabilities in their communities.'

4.1 Summary of the social situation of persons with disabilities

Data from EU-SILC 2019 indicate the poverty risk rate for working age persons with disabilities in Czechia was 16.5 % in 2019, compared to 7.1 % for other persons of similar age - an estimated disability poverty gap of approximately 9 percentage points (see Table 14). For people aged over 65, the disability poverty gap was 8.8 points (23.5 % for older persons with disabilities and 14.7 % for other persons of similar age). The tables in the annex also indicate the respective rates of risk of poverty or social exclusion and the breakdown of these by gender and age.

The AROPE risks follow the general pattern of other EU countries but are relatively low for all groups in Czechia, including for persons with disabilities. However, the data indicate a higher relative risk for older persons and particularly for older persons with disabilities due to the disproportionate impact of relative financial poverty on this group. For persons with disabilities of working age in Czechia (age 16-64) the risk of poverty before social transfers was 45.9 % and 16.5 % after transfers. The in-work poverty rate for persons with disabilities aged under 60 was 5.3 %.

Of interest to health policy are the data on self-reported unmet needs for medical examination (too expensive or too far to travel or waiting list). Disability equality gaps are evident here too and, on this basis, the rate for persons with disabilities in Czechia was 1.2 %, compared to 0.2 % for other persons, and below the EU27 average of 1.7 %.

4.2 Analysis of social policies relevant to the Semester

For reference, see also the 2021 [Recovery and Resilience Plan](#) for Czechia and the National Plan for the Promotion of Equal Opportunities for Persons with Disabilities for the Period 2021–2025.

Institutional types of residential care services for people with disabilities have been given some attention by the Government over the past decade. The National Disability Plan 2015–2020 contained only a general objective to promote social services for people with disabilities that enable them to remain at home, as opposed to their placement into large residential facilities (outreach services for individual target groups, in particular personal assistance services, care, interpretation, guide and reading services). However, this Plan did not provide relevant objectives in quantitative manner. In-depth assessment of its implementation is therefore not possible. The new National Disability Plan 2021–2025 spells out the objective on deinstitutionalisation equally vaguely: ‘continue deinstitutionalisation of residential facilities for people with disabilities, including facilities where deinstitutionalisation has not yet started’ (p. 47).

The high number of children and young people in institutional care was criticised by the international children rights community.⁸ Czechia is the last country in Europe to still enrol the youngest children in institutions. Efforts to ban infant institutions have been going on for at least a decade and the Chamber of Deputies finally approved a ban on the placement of children in such institutions in August 2021. It is no longer possible to place children under the age of 3 in them. Foster parents are to take care of at-risk children instead of institutions.

Overall, deinstitutionalisation of disability support services remains unsatisfactory in Czechia. Long term instability of financing, particularly for community-based services, is seen as one of the barriers.⁹ The RRP addresses gaps in governance and financing of long-term social care. The measures formulated in the RRP consist of a legislative reform, which would facilitate merging health and long-term social care, ensure a stable system of adequate financing of quality long-term services, provide incentives for community-based and home-based care, allow access of private providers, and improve supervision of social care.

In addition, investments will support the establishment of additional social care facilities infrastructure, either by reconstruction of existing buildings or by new constructions. Investment into home-based and community-based care settings shall be favoured and the principle of freedom of choice and independent living shall be respected for all investment projects.

It would be appropriate to take measures to prevent the use of the EU funding for building or reconstructing institutional type facilities. The Association for Deinstitutionalisation (JDI)¹⁰ points out that the Ministry of Labour and Social Affairs’ proposals for the use of the EU funds prioritises the expansion and construction of large institutional type facilities of social services rather than supporting expansion of

⁸ <https://www.wearelumos.org/vyzkumy/>.

⁹ Šiška, J. and Beadle-Brown, J. (2020), *Transition from Institutional Care to Community-Based Services in 27 EU Member States*: Final report. Research report for the European Expert Group on Transition from Institutional to Community-based Care, <https://deinstitutionalisation.com/>.

¹⁰ <http://jdicz.eu/spolecne-vyjadreni-k-navrhum-mpsv-na-rozdelovani-prostredku-na-socialni-sluzby/>.

community-based services.¹¹ JDI sees a shortcoming in the disproportion of proposals for the allocation of funds. While for community-based and outreach services (which have been insufficiently developed for a long time and insufficient in terms of capacity), for example, CZK 43 million is to be earmarked in the ISPROFIN programme. CZK 1.20 billion is earmarked in the same program for the construction, reconstruction and increase of capacities in residential social services. The JDI calls for the establishment of a material plan for the deinstitutionalisation of social services, according to which a network of outpatient and community-based services would be built in a systematic way, using funds from the IROP program, among others.

Official disability-related data about the impact of the COVID-19 crisis on access to health services related to pre-existing physical or mental health conditions or general health conditions, including access to treatments and medication, is currently unavailable in the public domain. However, anecdotal evidence indicates general concerns about the negative impact of limited access to health services for general or pre-existing physical or mental health conditions during the COVID-19 crisis have already been expressed by health professionals.¹²

The transition to digital technologies in health care is expected to have positive implications for persons with disabilities. However, the degree of disability inclusiveness of the specific strategies on digital transformation appears generally low. Notably, the Strategic Framework for Development of Health Care in Czechia 2030 falls short in taking disability inclusiveness into consideration. In the Implementation Plan 2.3.¹³ only a passing reference is made to access to health care data, mobile healthcare (mHealth) and telemedicine technologies.

¹¹ In the course of 2021, the MoLSA plans to announce financial subsidy calls in the IROP programme in the total amount of CZK 3.103 billion, with the projects' completion date by the end of 2023.

¹² <https://www.mzcr.cz/tiskove-centrum-mz/rada-vlady-pro-dusevni-zdravi-projednala-dopady-epidemie-covid-19-na-psychiku-obcanu-a-navrhla-soubor-opatreni/>.

¹³ https://www.mzcr.cz/wp-content/uploads/2020/08/2.3_Digitalizace-zdravotnictvi%20AD_vypo%2099%20A1dan%20A9-p%2099ipom%20ADnky_.docx.

5 Disability, education and skills – analysis of the situation and the effectiveness of policies

In 2015, the UN CRPD Committee made the following recommendations to Czechia:

[Article 24 UN CRPD](#) addresses Education.

‘48. The Committee recommends that the State party implement the amended School Act, incorporate inclusive education as the guiding principle of the education system and ensure the admission of children with disabilities in mainstream schools, in line with article 24 of the Convention. The Committee calls upon the State party to intensify its efforts and to allocate sufficient financial and human resources for reasonable accommodations that will enable boys and girls with disabilities, including intellectual disabilities and autism, and deaf-blind children, to receive inclusive quality education.’

More recently the 2019 List of Issues requested the following:

‘20. Please provide updated information on: (a) The implementation of the amended School Act (Act No. 561/2004 Coll., amended by Act No. 82/2015 Coll.) to ensure the right to inclusive education; (b) The allocation of financial, technical and human resources to ensure the right of all children with disabilities, including Roma children with disabilities, to a high-quality, inclusive education, and to provide teachers with training that fosters inclusive education, in both rural and urban settings, with Braille and sign language interpretation made available; (c) Efforts to transform segregated education into an inclusive education environment in both urban and rural areas, particularly for persons with intellectual disabilities or autism and deafblind persons. Please also provide an update on the achievement of objectives 10.1 to 10.32 of the National Plan for the Promotion of Equal Opportunities for Persons with Disabilities 2015–2020.’

5.1 Summary of the educational situation of persons with disabilities

The EU-SILC 2019 estimates concerning educational attainment should be treated with additional caution due to relatively wide confidence intervals, but they consistently indicate disability equality gaps (an average of 2-3 years provides a more stable indication). Table 16 indicates early school leaving rates disaggregated by disability status in Czechia. Youth with disabilities (aged 18-24) tend to leave school significantly more than peers without disabilities of the same age groups (and this is reinforced by widening the sample size to age 18-29). Table 17 shows completion rate of tertiary education disaggregated by disability and age group. Persons with disabilities (age 30-34) are less likely to complete tertiary education than their peers (and this is reinforced in the wider age range 30-39).

The CSO disability sample survey in 2018¹⁴ confirmed that persons with disabilities often achieve a lower level of education compared to general population. Among persons with disabilities, the proportion with only primary or no education was four times higher (21 % compared to 5 %) than for those with secondary education with no school leaver’s certificate (47 % compared to 36 %), which more than two thirds of persons with disabilities aged 35–49 do not have.

¹⁴ <https://www.czso.cz/csu/czso/vyberove-setreni-osob-se-zdravotnim-postizenim-2018>.

5.2 Analysis of education policies relevant to the Semester

For reference, see also the 2021 [Recovery and Resilience Plan](#) for Czechia and the National Plan for the Promotion of Equal Opportunities for Persons with Disabilities for the Period 2021–2025.

Better access for learners with disabilities to quality mainstream education has been on the agenda for more than two decades in Czechia. Despite challenges in implementing the core principles of education for persons with disabilities spelled out in the UN CRPD, the number of learners with special educational needs in mainstream schools has increased over the last 10 years.¹⁵ One of the notable drivers of change was the Amendment to the Education Act 2015 which became effective in 2016 and which rules on support for pupils with special educational needs. However, challenges in implementing inclusive education are cited in the General Long-term Strategy on Education 2030+.¹⁶ These challenges include: a shortage of technical support of special educators and school psychologists; insufficient training of teacher assistants; limited and regionally unequal capacities of school counselling facilities; and administrative complexity of the process and instability of funding to support children with SEN in education. The Strategy calls for better technical competencies of pedagogical personnel, especially in individualization of instruction, teaching of heterogeneous groups, and formative assessment of learning outcomes. Similarly, to other strategies in education, systematic assessment of implementation is not reported or potentially not even conducted.

The facilities and programmes that provide advice and support for schools around inclusive education remain unreachable for schools in more remote locations. Only a few schools hire special educators and school psychologists, particularly in urban settings. The Ministry of Education, Youth and Sports is currently preparing a scheme for funding the appointment of special educators and school psychologists with the aim of better balancing the support to schools across the country. Some schools particularly in some regions (notably Ústecký region, Karlovarský region) face challenges in guaranteeing access to education for so-called ‘disadvantaged’ pupils.

The Ministry of Education, Youth and Sports plans to introduce the position of ‘Social pedagogue’ in the Act on Educational Professionals in order to improve cooperation between families, social security authorities, and to create links between the school and other actors, such as municipalities, police departments, prosecutors, health facilities and to provide mediation between the school, parents and these institutions and help with legal and social issues.

The COVID-19 pandemic has highlighted challenges in utilising digital technologies in education for learners with disabilities in particular. Even before the Digital Education

¹⁵ Buchner, T., Shevlin, M., Donovan, M., Gercke, M., Goll, H., Šiška, J., Janyšková, K., Smogorzewska, J., Szumski, G., Vlachou, A., Demo, H., Feyerer, E., & Corby, D. (2020). Same Progress for All? Inclusive Education, the United Nations Convention on the Rights of Persons With Disabilities and Students With Intellectual Disability in European Countries. *Journal of Policy and Practice in Intellectual Disabilities*, 18(1), 7–22. <https://doi.org/10.1111/jppi.12368>.

¹⁶ Czech Republic. Ministry of Education, Youth and Sports, *Main Trends in Education in the Czech Republic 2030+*, <https://www.msmt.cz/vzdelavani/skolstvi-v-cr/strategie-2030>.

Strategy 2020 (SDV),¹⁷ Government Resolution 927/2014 (approved on 12 November 2014) aimed to reduce inequalities in education. The SDV admits that not all pupils hold equal access to digital technologies and digital resources. However, SDV does not make any reference to disability or special educational needs and inclusion. The disability perspective is absent from the strategy, as are measures which would address digital inclusion and emerging limitations in the accessibility of digital technologies for learners with disabilities. Thematic analyses of the SDV annual reports indicates a lack of awareness of policymakers about disability and inclusion.

The National Disability Plan 2025¹⁸ reports on the remaining gaps in accessibility of universities for students with disabilities. Equal opportunities in higher education for students with disabilities is not systemically addressed in policies. The National Disability Plan 2025 formulates an objective to amend by 31 December 2021, the Act on Higher Education adding new obligations to the provisions of Sections 21 and 42 whereby universities would be obliged to ensure accessible measures to equalise opportunities in the admissions procedure and subsequently in the fulfilment of study obligations for applicants and students with special needs. Investment priorities in relation to disability - There is no indication in the public domain that the Ministry of Education, Youth and Sports undertakes activities related to this objective.

Lifelong learning is regarded in the National Disability Plan 2025 as an important facilitator of new knowledge and skills for engagement in employment. It also serves as an instrument for social inclusion and participation in civic society.¹⁹ It is hence appropriate to expand the range of accessible educational programs for people with disabilities and, given the need for knowledge of information technology, to focus on courses addressing the development of digital literacy.

¹⁷ See <https://www.msmt.cz/uploads/DigiStrategie.pdf>.

¹⁸ Government Board for Persons with Disabilities National Plan for the Promotion of Equal Opportunities for Persons with Disabilities 2021–2025 Approved by Czech Government Resolution No. 761 of 20 July 2020 Prague 2020. https://www.vlada.cz/assets/ppov/vvozp/aktuality/National-Plan-for-the-Promotion-of-Equal-Opportunities-for-Persons-with-Disabilities-2021_2025.pdf.

¹⁹ Government Board for Persons with Disabilities National Plan for the Promotion of Equal Opportunities for Persons with Disabilities 2021–2025 Approved by Czech Government Resolution No. 761 of 20 July 2020 Prague 2020. https://www.vlada.cz/assets/ppov/vvozp/aktuality/National-Plan-for-the-Promotion-of-Equal-Opportunities-for-Persons-with-Disabilities-2021_2025.pdf.

6 Investment priorities in relation to disabilities

6.1 Updates on use of existing EU funds (up to 2021)

The following examples illustrate the allocation of funds to projects relevant to the preceding chapters on employment, social policies and education, in the previous funding period.

- **Project: Development of a support system for the employment of people with disabilities in the open labour market (2017 – 2023)**²⁰

The overarching goal of the project is to increase the capacity and quality of services provided by public employment service providers. This goal should be achieved through the recruiting of 99 new employees who will be intensively trained in advising and supporting employment services for people with disabilities and for current or potential employers. In addition, it is anticipated that the project will introduce an infrastructure of support for people with disabilities in the labour market and increase the effectiveness of the support provided. The new system should be based on cooperation between stakeholders such as schools and educational facilities, employers operating in both sheltered and open labour market facilities and professionals providing social services and social work, ergo diagnostic centres, non-governmental organizations, social partners, and the Labour Office.

- **Project: Development and support of quality models for the social services system (2016 – 2021)**²¹

The project is implemented by the Ministry of Labour and Social Welfare. The aim is to identify gaps and weaknesses in the current system of quality assessment of social services and to develop methodological support in the field of quality of social services. In addition, the project goal is to develop new instruments for quality assessment, and to identify and share examples of good practices. The project is divided into several parts which include project management and administration; development of quality models of social services; optimisation of the legal framework of quality, superstructure quality model; education and training of inspectors.

- **Project: Support for Inclusive Education in Pedagogical Practice (2017-2022)**²²

This project is implemented by the National Institute for Further Education. The aim is to support the implementation of the Action Plan for Inclusive Education through strengthening the personal and professional competencies of pedagogical personnel engaged in inclusive education in pre-school, primary, secondary, and non-formal education, as well as by organising awareness raising campaigns for schools, professionals and the general public. The overarching goal is to enhance the support for all target groups (professional, pedagogical, and general public) and to strengthen the technical competencies of pedagogical staff (management of schools and school

²⁰ <https://www.uradprace.cz/rozvoj-systemu-podpory-zamestnavani-osob-se-zdravotnim-postizenim-na-volnem-trhu-prace>.

²¹ https://www.esfcr.cz/projekty-opz/-/asset_publisher/ODuZumtPTtTa/content/rozvoj-a-podpora-modelu-kvality-pro-system-socialnich-sluzeb?inheritRedirect=false.

²² <https://www.edu.cz/podpora-skol/projekty-esif/podpora-spolecneho-vzdelavani-v-pedagogicke-praxi-apiv-b/>.

facilities and teachers) which is a precondition of successful implementation of inclusive education in pre-school, primary, secondary and non-formal education.

6.2 Priorities for future investment (after 2021)

The RRP addresses most of the priorities relevant to the challenges identified in this report (although disability is not always mentioned). Particularly relevant to disability in the use of Czech RRF is fostering digitalisation, railway infrastructure and sustainable mobility, reforms in education, health, and financing large-scale renovation programmes to increase the energy efficiency of residential and public buildings, childcare and long-term care facilities.

- The accessibility of railway infrastructure has noticeably improved during the last two decades. Disability inclusion is considered in planning public transport infrastructure including the railways. However, for train stations and boarding platforms it is necessary for the railway administration authority to introduce a single orientation and information system which would allow autonomous movement for persons with disabilities while travelling.
- Disability inclusion should be considered during the planning of cycle paths.
- The other priority area of RRF is to ensure equal access to education through the increasing access to affordable childcare, reinforced support for disadvantaged children, training for teachers and additional tutoring for children at risk of failure. Investment. This area must target the needs of learners with disabilities explicitly.
- RRF refers to revamping the digital curricula in education, providing digital equipment and training to schools, new university programmes in fast-growing digital fields, upskilling and reskilling in digital skills. However, the relevant national strategies and plans are short in considering disability inclusion. Anecdotal evidence also suggests that the disability perspective is not systematically addressed in the Government funding schemes relevant to the development and roll out of digitalisation and digital transformation. It would be appropriate to reflect disability funding with particular focus on supporting digital transformation in education. In addition, foreseen projects related to the digital transformation and cybersecurity of public administration, the justice system and health care funded by RRF should respect Universal Design approach to make digital infrastructure disability inclusive. Clear regulations and guidelines regarding the use of Universal Design should be developed and utilised.
- The RRF covers investments into renovation programmes to increase the energy efficiency of residential and public buildings, childcare and long-term care facilities. Disability support services are still largely provided in institutions type facilities. There is a general agreement that EU funding must not be used for renovating such type of buildings. Instead, development of community-based facilities has to be supported. It would be appropriate to introduce measures which would assure that RRF investments comply with the expectations of Article 19 CRPD and EU rules concerning structural funds and public procurement.

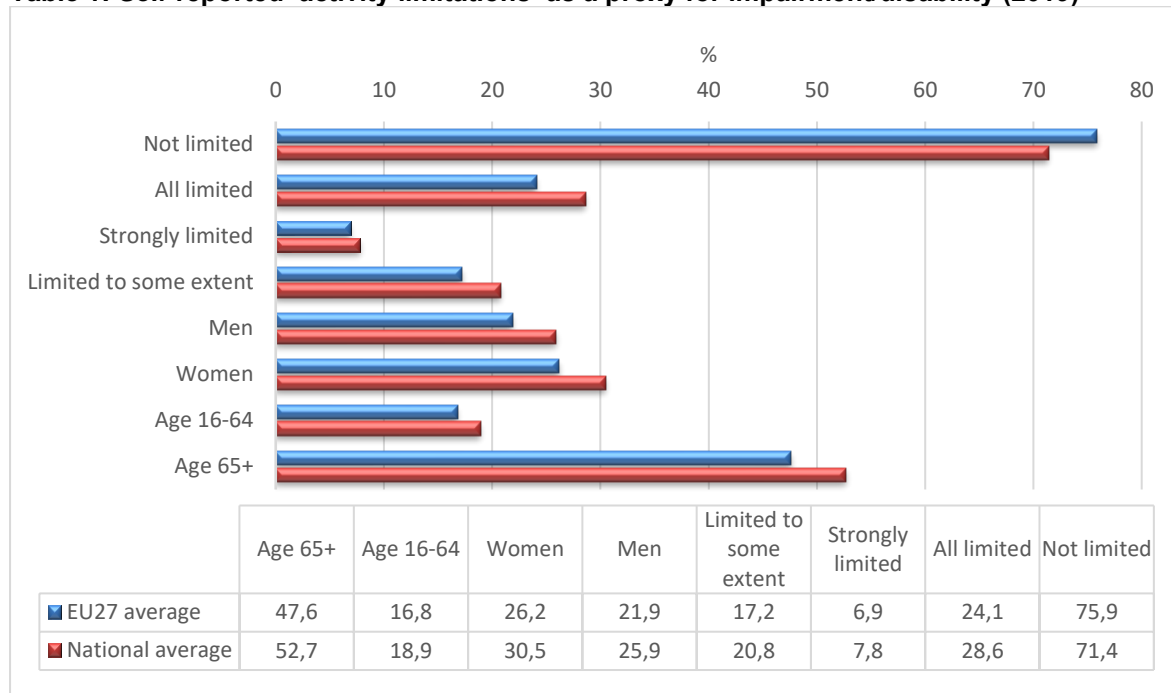
7 Annex: disability data relevant to the Semester

See also disability data published in the Eurostat database²³ and statistical reports.²⁴

Unless specified, the summary statistics are drawn from the most recent EU-SILC data available to researchers from Eurostat. The EU-SILC sample includes people living in private households and does not include people living in institutions (congregative households). The sampling methods vary somewhat in each country.

The proxy used to identify people with disabilities (impairments) is whether ‘for at least the past 6 months’ the respondent reports that they have been ‘limited because of a health problem in activities people usually do’.²⁵

Table 1: Self-reported ‘activity limitations’ as a proxy for impairment/disability (2019)



Source: EU-SILC 2019 Release 2021 version 1.

In subsequent tables, these data are used to indicate ‘disability’ equality gaps and trends relevant to the analytical chapters – for the labour market, social policies and healthcare, and education – by comparing outcomes for persons who report and do not report ‘activity limitations’.²⁶ National estimates for Czechia are compared with

²³ Eurostat health Database, <https://ec.europa.eu/eurostat/web/health/data/database>.

²⁴ Eurostat (2019) *Disability Statistics* https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Disability_statistics.

²⁵ The SILC survey questions are contained in the Minimum European Health Module (MEHM) [https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Special:WhatLinksHere/Glossary:Minimum_European_Health_Module_\(MEHM\)](https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Special:WhatLinksHere/Glossary:Minimum_European_Health_Module_(MEHM)).

²⁶ This methodology was developed in the annual statistical reports of ANED, available at <http://www.disability-europe.net/theme/statistical-indicators>.

EU27 mean averages for the most recent year.²⁷ Slightly more people in Czechia reported limitations than the EU average in 2019.

7.1 Data relevant to disability and the labour market

Table 2: EU and Czechia employment rates, by disability and gender (aged 16-64) (2019)

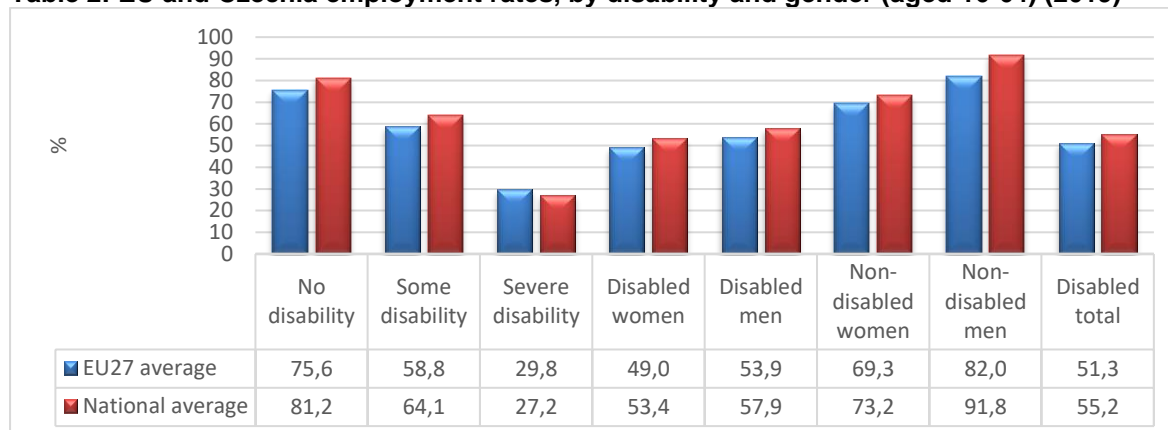
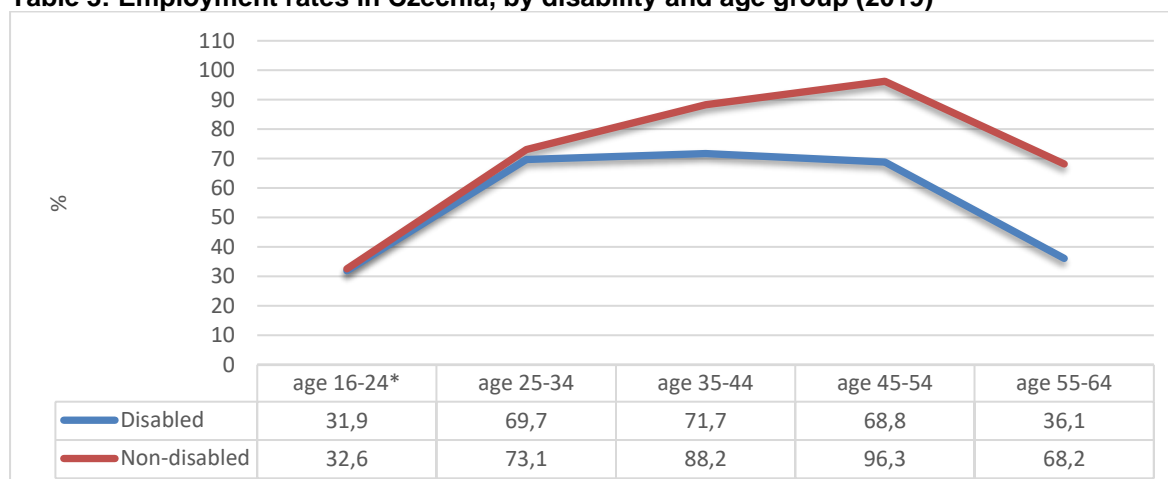
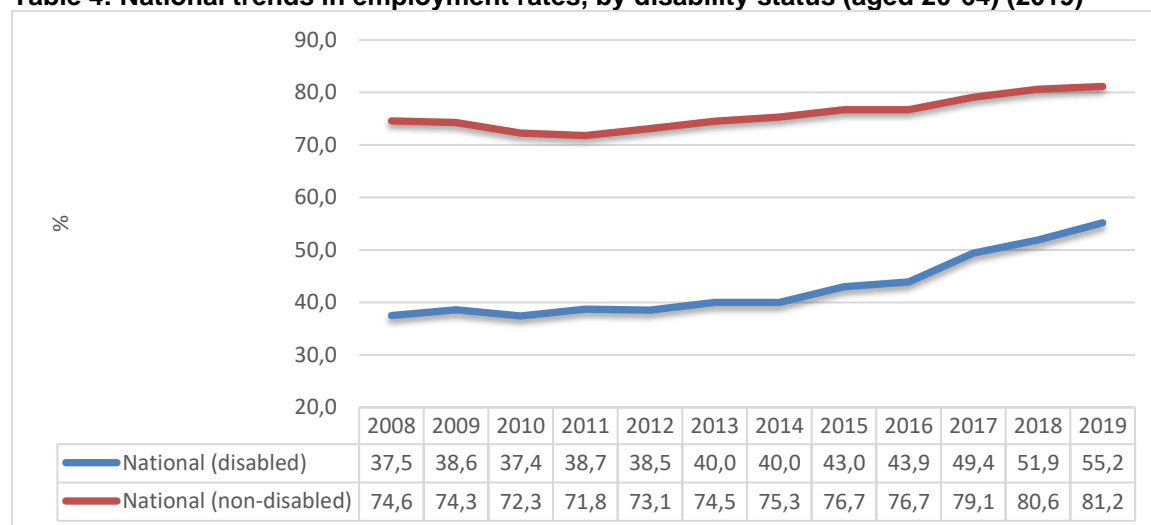


Table 3: Employment rates in Czechia, by disability and age group (2019)



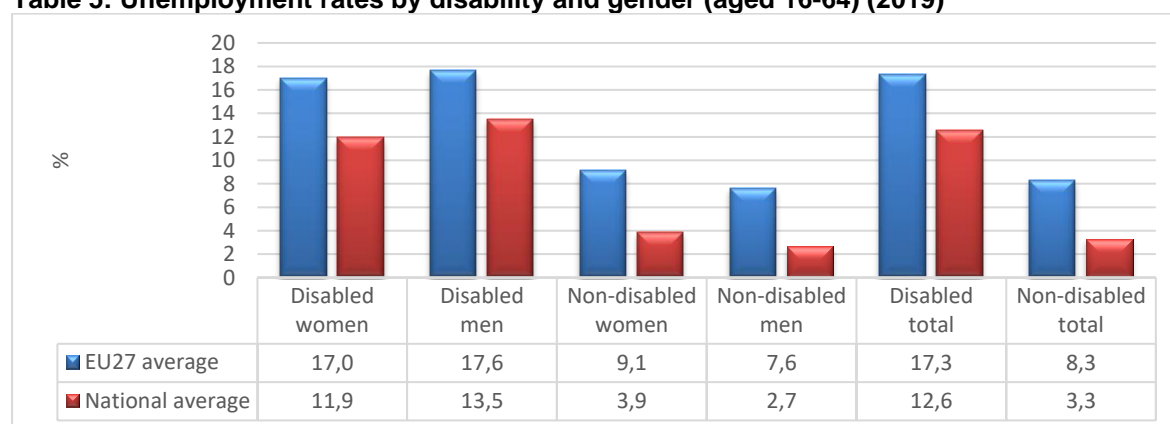
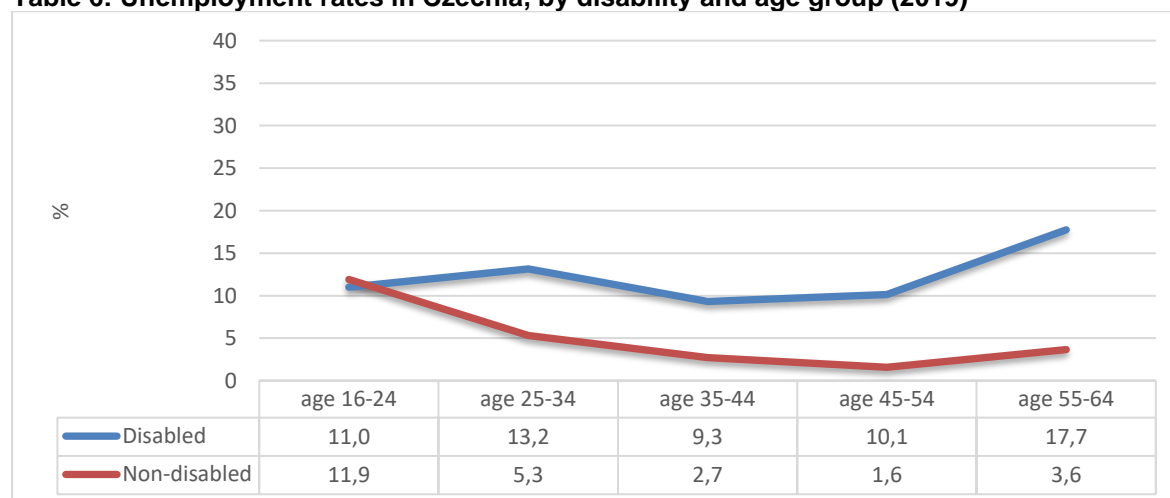
*There were fewer than 50 observations in the youngest disability group

²⁷ The exit of the United Kingdom from the EU changes the EU average. Averages were also affected in 2015 by a discontinuity in the German disability data due to a definitional change.

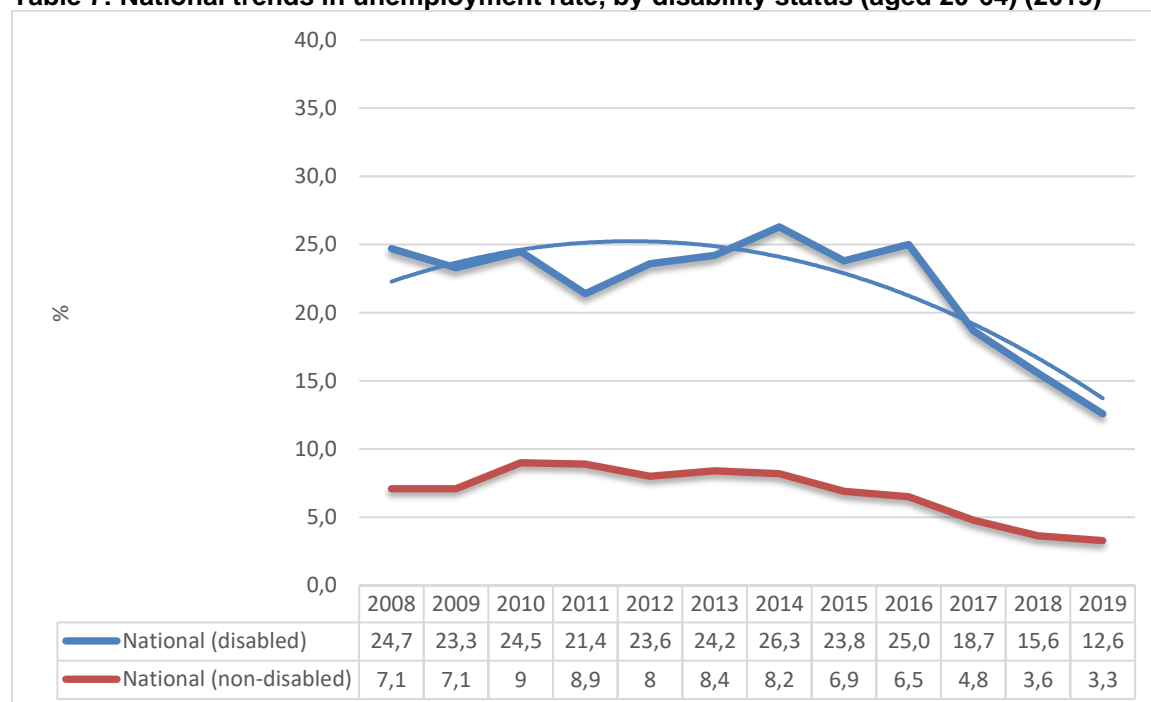
Table 4: National trends in employment rates, by disability status (aged 20-64) (2019)


Source: EU-SILC 2019 Release 2021 version 1 (and preceding UDBs).

7.1.1 Unemployment

Table 5: Unemployment rates by disability and gender (aged 16-64) (2019)

Table 6: Unemployment rates in Czechia, by disability and age group (2019)


*There were fewer than 50 observations in the youngest disability group.

Table 7: National trends in unemployment rate, by disability status (aged 20-64) (2019)


Source: EU-SILC 2019 Release 2021 version 1 (and preceding UDBs).

7.1.2 Economic activity

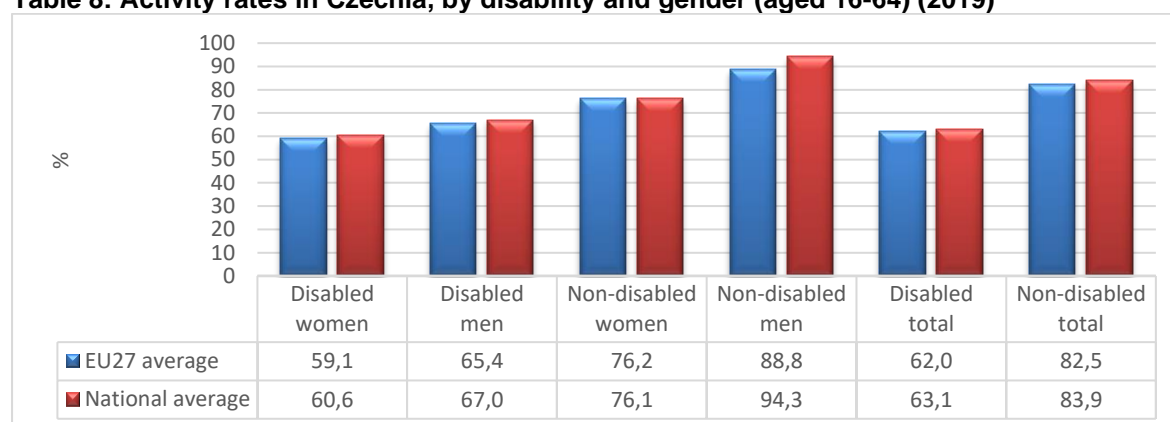
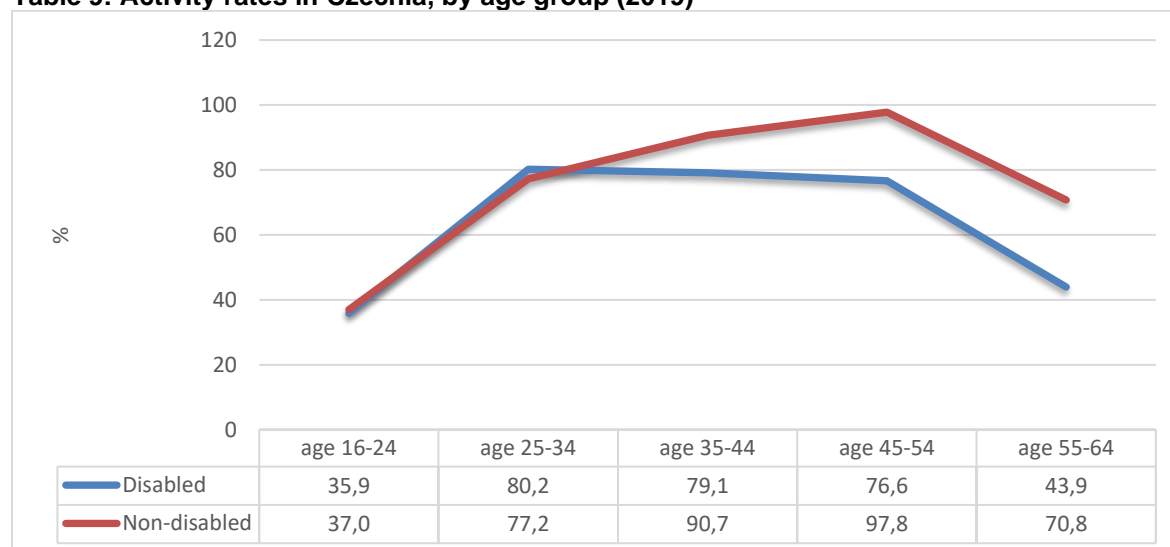
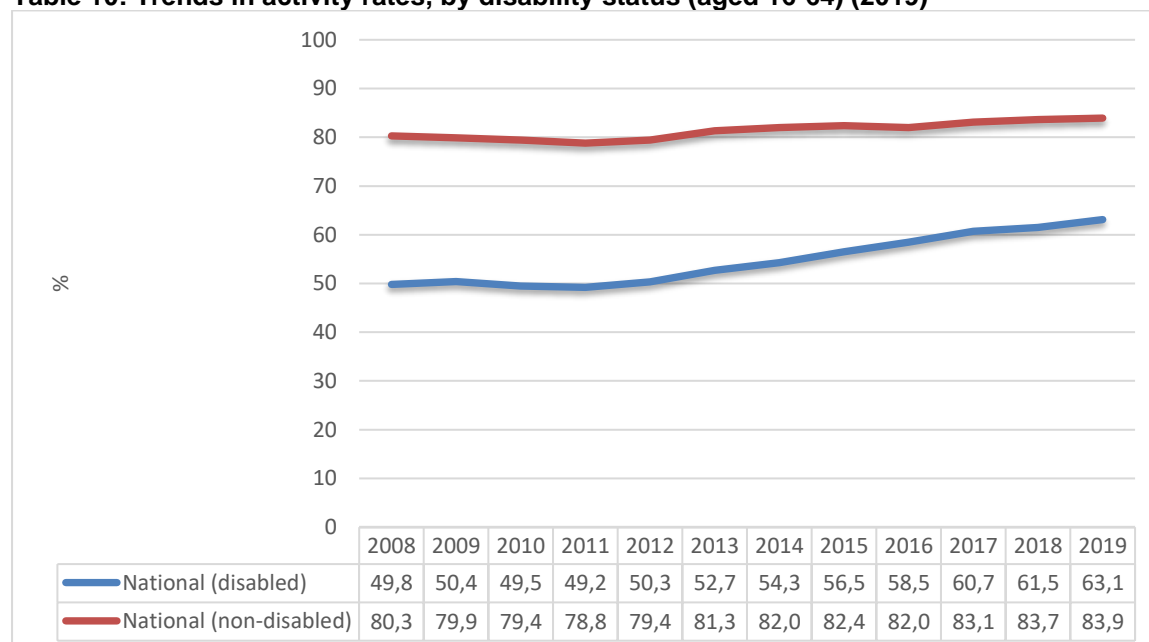
Table 8: Activity rates in Czechia, by disability and gender (aged 16-64) (2019)


Table 9: Activity rates in Czechia, by age group (2019)**Table 10: Trends in activity rates, by disability status (aged 16-64) (2019)**

Source: EU-SILC 2019 Release 2021 version 1 (and preceding UDBs).

7.1.3 Alternative sources of labour market data in Czechia

Disability data is not yet available from the core European Labour Force Survey but labour market indicators for Czechia were disaggregated from ad modules conducted in 2001 and 2011. These can be found in the Eurostat disability database.²⁸

The disability sample survey 2018²⁹ indicates that disability in conjunction with age and level of education has a significant impact on economic status. Most persons with disabilities are people with old-age pensions, with nearly a third receiving a disability pension. According to the study, a mere 19% of all persons with disabilities, (N=215,

²⁸ Eurostat Health Database: <https://ec.europa.eu/eurostat/web/health/data/database>.

²⁹ <https://www.czso.cz/csu/czso/vyberove-setreni-osob-se-zdravotnim-postizenim-2018>.

000) were engaged in employment. Two-thirds of those working with a disability worked full-time, more men (76%) than women (55%). People under 50 also worked full-time more frequently.

7.2 EU data relevant to disability, social policies and healthcare (2019)

Table 11: People at risk of poverty or social exclusion, by disability and risk (aged 16-59)

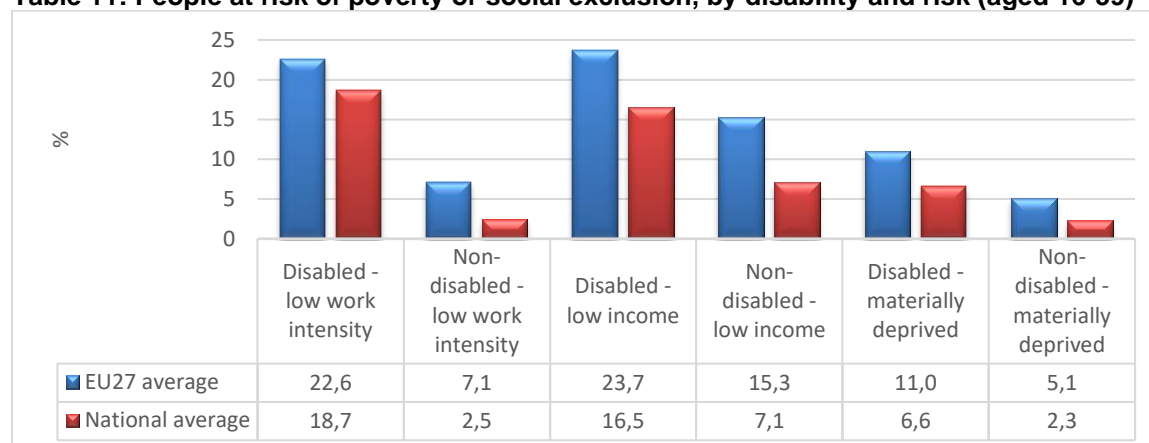


Table 12: People at risk of poverty or social exclusion, by disability and gender (aged 16+)

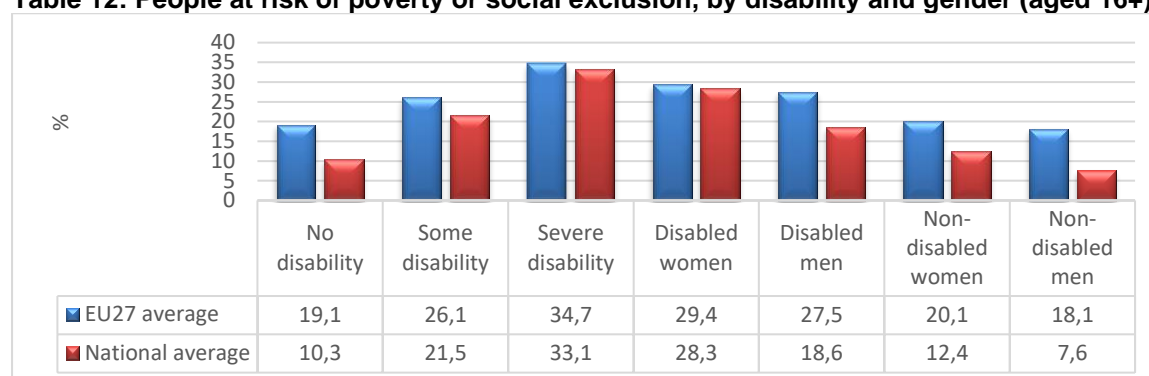
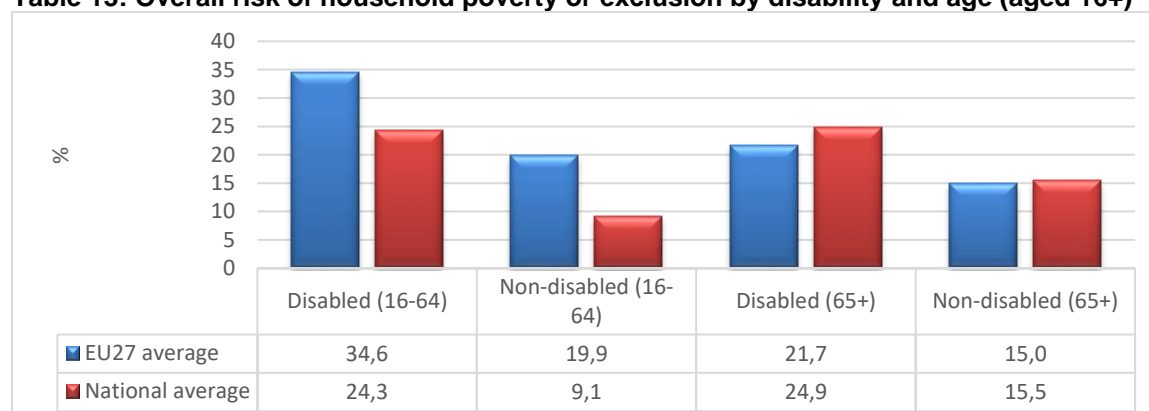
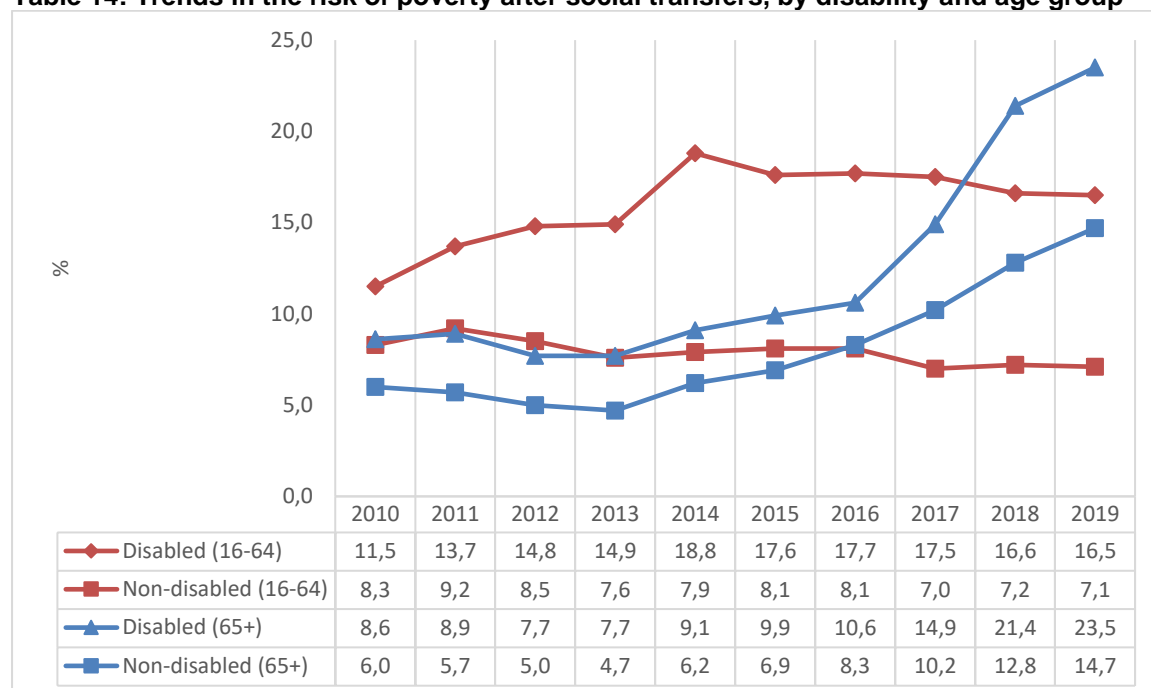


Table 13: Overall risk of household poverty or exclusion by disability and age (aged 16+)

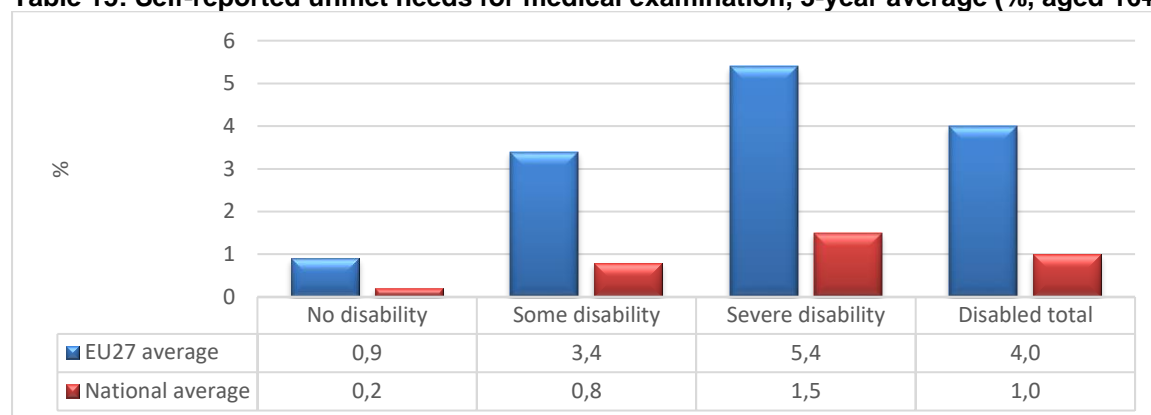


Source: EU-SILC 2019 Release 2021 version 1 (and previous UDB).

Table 14: Trends in the risk of poverty after social transfers, by disability and age group

Source: Eurostat Health Database [[hlth_dpe020](#)] - People at risk of poverty.

Note: this table shows national trends in financial poverty risk, rather than the general AROPE indicator (which is not as comparable between age groups due to the effect of paid employment); the survey does not distinguish 'activity limitation' for children under 16.

Table 15: Self-reported unmet needs for medical examination, 3-year average (% , aged 16+)

Source: Eurostat Health Database [[hlth_dh030](#)] - 'Too expensive or too far to travel or waiting list'.

Note: due to large variations an average of three years is indicated. EU mean averages are also skewed by high values in a minority of countries within disability groups but median averages for the total disability and no disability groups in 2019 are consistent with the 3-year mean values.

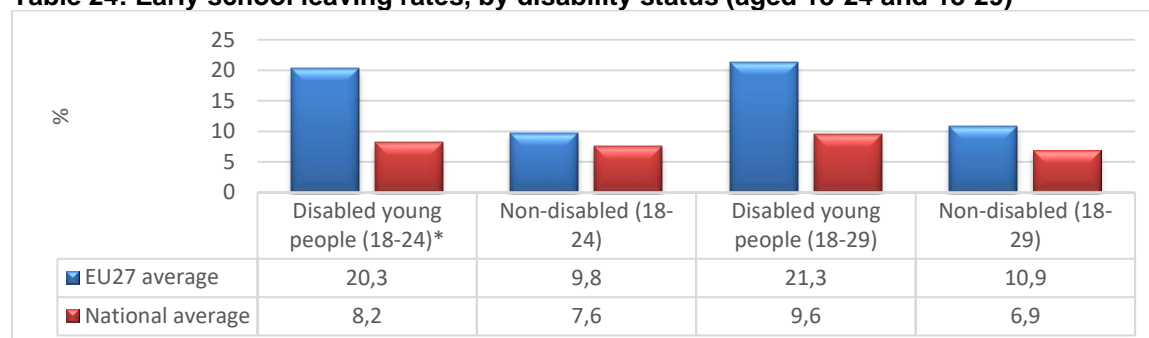
7.2.1 Alternative sources of poverty or health care data in Czechia

The EU-SILC data provides a comprehensive and reliable source concerning poverty or social exclusion rates. In addition to the summary tables presented so far, the Eurostat disability database also contains breakdowns concerning disability and poverty before and after social transfers, as well as in-work-poverty.³⁰

³⁰ Eurostat Health Database, <https://ec.europa.eu/eurostat/web/health/data/database>.

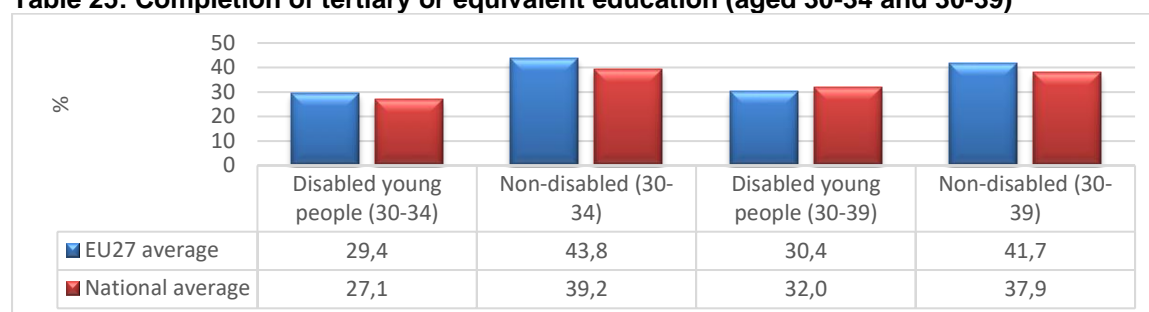
7.3 EU data relevant to disability and education

Table 24: Early school leaving rates, by disability status (aged 18-24 and 18-29)³¹



*There were fewer than 50 observations in the narrow disability age group

Table 25: Completion of tertiary or equivalent education (aged 30-34 and 30-39)



Source: EU-SILC 2019 Release 2021 version 1 (and preceding UDBs).

Note: Confidence intervals for the disability group are large and reliability low (due to the small sample size in the target age group). An average of several years may be needed to establish trends or to compare breakdowns by gender.

7.3.1 Alternative sources of education data in Czechia

In accordance with the task given by the Resolution of the Government of the Czech Republic of 25 May 2015 No. 385 on the National Plan for the Promotion of Equal Opportunities for Persons with Disabilities for the period 2015-2020¹, the Czech Statistical Office conducted a disability sample survey in 2018.³² The results of the study indicated that persons with disabilities often achieve a lower level of education compared to general population. Among persons with disabilities, the proportion with only primary or no education was four times higher (21 % compared to 5 %) than for those with secondary education with no school leaver's certificate (47 % compared to 36 %), which more than two thirds of persons with disabilities aged 35–49 do not have.

³¹ There was a change from ISCED 1997 to ISCED 2011 qualification definitions in 2014 although some Member States continued to use the older definition after this time.

³² <https://www.czso.cz/csu/czso/vyberove-setreni-osob-se-zdravotnim-postizenim-2018>.

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