

European Semester 2021-2022 country fiche on disability equality

Slovakia



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Slovakia

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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

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 Slovakia in 2022

The main challenges are related to developments in 2020-2021, including the impact of the pandemic and the adoption of the RRP, but also adoption of the National Disability Programme 2021-2030, National Strategy on Deinstitutionalisation of the System of Social Services and Substitute Care, and National Priorities for Development of Social Services 2021-2030.

Disability and the labour market

Data from LFS indicate an employment rate for persons with disabilities in Slovakia of 23.6 % in 2020 (EU-27 at 24.7 %), compared to 72.5 % for other persons. This results in an estimated disability employment gap of approximately 49 percentage points. No new measures were adopted to deal with the lack of capacities for individualised job counselling for people with disabilities.

Disability, social policies and healthcare

Data from EU-SILC 2019 indicate the poverty risk rate for working age persons with disabilities in Slovakia was 10.5 % in 2019, compared to 9.1 % for other persons of similar age - an estimated disability poverty gap of approximately 1 percentage points. In Slovakia, long-term care is largely in residential social services, including in cases where health care (nursing) is needed. In 2020 almost 54 % of 22,442 users of year-round residential services lived in 273 facilities with capacity over 40 beds.

As regards an absent guardianship reform, some improvement has been achieved in social services where a new position of confidant person for service users has been introduced.

Disability, education and skills

For the first time, a legislative proposal introducing the term 'inclusive education' has been discussed in parliament. Despite this, the availability of pre-primary mainstream education as well as distance education remain a challenge. Pre-primary level is the only level in which the attendance of children with disabilities is more frequent in special than mainstream education stream. Moreover, during the pandemic, about 12.4 % of pupils with disabilities attending primary special schools did not join any form of distant education.

Investment priorities for inclusion and accessibility

The RRP contains investments addressing several of the above challenges: establishing integrated social and health system of long-term care, and enhancing community-based social service facilities (component 13), improvements in mental health care (component 12), as well as accessibility of school buildings including digital infrastructure at schools (component 6). No investment is planned within the RRP to improve the access of people with disabilities to the labour market.

1.2 Recommendations for Slovakia

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

Recommendation: Introduce additional measures to promote individualised counselling, job coaching, supported employment for persons with disabilities, in line with the recommendation of the UN CRPD.

Rationale: The aim is to address high economic inactivity rate of people with disabilities and improve their access to the open labour market. Non-public employment services are underdeveloped in Slovakia, and people with disabilities have very limited opportunities to be guided before and after finding a job. These measures have not been covered in the RRP.

Recommendation: Prepare and implement the reform of integrated socio-health long-term care, in co-operation with the DPOs and service providers.

Rationale: The reform has been planned in the RRP, and has been considered necessary for many years. However, so far only limited progress has been achieved. The preparation of the RRP was criticised for the lack of involvement of the civil society, therefore the emphasis on participation of the DPOs is important.

Recommendation: Promote deinstitutionalisation of large-capacity facilities and increase availability of the outpatient and outreach social services.

Rationale: The process of transformation of large-capacity facilities is slow, the COVID-crisis has underpinned the need for smaller capacity facilities and home care services. However, the transformation would not be possible without increased capacities of outpatient services, as also planned in the RRP.

Recommendation: Increase availability of mainstream pre-primary education for children with disabilities.

Rationale: Pre-primary education is the only level in which there are more children in special, not mainstream educational stream. Measures to achieve this goal have been partially covered in the RRP.

Recommendation: Ensure access of pupils with intellectual disabilities educated in Variant A to secondary education.

Rationale: Despite the long-lasting criticism, pupils educated in Variant A can still only attain the primary level of education, not the lower secondary level, which is required when applying for secondary schools. This measure has not been covered in the RRP.

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 Slovakia (RRP)

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

The Slovak RRP was approved by the European Commission² on 21 June 2021. The Plan consists of 18 components and 66 reforms in 5 priority policy areas.³

Disability is addressed primarily in specific measures of component 6 'Accessibility, development and quality of inclusive education at all levels'. From a disability perspective, the reforms focus particularly on:

- enhancing pre-school capacities to create conditions for compulsory pre-primary education for all children aged five and introduction of a legal right for a place in preschool for all children aged three;
- the concept of special educational needs (Definition of special education needs will be corrected, vertical model of obligatory support measures will be created and the measure will be pilot tested);
- support of school desegregation and implementation of measures to prevent early school leaving and optimalisation of several apprentices (F-odbory) according to the labour market needs, including mentoring and tutoring of pupils with the risk of low education level;
- measures to reduce the impact of the pandemic on pupils at primary and secondary schools - the measures include tutoring of pupils in the risk of low achievement or failure due to the limited possibilities to join distance education during the pandemic.

Also Component 7 'Education for the 21st century addresses reforms with some disability specific issues, for example:

- curricular and textbook reform, including digitalisation of textbooks to make distant education easier and to provide better access to learning material for pupils with disabilities and
- teachers' training and development in teaching children with various needs or disadvantaged children who face barriers in education.

Two components under the priority Health directly address disability policies and contribute to addressing CSRs 1 and 2 from 2019, which referred to people with

Ministry of Finance of the Slovak Republic (2021), 'Plán obnovy a odolnosti' (Recovery and Resilience Plan), https://www.planobnovy.sk/kompletny-plan-obnovy/.

² 'Plán obnovy a odolnosti' (Recovery and Resilience Plan for Slovakia), June 2021, https://ec.europa.eu/slovakia/news/slovensky_plan_obnovy_a_odolnosti_dostal_od_europskej_komisi_e_zelenu_sk_or https://ec.europa.eu/info/system/files/com-2021-339_annexe_en.pdf.

disabilities in the main target group. Moreover, component 13 refers to the new European Disability strategy in Article 4.1. Developing independent living and reinforcing community-based services and 4.4 on Consolidating social protection systems.

- a) Component 13: Accessible and high-quality long-term socio-health care (€265 mil.)
 - Integrated social and health system of long-term care
 - Enhancing community-based social care capacities outpatient form and housing (maximum capacity 6 in one home unit)
 - New disability assessment system considering the needs of assessed person
 - New funding scheme for provision of social services, centred around people's needs (personal budget)
 - New system of inspection on provision of social care
- b) Component 12: Human, modern and available mental health care (€105 mil.)
 - To modernise psychiatric and psychological socio-medical care,
 - To strengthen socio-medical care and to increase its availability

2.2 Semester links to CRPD and national disability action plans

Relevant recommendations 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 national disability strategy too. In Slovakia, this refers to the National Programme on Improving the living conditions of persons with disabilities for 2021-2030.⁴ This programme replaced the previous one, which was in force in the period 2014-2020, and based on implementation of the UN CRPD. In particular, the following measures in the area of employment, education and social policies may be of high importance in relation to the European Semester:

Employment:

4.4.1: To implement existing measures to support employability and employment of people with disabilities especially in an open labour market, introduce new innovative measures, also in social economy; to ensure individualised counselling for people with disabilities by involving non-public service providers, and for this purpose set up a framework for co-operation in this area between public and non-public employment services.

Social policies:

4.2.3 To actively support the transition from institutional care to community-based services and social inclusion by implementing measures from the new National Strategy on Deinstitutionalisation, re-innitiating regular dialogue of all stake-holders involved in the deinstitutionalisation, continuing in implementation of national projects in this area, continuing with the provision of supervision and education for employees in social services, with an emphasis on independent living in all areas of life.

5.1.2 Adopt by the government the guardianship reform strategy

Ministry of Labour, Social Affairs and Family of the Slovak Republic (2021), 'Národný program rozvoja životných podmienok osôb so zdravotným postihnutím na roky 2021 – 2030' (National Disability Programme for years 2021-2030), https://www.employment.gov.sk/sk/rodina-socialna-pomoc/tazke-zdravotne-postihnutie/kontaktne-miesto-prava-osob-so-zdravotnym-postihnutim/.

Education:

- 6.1.1 To ensure availability of digital study materials for pupils with disabilities, as well as accessibility of educational portals and the documents they contain, for these pupils.
- 6.1.3 to prepare and implement courses for teachers within continuous education focusing on inclusive and accessible school environment especially for pupils with disabilities.

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

In 2016, the UN CRPD Committee made the following recommendations to Slovakia:

Article 27 UN CRPD addresses Work and Employment.

'74. The Committee recommends that the State party step up efforts on the transition from sheltered workshops to an open labour market for all. The process must include an action plan, timetable, budget and training for public and private sector employers, including on the provision of reasonable accommodation. The Committee also recommends that the State party pay attention to the links between article 27 of the Convention and target 8.5 of the Sustainable Development Goals.'

More recently the 2019 List of Issues requested the following:

'26.Please provide information on the measures taken to increase the employment rate of persons with disabilities, particularly women with disabilities, in the open labour market, and on the national targets for creating employment opportunities for persons with disabilities. Please also provide information on measures taken to: (a) Ensure the transition of persons with disabilities, including those in the process of moving from institutions into the community, from unemployment or employment in sheltered workshops to employment in the open labour market; (b) Eliminate barriers and discrimination against persons with disabilities in the recruitment process and the workplace, including instances involving the denial of individualized measures.'

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 Slovakia of 56.3 % in 2019, compared to 79.4 % for other persons against a national employment target of 72 %. This results in an estimated disability employment gap of approximately 23 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 13.2 % for persons with disabilities and 8.1 % for other persons, respectively in 2019 (see Tables 5-7), against the EU27 average of 17.3 % for persons with disabilities. The economic activity rate for persons with disabilities in Slovakia was 64.9 % compared to 86.3 % for other persons (see Tables 8-10). These indications are broken down by gender and age in the respective tables in annex.

Data from LFS indicate an employment rate for persons with disabilities in Slovakia of 23.6 % in 2020 (EU-27 at 24.7 %), compared to 72.5 % for other persons. This results in an estimated disability employment gap of approximately 49 percentage points.

In 2019 (the year in which more detailed data for persons with disabilities are available) the employment rate of people with disabilities reached 18.8 % (+0.1 percentage points year-on-year). In the total population, the employment rate in 2019 reached 73.4 % (+1.0 point). While the employment rate of men with disabilities increased in 2019 by 1.8

percentage points and reached 21.0 %, for women with disabilities it decreased by 1.5 percentage points to 16.8 %.⁵ In total population, the employment rate for both men and women increased in 2019 – for men to 79.9 % (+0.7 percentage points), and for women to 66.9 % (+1.4 points).

It is important to note that while the EU-SILC may over-report disability status in the Slovak population, the national LFS under-reports it. The reason is that the Slovak LFS uses a different definition of disability to European social surveys, counting only those who have been officially assessed (as explained in the annex to this report).

The disability unemployment rate according to data from the LFS remained in 2019 at the same level as in 2018, at 10.4 %, whilst in the total population, it slightly decreased (by 0.8 pps) to 5.8 %.

The data also indicate several concerns as regards the labour market situation of people with disabilities in Slovakia.

First, there are groups of people with disabilities for whom access to the labour market is still difficult. These are especially people with severe disabilities – according to the EU-SILC, in 2018, the employment rate of people with severe disabilities was only 31.2 %. Other data sources unfortunately do not allow for detailed conclusions in this regard. From the data of Social Insurance Agency, the age structure of those disability pensioners who are employed, or share of those with reduced work capacity by more than 70 %, among those who have a job is not known.

Second, as mentioned in the previous year, in comparison with the population without disabilities, people with disabilities are even more significantly affected by regional disparities in access to the labour market. The data from the LFS for year 2019 show that whereas in the population without disabilities, the share of eight regions on the total number of economically active people varied from 10.5 % to 14.6 %, in the population with disabilities, it varied from 8.2 % in Košice region to 18.3 % in Žilina region.⁶ Therefore it is important to address regional disparities in the labour market also from a disability perspective.

Third, in Slovakia, a high rate of economic inactivity among people with disabilities has been persisting. According to the LFS, in 2019, there were 79.0 % economically inactive people with disabilities (-0.1 percentage points year-on-year) against 40.3 % in the population without disabilities (+0.1 points).

Finally, it may be assumed that in 2020 the labour market situation of people with disabilities was significantly influenced by the COVID-19 pandemic but, so far, there are not enough data to estimate this impact and make comparisons with the population without disabilities. Some preliminary estimations regarding persons with disabilities can be made from administrative data. According to the Social Insurance Agency, the number of employed people with disabilities (i.e. those who receive disability pension and are employed) decreased by 3.19 percentage points from 105 102 in 2019 to 101 752 in 2020, while the total number of disability pension recipients slightly increased (from

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For more details see Table 11 in the Statistical Annex.

⁶ For more details, see Table 12 in the Statistical Annex.

251 128 to 251 471). The share of employed disability pension recipients fell from 41.9 % in 2019 to 40.5 % in 2020, which was however still the second best achievement since 2014.

The number of subsidised jobs in sheltered workshops / workplaces also decreased, from 10,942 in 2019 to 10,127 in 2020 (-7.45 pps).

At the same time, the number of registered jobseekers with disabilities increased from 5,808 in 2019 to 7,294 in 2020. The share of jobseekers with disabilities among all registered jobseekers remained the same, up 0.02 points (from 3.46 % in 2019 to 3.48 % in 2020).

3.2 Analysis of labour market policies relevant to the Semester

For reference, see also the 2021 Recovery and Resilience Plan for Slovakia and the National Programme on Improving the living conditions of persons with disabilities for 2021-2030.

As mentioned in the previous EDE Semester fiche for Slovakia, low availability of individualised job counselling for people with severe disabilities remains a challenge. No specific action has been taken to address this issue since the last reporting period. Likewise, no reform or investment is planned within the RRP to deal with the issues mentioned in the Country Report 2020, such as the need to increase capacities for individualised job counselling, or establish support of non-public employment service providers. In fact, in its five key areas and 18 components, the Slovak RRP does not directly address labour market participation of disadvantaged job-seekers and people with disabilities. Rather, to address the challenges in the labour market, the RRP focuses, in Component 6 'Education', on improvements in education and digital skills, with an emphasis on pupils with disabilities (see section 5.2 of this report). Despite that, there have been some NGO / business initiatives to promote employment of people with disabilities, such as Helping with Heart,⁷ a support programme for companies to implement pilot projects focusing on employment of people with disabilities, which is run by Profesia,⁸ the largest job portal in the country.

As regards policies to address the impact of the COVID-19 pandemic on labour market situation of people with disabilities, no disability specific measures were adopted to subsidise jobs in which people with disabilities have been employed. Instead, the government has adopted the First Aid Scheme⁹ as a mainstream instrument to provide compensations to employers and the self-employed persons for the restrictions in their business activities during the pandemic, which has been co-financed by the European Social Fund. Within this scheme, 80 % of employees' salaries were compensated to the companies whose branches were mandatorily closed. Similarly, contributions were provided to freelancers, based on the decrease of company's sales.

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O čom je Výpomoc so srdcom' (About Helping with Heart), https://www.sosrdcom.sk/.

⁸ Profesia – Who we are, https://firma.profesia.sk/en/.

For more details on the scheme see e. g.: Buchel, O., Domonkos, S., Fašungová, L., Hábel, B., Hlaváč, M., Komadel, J., Veselková, M. (2020), "First Aid" for Slovakia: Updated report on the economic policy response to the COVID-19 pandemic. Social Policy Institute, July 2020, https://www.employment.gov.sk/files/slovensky/ministerstvo/analyticke-centrum/analyticke-komentare/spi first aid sr aug2020 final.pdf.

For sheltered workshops / workplaces and for social enterprises, the question was under what conditions they would be eligible for the support from the general scheme, or the scheme for sheltered workshops / workplaces. Therefore the Central Office of Labour, Social Affairs and Family (hereinafter 'COLSaF') has issued the guideline, ¹⁰ in which it set out that social enterprises are in principle eligible for the subsidies under the First Aid Scheme and it is up to them to decide which of the two schemes they need to use. In some circumstances, combined support from both schemes can be provided to them, e.g. the allowance to cover operating expenses of sheltered workshop / workplace under the standard scheme and a wage subsidy for work assistants (instead of the standard allowance for a work assistant) under the First Aid Scheme. The only condition is that they cannot claim compensation of the same costs, especially wage subsidies, under both schemes (for more details on challenges and measures for people with disabilities in Slovakia during the pandemic, see EDE COVID-19 Country Report in Slovakia, as referred in footnote). Error! Bookmark not defined.

In 2020, employer subsidies were still Slovakia's dominant active labour market policy tool to support labour market participation of people with disabilities. Moreover, the biggest part of total expenses to support employment of people with disabilities (80.9 %, -0.3 pps year-on-year) was spent to sustain existing workplaces rather than create new ones, via the allowance to partially cover operating expenses of sheltered workshops / sheltered workplaces.¹¹

Social entrepreneurship is gaining importance, with 204 newly registered enterprises in 2020, compared to 44 in 2019 and seven in 2018, when the Act on Social Economy and Social Enterprises¹² came into force. One of available measures for integrative social enterprises with regards to the recommendation of the UN Committee to Slovakia on the support of transition from sheltered environment into the open labour market is the so-called placement subsidy, in accordance with §53f of the Act on Employment Services.¹³ This subsidy is a reward for an integrative enterprise whose employee with disabilities has terminated a job at this enterprise for a new job in the open labour market. The employee could not have worked at the enterprise longer than two years and must have a new job within one month after termination. In such case, a monthly subsidy can be paid to the enterprise up to 12 months, provided that the employee has sustained the job. The amount of the subsidy tapers from 5 % of the national average wage during first to third month, to 35 % average wage during tenth to twelfth month. In September 2019 an instrument to cover this subsidy, as well as the compensation subsidies for social

Central Office of Labour, Social Affairs and Family (2020), 'Informácia pre zriaďovateľov - CHD a CHP a integračných podnikov o preplácaní nákladov na prevádzku CHD/CHP/integračných sociálnych podnikov a nákladov na pracovných asistentov v prípade uzatvorenia prevádzok na základe rozhodnutia hlavného hygienika' (Information for sheltered workshops, sheltered workplaces, work integrative social enterprises on payments of the subsidies to cover their operating costs, and the work assistant subsidies in case of closure based on the decision of the chief hygienist), 13.05.2020, https://www.upsvr.gov.sk/sluzby-zamestnanosti/aktuality/informacia-pre-zriadovatelov-chd-a-chp-a-integracne-podniky.html?page_id=1002258.

For more details, see the Table16 in section 6.1 of this report.

^{&#}x27;Zákon č. 112/2018 Z. z. o sociálnej ekonomike a o sociálnych podnikoch v znení neskorších predpisov' (Act No. 112/2018 Coll. L. on Social Economy and Social Enterprises as amended', https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2018/112/20180501.html.

¹³ Zákon č. 5/2004 Z. z. o službách zamestnanosti v znení neskorších predpisov' (Act No. 5/2004 Col. L. On Employment Services as amended), https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2004/5/.

enterprises was introduced – the ESF national project Support of Integrative Enterprises (for more details, see section 6.1). To the end of 2020, only two enterprises were paid the subsidy but with the growing number of social enterprises, this may be a promising practice in helping people with disabilities transit to the open labour market.

Finally, vocational rehabilitation has currently gained attention in expert discussions, on grounds of the recommendation of the Spending Review of expenditure on groups at risk of poverty or social exclusion (2020), published by the Value for Money Unit of the Ministry of Finance, 14 which has suggested to prepare a proposal of effective vocational rehabilitation system. In Slovakia, so far vocational rehabilitation has only been narrowly defined as a training for employees who have reduced work capacity due to accident at work or occupational disease. 15 Unlike job training or other active labour market measures which are provided to job-seekers by the Offices of Labour, Social Affairs and Family, vocational rehabilitation shall be endorsed by Social Insurance Agency. However, since January 2004, when the corresponding Act on Social Insurance came into force, no vocational rehabilitation training has been provided. 16 There are no data on how many people on long-lasting sick-leave return to work, or fall into disability benefits scheme, although in Slovakia, it is possible to have a regular employment even if a person receives disability pension due to severe disability. Also the RRP in component 13 intends to transfer vocational rehabilitation assessment from Social Insurance Agency to the labour offices within the disability assessment reform which should merge several disability assessment systems for different purposes into one single system.

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Hellebrandt, T. et al. (2020), 'Revízia výdavkov na skupiny ohrozené chudobou alebo sociálnym vylúčením. Záverečná správa' (Revision of expenditure on groups at risk of poverty or social exclusion. Final Report), MŠVVŠ SR, https://www.minedu.sk/data/att/15944.pdf.

See 'Zákon č. 461/2003 Z. z. o sociálnom poistení v znení neskorších predpisov' (Act No. 461/2003 Col. L. on Social Insurance as amended), https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2003/461/20150901.html.

^{&#}x27;Návrat do práce po pracovnom úraze či dlhodobej PN: diskutujeme o možných zmenách v oblasti pracovnej rehabilitácie' (Return to work after an accident at work or a long-term sick-leave: discussions about potential changes in vocational rehabilitation), Institute for Labour and Family Research, https://ivpr.gov.sk/navrat-do-prace-po-pracovnom-uraze-ci-dlhodobej-pn-diskutujeme-o-moznych-zmenach-v-oblasti-pracovnej-rehabilitacie.

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

In 2016, the UN CRPD Committee made the following recommendations to Slovakia:

Article 28 UN CRPD addresses Adequate standard of living and social protection.

'76. The Committee recommends that the State party provide an adequate standard of living to persons with disabilities, including those from an ethnic minority background and those over the age of 65, and ensure that social protection schemes are regularly monitored to track the alleviation of poverty. The Committee also recommends that the State party pay attention to the links between article 28 of the Convention and target 10.2 of the Sustainable Development Goals.'

The 2019 List of Issues requested the following:

'27.Please inform on the measures taken to: (a) Mainstream disability inclusion in strategies to address poverty, with a particular focus on the policies addressing the situation of women, children and older persons with disabilities; (b) Develop public housing programmes that are accessible to and affordable for persons with disabilities, on an equal basis with others; (c) Ensure that all social protection schemes and support services are provided to persons with disabilities without discrimination related to age, gender or socioeconomic status, and ensure the coverage of disability-related extra costs and disability-related schemes after the age of 65 years; (d) Collect statistical data on poverty, disaggregated by disability, age, gender, place of residence and geographical location, and provide the Committee with the available figures..'

Article 19 UN CRPD addresses Living independently in the community.

'56. The Committee recommends that the State party provide and implement a timetable to ensure that the implementation of the deinstitutionalization process is expedited, including by putting in place specific additional measures to ensure that community-based services are strengthened for all persons with disabilities, in particular women with disabilities and older persons with disabilities. Furthermore, the State party should ensure that the use of European structural and investment funds complies with article 19 and that new follow-up national action plans on the transition from institutional settings to community-based support are initiated with the comprehensive involvement of organizations of persons with disabilities and civil society organizations, including in the area of monitoring. The Committee also recommends that the State party no longer allocate resources from the national budget to institutions and that it reallocates resources into community-based services in accordance with the investment priorities of the European Regional Development Fund (art. 5.9 (a) of European Union regulation No. 1303/2013).'

The 2019 List of Issues requested the following:

'19. With reference to the Committee's previous concluding observations (paras. 56 and 58), please provide information on: (a)Progress made in the deinstitutionalization process of persons with disabilities, as evidenced by data disaggregated by age, sex and ethnicity,

as well as on persons who have been deinstitutionalized and on the number of persons who have regained their legal capacity as a result of the deinstitutionalization process; (b) Individualized supports, such as personal assistance, available to persons with disabilities, including those deinstitutionalized in the last five years, who live in the community, and on the personnel and the technical and financial means allocated to such support services at the national and local levels; (c) Measures taken to prevent the reinstitutionalisation of persons with disabilities, including older persons with disabilities in small congregated settings, such as group homes; (d) Measures taken to redirect budget allocations for institutions, including those allocations from the European Structural and Investment Funds, towards initiatives that provide support for inclusion in the community, and to ensure accessibility of mainstream community services at the municipal level. Please provide information about any national targets to increase accessibility of community services and on the indicators of progress.'

Article 25 UN CRPD addresses Health.

'The Committee recommends that the State party remove physical, information and communication barriers to gaining access to health - care services, and th at medical services and treatment be provided on the basis of the free, prior and informed consent of all persons with disabilities. Furthermore, the Committee recommends that the State party provide training for all health and social care personnel on the rights enshrined in the Convention.'

The 2019 List of Issues requested the following:

24.Please provide information on measures taken to: (a) Ensure that health-care facilities, services and equipment, including specialist services, are accessible and affordable to all persons with disabilities, in particular persons requiring high levels of support; (b) Train health professionals and support personnel on the human rights model of disability, and prevent discriminatory and negative attitudes and stereotypes against persons with disabilities, particularly with regard to persons with intellectual or psychosocial disabilities; (c) Ensure equal access to sexual and reproductive health information and services for women and girls with disabilities.

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 Slovakia was 10.5 % in 2019, compared to 9.1 % for other persons of similar age - an estimated disability poverty gap of approximately 1 percentage points (see Table 17). For people aged over 65, the disability poverty gap was 5.8 percentage points (7.9 % for older persons with disabilities and 2.1 % for other persons of similar age). The tables in annex also indicate the respective rates of risk of poverty or social exclusion and break these down by gender as well age.

For persons with disabilities of working age in Slovakia (age 16-64) the risk of poverty before social transfers was 39.6 % and 12.6 % after transfers. The in-work poverty rate for persons with disabilities aged under 60 was 4.6 %.

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 Slovakia was 5.8 %, compared to 1.3 % for other persons.

As regards healthcare, unmet needs for medical examination of PWD - 5.4 % (3-year average) are higher than EU average 4.0 % (3-year average). In Slovakia, this share is even higher for people with severe disability (9.6 %, 3-year average). Contrary to the EU, in Slovakia, the share of people with disabilities with unmet needs for medical examination is slowly increasing (from 4.8 % in 2014 to 5.8 % in 2019), which is more pronounced for people with severe disability (7.4 % in 2014 to 10.3 % in 2019).

As noted in the previous EDE Semester fiche for Slovakia, these developments contrast with the CSR 2020 stating that Slovakia should in parallel with structural changes in its health system secure adequate supply of health workers in the future, ... and ensure access to care for the entire population. Similarly, it calls into question fulfilment of the 2016 CRPD Committee recommendation to remove physical, information and communication barriers to gaining access to health - care services.¹⁷

Concerning the administrative data, the COVID-19 pandemic has significantly increased the number of recipients of protection allowance, which is a benefit within the material need assistance, designed to cover special expenses of household members, who cannot get or increase their income by work. It is provided under conditions stipulated by law. The allowance is not specifically designed for people with disabilities and those who receive disability pension usually do not meet the income means-test for this allowance. Still, there are people ineligible for disability pension despite their disability, especially when their years of payments for social insurance do not achieve the required level. They are then one of the eligible groups to whom the protection allowance can be provided, if their work capacity is reduced by more than 70 %. Other groups according to the law include people who are in old-pension age; single parents caring for a child under 31 weeks of age; people who provide personal care to a person with disability. The protection allowance for these groups was in 2020 of EUR 67.50, and for few other groups of EUR 37.30.

In the previous 3-year period, the number of recipients of the allowance was decreasing. Significant increase of 44.1 % more recipients in 2020 was then caused by the implementation of measure under COVID-19, under which the allowance can also be paid to a person in material need in case of ill health (disease, injury or quarantine, lasting for more than 30 consecutive days). In fact, protection allowance at EUR 37.30 was granted to 11 402 recipients in 2020, in comparison to 5 246 in 2019 (for more details see Table 22: Protection Allowance, monthly in the Annex).

Material need is a situation where the income of household members does not reach the amount of the subsistence minimum and household members do not know or cannot work or exercise or increase their income with their property.

UN CRPD Committee Concluding observations (70), https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRPD/C/SVK/C O/1&Lang=En.

^{&#}x27;Zákon č. 417/2013 Z. z. o pomoci v hmotnej núdzi v znení neskorších predpisov', (Act No. 417/2013 Coll. L. on the Assistance in Material Need as amended), https://www.slov-lex.sk/static/pdf/2013/417/ZZ_2013_417_20210101.pdf.

The administrative data show that the provision of home-care allowance and personal assistance has been growing, which is a positive development as regards prevention of institutionalisation. The number of non-formal carers has increased for the last 3 years (see Table 23 in the Annex). In July 2021, there were 62 711 recipients of home care allowance – non-formal carers, taking care for 64 469 persons. 77.85 % of non-formal carers are women.²⁰ The monthly amount of the allowance was increased in July 2021 to the level of net minimum wage (home care contribution EUR 504.44 for carers in productive age EUR 254.22 for retired carers).²¹

Similarly, the number of recipients of personal assistance has an increasing trend and in July 2021, there were 11 519 recipients of contribution for personal assistance.²² The amount of contribution was increased in July 2021 (hourly rate of personal assistance grew to EUR 4.82).²³ The average daily length of personal assistance is 3.95 hours, resulting in monthly average contributions of EUR 571.26.²⁴

The data concerning deinstitutionalisation of social services show that Slovakia still relies on residential care for persons with disabilities and seniors. In 2019 residential capacity was 41 059 (64.84 %). This presents small increase in last 3 years (in 2017 – 39 725 / 61.55 %). During this period, capacity of outpatient services was decreasing – 7 757 in 2017 to 6 143 in 2019). The number of users of outreach social services oscillates around 16 000 users – 17 057 users in 2017, 15 994 users in 2018, 16 124 in 2019 and 15 168 in 2020. In 2020 almost 54 % of the total number of users of year-round residential services lived in facilities with capacity over 40 beds (in 273 facilities 22 424 users). For detailed information see Table 24 Capacity of residential and outpatient forms of social services / number of users of outreach form of social services for persons with needsin the Annex.

4.2 Analysis of social policies relevant to the Semester

For reference, see also the 2021 Recovery and Resilience Plan for Slovakia and the National Programme on Improving the living conditions of persons with disabilities for 2021-2030.²⁶

Central Office of Labour, Social Affairs and Family of SR (2021), 'Sociálne veci – sociálne dávky. Mesačné štatistiky' (Social Affairs – social benefits. Monthly statistics), July 2021, https://www.upsvr.gov.sk/statistiky/socialne-veci-statistiky/2021/2020-socialne-davky.html?page id=1060272.

²¹ Ministry of Labour, Social Affairs and Family (2021), 'Peňažný príspevok na opatrovanie' (Financial home-care allowance), https://www.employment.gov.sk/sk/rodina-socialna-pomoc/tazke-zdravotne-postihnutie/penazne-prispevky/pp-opatrovanie/.

See comment 23 - Central Office of Labour, Social Affairs and Family of SR (2021).

²³ See comment 24 - Ministry of Labour, Social Affairs and Family (2021).

²⁴ See comment 23 - Central Office of Labour, Social Affairs and Family of SR (2021).

Ministry of Labour, Social Affairs and Family (2021), 'Národná stratégia deinštitucionalizácie systému sociálnych služieb a náhradnej starostlivosti' (National Strategy on Deinstitutionalisation of the system of Social Services and Substitute Care), https://www.employment.gov.sk/files/slovensky/rodina-socialna-pomoc/socialne-sluzby/narodna-strategia-deinstitucionalizacie-systemu-socialnych-sluzieb-nahradnei-starostlivosti-2021.pdf.

See comment 4 - National Programme on Improving the living conditions of persons with disabilities for 2021-2030.

As stated in the RRP, and the new Manifesto of Government for 2021-24²⁷ (resp. 2020-2024), Slovakia faces several challenges in social and health policies with regards to people with disabilities. These mainly include inefficient long-term care, deinstitutionalisation, more support for community-based services, guardianship reform,²⁸ and a lack of accessible housing in relation to the right for independent living.

4.2.1 Long-term care: towards integrated social and health long-term care

Long-term care²⁹ is a topic in the RRP. Ministry of Finance as responsible authority for RRP in Slovakia, has prepared expenditure projection for the LTC in May 2021. The projection shows that expenditures on long-term care would increase from 0.8 % of GDP in 2018 to 2.8 % of GDP in 2070. They also warn that, because of insufficient data collection, the percentage of GDP could be higher (up to 3.3 % of the GDP).³⁰ Public expenditure on long-term care was in 2016 below the EU average of 1.6 % or in 2018 below the OECD countries average of 1.5 % of GDP.³¹ Consequently, also the number of long-term care workers is among the lowest in the EU.³²

In June 2020 a new working group of experts from the Ministry of Health and Ministry of Labour was set up to prepare a reform of LTC. So far, their work has resulted in drafting Component 13 of the RRP. Besides that, the Ministry of Labour is responsible for the adoption of the LTC Strategy (in commenting procedure) and the Ministry of Health should prepare a new law on LTC.

As mentioned in the previous EDE Report, in Slovakia, residential social services largely constitute long-term care, also in cases where health care (nursing) is needed. Out of

There was a reconstruction of Government in March 2021, including change of the prime minister but in the frame of the same coalition based on national elections in 2020. New government has adopted Manifesto copying Manifesto of the previous government. Manifesto is available at https://www.nrsr.sk/web/Dynamic/DocumentPreview.aspx?DocID=494677.

Similarly, the Manifesto of the Government pledges to introduce several reforms concerning the mentioned issues, as follows: introduce new unified needs assessment system; new system of financing of social support (services and compensations) based on personal budget; long-term care – integration of health and social care; mental health reform; new legal framework and support for community-based services (outreach and outpatient) including early childhood intervention (also for socially disadvantaged children); update and unify health and social system for mobility aids, devices and assistive technologies; to continue the deinstitutionalisation of social services; promote the availability of interpretation services for people with hearing impairments; support for specialized programs in housing, education, employment and leisure and strengthen professional capacities in the system of services for children and adults with special needs; support for non-formal carers (recipients of home care allowance).

²⁹ As stated in Country report 2020, previous attempts to prepare legal framework for long-term care failed in 2019.

Ministry of Finance (2021), 'Projekcia verejných výdavkov na dlhodobú starostlivost' (máj 2021)' (Expenditure Projection for Long-term Care, May 2021), https://www.mfsr.sk/sk/financie/institut-financnej-politiky/publikacie-ifp/manualy/25-projekcia-verejnych-vydavkov-dlhodobu-starostlivost-maj-2021.html.

OECD (2020), Spending on Long-Term Care, https://www.oecd.org/health/health-systems/Spending-on-long-term-care-Brief-November-2020.pdf.

OECD/European Observatory on Health Systems and Policies (2019), *Slovakia: Country Health Profile 2019, State of Health in the EU*, OECD Publishing, Paris/European Observatory on Health Systems and Policies, Brussels, https://ec.europa.eu/health/sites/default/files/state/docs/2019 chp sk english.pdf.

1 447 (940- 2019; 947- 2018) facilities where healthcare is provided only 77 have contract with Health Insurance Companies to access additional income (EUR 3.30 / day / person), 33 in total (EUR 2 453 929 - 2019; EUR 996.177 - 2018) in 2020. 34 The total income of these facilities is EUR 514 million, revenues from health insurance accounted for only 0.5 % - EUR 2.5 million.

Follow-up health care, that enables a smooth transition from health to social care and thus helps to prevent rehospitalisation is insufficiently developed. Undersized formal long-term care leads to an excessive burden on non-formal carers, who lack support services, such as flexible working hours or respite services. In 2019, there were only 259 recipients of respite services out of 57 048 home-carers. Only 611 non-formal carers used outpatient social services in combination with home care allowance (carer is eligible for allowance only in case if PWD is using outpatient service for less than 20 hours per week, or homecare service for less than 8 hours).

4.2.2 Community based services and deinstitutionalization of social services

We highlighted in 2020 that Slovakia still relies extensively on institutional care for persons with disabilities, across different age groups, and the situation has not changed. The COVID-19 crisis highlighted problems of social services provision, including significant underfinancing, lack of professional staff, confusing funding, fragmented competencies, poor availability of community-based services, very poor physical infrastructure.³⁵ More information is available in the EDE COVID-19 Report.³⁶

According to the NGOs, the pandemic has showed that Slovakia lacks real cross-sectoral cooperation especially between the Health and Social sectors, national and regional/local levels, and among public and non-public service providers. Their concern relates to the lack of coordination, and this is because DI is not managed by a single Ministry.³⁷ Preparation of reforms planned in the Governmental Manifesto, especially the new social service Act with funding based on personal budget, has been slower because of the pandemic. Nevertheless, most reforms are incorporated in the new strategic documents – RRP component 13, National Priorities for Development of Social Services 2021-2030 and National Strategy on Deinstitutionalisation of Social Services and Substitute Child Care (adopted in 2021).

³³ Information on the request from each of three health insurance companies – based od that there were 147 signed contracts between 77 providers and three HIC.

³⁵ Rollová, L. (2020), 'Prístupné a bezpečné bývanie v kontexte sociálnych služieb' (Accessible and safe housing in social service facilities), 14 April 2020, https://npdi.gov.sk/pristupne-a-bezpecne-byvanie-v-kontexte-socialnych-sluzieb/.

Ministry of Labour, Social Affairs and Family (2021), 'Správa o sociálnej situácii obyvateľstva SR za rok 2020' (The Report on Social Situation of Inhabitants of SR in 2020), https://www.employment.gov.sk/sk/ministerstvo/vyskum-oblasti-prace-socialnych-veci-institut-socialnej-politiky/spravy-socialnej-situacii-obyvatelstva/rok-2020.html.

Ondrušová, D. – Kešelová, D. – Machajdíková, M. (2021), COVID-19 and people with disabilities in Europe: Assessing the impact of the crisis and informing disability-inclusive next steps. Country Report – Slovakia. EDE – European Disability Expertise.

SOCIA Foundation (2021), Information of NGOs for Regional Consultation of UN CRPD Committee – Slovakia, May 2021 https://www.socia.sk/wp-content/uploads/2021/08/CRPD Consultations SVK fin.pdf or Information of NGOs to ECSR, June 2021, https://www.socia.sk/wp-content/uploads/2021/08/ECSR SVK Persons-with-mental-disabilites FORUM Validity Social-Advisory-Board SOCIA.pdf.

The new National Priorities for Development of Social Services 2021-2030 were adopted by the Ministry of Labour in April 2021.³⁸ These follow up on previous document. Three preconditions for the development of social services are identified:

- creating a strategic framework for social services due to constant lack of detailed information for analyses and decision making such framework is missing;
- ensuring the financial and personnel sustainability of the social services;
- linking social services with other public services to support social inclusion.

The document sets four national priorities:

- transition from institutional to community care to ensure the availability of community-based social services in line with the needs of target groups;
- introduction of an integrated social and health care system;
- support of the interconnection of social services and informal (especially family) care as part of the system of care for persons dependent on help of another person;
- improving the quality of social services.

Concerning the National Strategy on Deinstitutionalisation of Social Services, the Slovak Government committed itself in 2011, when the previous strategy was adopted. In 2021, the government adopted by Resolution No. 222/2021 of 28 April 2021 the new National Strategy on Deinstitutionalisation of Social Services and Substitute Child Care.³⁹ The Strategy admits that after 10 years of implementation, progress in area of social services has not been sufficient. The long-term goals of the new National Strategy are updates from the previous one, with a focus on the availability of services at community level (and support of outpatient and outreach services); the synergy of the services and other support, as well as on closing large-capacity institutions (transition to community-based services). The Strategy also contains 10 medium-term objectives for social services and for substitute childcare. More detailed measures should be incorporated in the Action plans - the action plan for social services has not yet been adopted. DI in Slovakia is financed through ESF and ERDF projects (see section 6.1 later). As stated in the Strategy, during the programming period 2014-2020, EUR 248.3m were allocated via ESF, (over EUR 110 million for out-patient home care service and EUR 147 million for substitute childcare) and around EUR 144.5m via ERDF.⁴⁰

As regards children with disabilities in institutional care, Slovak legislation enshrines a minimum age of 6 under which a child cannot be placed in institutional care. Still, both UN CRPD Committee and UN CRC Committee expressed deep concern about the number of children with disabilities living in institutions.⁴¹ European Commission

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Ministry of Labour, Social Affairs and Family (2021), 'Národné priority rozvoja sociálnych služieb na roky 2021-2030' (National Priorities for Development of Social Services 2021-2030), https://www.employment.gov.sk/files/slovensky/rodina-socialna-pomoc/socialne-sluzby/nprss-fin.pdf.

See comment 28 - National Strategy on Deinstitutionalisation of the system of Social Services and Substitute Care.

⁴⁰ Idem.

Committee on the Rights of Persons with Disabilities (2016) Concluding Observations to the Initial Report of Slovakia, 17 May 2016, paras. 23 and 24 https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRPD/C/SVK/CO/1&Lang=En and Committee on the Rights of the Child. Concluding Observations on the combined

Observations on the draft Partnership Agreement for Slovakia (version 12 May 2021) in light of Youth Guarantee encourages Slovakia to consider aiming at zero children in long-term stays in institutions by 2030, instead of 'lower number of children in institutional care'. 87.4 % of children with disabilities in the substitute care are placed in institutional care (specialised groups) due to their health condition or inappropriate conditions at professional families.⁴² For more details, see Table 25 in the Annex.

In terms of early childhood intervention as another type of social service which is repeatedly mentioned in the CR in context of low availability, although the number of users is increasing every year, only 15.8 % (2 215 in 2020) out of an estimated 14 000 children with disabilities (age 0-7) have access to such services.⁴³

4.2.3 Guardianship and personal assistance for persons with intellectual disabilities

In our 2020 report we highlighted that Slovakia has not yet adopted the reform of guardianship into supported decision-making mechanisms. Any progress has been achieved in this regard, but two partial improvements have been adopted for users of social services with intellectual disabilities. Based on the initiative of several members of National Parliament and Commissioner for persons with disabilities, in May 2021, the amendment of the Act on Social Services was approved. Firstly, it forbids provider of social services or its employees to become a guardian of users with restricted legal capacity. Secondly, this law introduces a position of 'confidant person' for users of social services. The intention of the amendment was to increase observance of human rights in social services. Confidant has to be someone chosen by user. He/she should be able to contact user anytime and should be informed about important situations concerning the user by the provider.

Furthermore, in January 2021, the Regional Court in Banská Bystrica decided in the matter of not granting allowance for personal assistance to a user with intellectual disability. The main message of the judgment was that legal capacity has no impact on the right to receive allowance for personal assistance.⁴⁶

http://docstore.ohchr.org/SelfServices/FilesHandler.ashx?enc=6QkG1d%2fPPRiCAqhKb7yhskJo1IBh Mr5sq%2bdAoPX0B%2fun6w3GuJfElvddW5%2beyns8cxWentbxSJJ7%2ffP14Xd9%2b6pn8%2b%2b WQVtosf1bQZFaWc1J4wKvAphaNDY%2fMJ%2fl8xue.

⁴⁵ Approved amendment of the Act No. 448/2008 Coll. L. on Social Services: https://www.nrsr.sk/web/Dynamic/DocumentPreview.aspx?DocID=491971.

third to fifth periodic reports of Slovakia, para. 37 (c) and (d),

⁴² Ministry of Labour, Social Affairs and Family of the Slovak Republic (2021), 'Ročný výkaz o poskytovaní starostlivosti a výchovy deťom v centre pre deti a rodiny' (Annual fact-sheet on the provision of substitute care for children in Centres for children and families), https://www.employment.gov.sk/sk/ministerstvo/vyskum-oblasti-prace-socialnych-veci-institut-socialnej-politiky/v5/.

For more details, see Table 26 in the Statistical Annex, and also 'Správa o stave včasnej intervencie na Slovensku' (Report on the state of early intervention in Slovakia), https://asociaciavi.sk/wp-content/uploads/2019/09/Country-Report-on-ECI Slovakia.pdf.

Ondrušová, D. – Kešelová, D. – Machajdíková, M. (2020), European Semester 2020-2021 - Country fiche on disability equality: Slovakia. EDE – European Disability Expertise, https://ec.europa.eu/social/main.jsp?pager.offset=20&catld=1532&langld=en&moreDocuments=yes.

⁴⁶ Forum for Human Rights (2021), *Success in the case concerning personal assistance*, February 2021, https://forumhr.eu/uspech-v-pripade-tykajucom-sa-osobnej-asistencie/.

4.2.4 Lack of accessible public housing

Finally, as also mentioned in the previous EDE report, the Alternative report of the Commissioner (2019) pointed to the still persistent lack of accessible housing. In fact, between 2012-2016, only 0.42 % of newly constructed apartments in the public sector were built as accessible for wheel-chair users.⁴⁷ When considering the fact that in Slovakia, the share of public housing is significantly below the average of the EU (according to the EU SILC 2019, 1.4 % in the SR, against 9.1 % in the EU),⁴⁸ it is very difficult for persons with physical disabilities to find accessible and affordable housing.

These persons may apply for the cash-benefit for adaptation of dwelling (regulated under Act No. 447/2008 Coll. on direct payments for compensation for the consequences of severe disabilities as amended), which is however means-tested. In 2020, the benefit was provided to 1 051 persons.⁴⁹ However, the new National Disability Programme 2021-2030 does not address this issue. One of the challenges is that the primary responsibility in ensuring public housing lies with local municipalities, and each may have their own strategy. The Ministry of Transport and Construction has been preparing new Housing Policy until 2030 (in commenting process).⁵⁰ One of the planned measures is to motivate local governments to build affordable accessible public housing.

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⁴⁷ Ministry of Labour, Social Affairs and Family (2020), 'II. Správa o plnení opatrení vyplývajúcich z Národného programu rozvoja životných podmienok osôb so zdravotným postihnutím na roky 2014-2020 za roky 2016-2017' (2nd Report on fulfilment of provisions related to the National disability program for years 2016-2017), http://www.rokovania.sk/Rokovanie.aspx/BodRokovaniaDetail?idMaterial=27658.

EU SILC: Distribution of population by tenure status, type of household and income group - EU-SILC survey, https://ec.europa.eu/eurostat/databrowser/view/ILC_LVHO02_custom_1279562/default/table?lang=e

Ministry of Labour, Social Affairs and Family (2021), 'Správa o sociálnej situácii obyvateľstva za rok 2020' (Report on the social situation of Inhabitants for year 2020), https://www.employment.gov.sk/sk/ministerstvo/vyskum-oblasti-prace-socialnych-veci-institut-socialnej-politiky/spravy-soc-situacii.html.

Ministry of Transport and Construction (2021), 'Návrh: Bytová politika do roku 2030' (Proposal: Housing Policy until 2030), https://www.socia.sk/wp-content/uploads/2021/08/Bytova-politika-SR-do-2030_v06.pdf.

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

In 2016, the UN CRPD Committee made the following recommendations to Slovakia:

Article 24 UN CRPD addresses Education.

- '68. The Committee recommends that the State party pay attention to the links between article 24 of the Convention and targets 4.5 and 4 (a) of the Sustainable Development Goals. The Committee also recommends that the State party:
- (a) Introduce an enforceable right to inclusive and quality education in the Education Act, including by defining inclusive education in accordance with the Incheon Declaration on education 2030: towards inclusive and equitable quality education and lifelong learning for all of the United Nations Educational, Scientific and Cultural Organization, and Sustainable Development Goal No. 4;
- (b) Adopt a legally binding plan for the transition from segregated schools into inclusive education at all levels, including by setting timelines, identifying responsible authorities, and allocating adequate resources;
- (c) Ensure that all children with disabilities who so require have access to personal assistance and allocate resources for this purpose;
- (d) Ensure available, accessible and inclusive preschool education for all children with disabilities:
- (e) Put an end to the process of placing Roma children in segregated schools for children with disabilities on the basis of their ethnic background.

The most recent development is the 2019 List of Issues requesting the following:

- "23. Please provide information on:
- (a) Steps taken to develop, adopt and implement a strategy on quality inclusive education, and a system providing support for students with disabilities, including with intellectual or psychosocial disabilities, in mainstream education. Please include information on the benchmarks, baselines and indicators used for the implementation of the strategy and on the resources allocated to its implementation;
- (b) Availability and accessibility of inclusive pre-school education for children with disabilities, including children with intellectual or psychosocial disabilities, and the number of children with disabilities enrolled in inclusive mainstream schools, in special schools and in other segregated school units at all levels of education, as a proportion of the total number of children with disabilities enrolled in school, disaggregated by sex, national or ethnic origin, and urban or rural settings;
- (c) The human, technical and financial resources allocated to provide students with disabilities with individualized support, and on the applicable accessibility standards within inclusive education, including those concerning classrooms, playgrounds, sanitary facilities, school transportation, educational material, information and communication technologies, pedagogy, services and equipment;
- (d) Measures taken to promote and ensure the training and hiring of teachers with disabilities, and the training of teachers in sign language, orientation and mobility skills.'

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 27: Early school leaving rates, by disability status (aged 18-24 and 18-29) indicates early school leaving rates disaggregated by disability status in Slovakia. Youth with disabilities (aged 18-24) tend to leave school significantly more than the peers without disabilities of the same age groups(and this is reinforced by widening the sample size to age 18-29). At national level the gaps were narrower compared to EU level in both age groups. Table 28: Completion of tertiary or equivalent education (aged 30-34 and 30-39) 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).

Low education attainment in national statistics

- As in previous years, the statistical office does not provide the national education attainment level data of population with disabilities aged 18-24 (respectively 18-29) to compare properly early school leaving rate from national LFS with EUSILC data. Due to the methodological reasons the term 'low education' is used in further text. The following analysis regards the age group of 15-29-year olds.
- The national LFS data suggest the decrease of number and share of economically active persons with low education attainment between 2016 and 2018 was followed by steeper annual increase by 0.9 percentage points (to 848 persons in 2019). The total number and share of economically active PwD aged 15-29 years decreased steadily between 2014 and 2019 (from about 10 thousand in 2014 to less than 6 thousand persons in 2019).⁵¹
- An important fact is the share of economically inactive persons with disabilities aged 15-29 with low education. In 2019 they represented only 4.9 % (about 15 600 persons) of all economically inactive persons with disabilities. Their share of all economically inactive PwD of the same age decreased annually by 2 percentage points compared to 2018 but still stayed high at 69 %.⁵²

In 2019 this extremely high share of low educated young people with disabilities can be caused mainly by their ongoing student status. It can be assumed that their education continues and the attainment level would increase in the following years.

Tertiary education

Based on the national LFS data, the proportion of 30-39-year-olds with tertiary education among total economically active population with disabilities declined despite overall annual increase of economically active PwD in 2019. The number of economically active PwD with tertiary education aged 30-39 declined by 1.2 percentage points (by 930 persons) to 2 798 persons (3.3 % of economically active PwD) in 2019. Besides, their share in the same age category at 19.8 %

⁵¹ See Table 29 in the Statistical Annex.

⁵² See Table 30 in the Statistical Annex.

- in 2019 means only a slight annual decline by 1 percentage points but more significant decline by 7.8 percentage points since 2016.⁵³
- Besides, within the economic activity the proportion of working persons with disabilities aged 30-39 with tertiary education was 3.1 % from all PwD. In 2019 their share on persons with disabilities in the same age was 19.7 %, which means an annual decline by 3.3 percentage points.
- In 2019 the prevalence of unemployed PwD with tertiary education aged 30-39 was 4.8 % among all unemployed PwD and 19 % among the unemployed of the same age. It means an annual steep increase by about 11 percentage points.⁵⁴
- On the other hand, the share of economically inactive persons with disabilities aged 30-39 with tertiary education was less than 1 % in 2019 as in previous years. It makes about 7 % of economically inactive persons with disabilities of the same age which represents increase by about 2.3 percentage points compared to 2018.⁵⁵

Overall situation in inclusive education:

- From the statistical perspective, the raising trend of number of children and pupils with disabilities and other special educational needs (behaviour disorders and developmental learning difficulties) continued in 2020. It has increased by almost 1.5 times between 2006 and 2020 from 47 764 to 70 810 persons.⁵⁶
- Their number in mainstream education increased 2.5-times since 2006; there were 41 335 pupils with disabilities and other special educational needs attending mainstream schools in the school year 2020/2021 compared to 16 512 in 2006. As in previous years, this increase in 2020 was mainly due to the steep increase of number of pupils identified with autism (15.1 times), with communication impairments (4.1 times) and with developmental learning difficulties (2.6 times). The number of pupils with sensory impairments (visual, hearing) increased approximately 1.4 times.⁵⁷
- Concerning the level of education, some differences can be found between the attendance of mainstream and special schools. As it is seen from Table 35 ⁵⁸ in the Annex, at pre-primary level the preference of special education stream was steadily increasing between 2006 and 2019 (from 797 children in 2006 to 1 785 in 2019) followed by slight annual decrease in 2020 (to total of 1 762 children). There was a steep annual increase in attendance of mainstream pre-schools (by 291 children⁵⁹) in 2020, however the special pre-schools stayed preferred in 2020, too. Pre-primary level is the only level in which the attendance of children with disabilities is more frequent in special than mainstream education stream.
- The number of pupils at mainstream primary schools increased almost 2.2 times between 2006 and 2020 (to more than 30 000 pupils) while the number of pupils at special primary schools was about 22 300 in 2020 after several decreases in previous years. The number of students at secondary mainstream schools

⁵³ See Table 29 in Statistical Annex.

⁵⁴ See Tables 31 and 32 in Statistical Annex.

⁵⁵ See Table 30 in the Statistical Annex.

⁵⁶ See Table 33 in Statistical Annex.

⁵⁷ See Table 34 in the Annex.

⁵⁸ See Table 35 in the Annex.

According to the CVTI data, this increase was caused mainly by the steep increase of children with autism (by 68 %) and children with communication disorders (by 70 %) in mainstream pre-schools.

- increased five times between 2006 and 2020 (to 10 346 students). Both rising trends depend on the type of disability.
- In average, between 2006 and 2020 about 80 % of pupils attending special schools at primary education level were categorised as pupils with intellectual disability without other combinations of disabilities. Their share (more than 82 %) was the highest between 2008 and 2015. Between 2015 and 2020 it decreased by almost 9 percentage points but still remained above 70 %. In average, almost two thirds of all pupils with disabilities at special schools attended Variant A for pupils with light intellectual disabilities.⁶⁰

5.2 Analysis of education policies relevant to the Semester

For reference, see also the 2021 Recovery and Resilience Plan for Slovakia and the National Programme on Improving the living conditions of persons with disabilities for 2021-2030.

With regards to the 2021 Recovery and Resilience Plan, The Zero Action Plan on Inclusive Education for 2021 and National Disability Programme for 2021-2030, following main issues are most relevant in education of persons with disabilities:

- inclusive preschool education;
- special educational needs individual approach;
- placement in segregated schools and low educational attainment;
- the pandemic and its impact on education.

5.2.1 Inclusive preschool education

The Recovery and Resilience Plan⁶¹ suggests ensuring conditions to implement compulsory pre-primary education for all children aged five and introduction of a legal right for a place in pre-school for all children aged three. The aim is to increase the share of children aged three and up in pre-primary education. The majority of measures are focused on children from socially disadvantaged background, however children with disabilities are included in some measures. These include:

- building pre-school capacities (premises);
- new support measures for children with disabilities and children with social disadvantages (these include enhancing pre-school staff - for example school nurses, education assistants to help teachers – 'pomocní vychovávatelia');
- creation of additional methodological guidelines to State educational programme in pre-primary education which will contain more differentiated approaches in education of specific groups of children.

⁶⁰ See Table 36 in the Statistical Annex.

Ministry of Finance of the Slovak Republic (2021), 'Plán obnovy a odolnosti' (Recovery and Resilience Plan), https://www.planobnovy.sk/kompletny-plan-obnovy/.

In fact, according to the Spending Review (2020)⁶² children with disabilities have only limited access to pre-primary education. For example, in the school year 2017/2018, only 67 % of pre-school aged children (ages 5-6 years) attended pre-primary education, compared to 85 % of their peers without disabilities. According to the current legislation. mainstream pre-schools are not obliged to accept a child with disability if no proper conditions are created. Also, the number of children with special needs is limited to two per one class. According to the representative research,63 only 23 % of pre-primary teachers and other professional employees feel prepared for education of children with disabilities. However, the Spending Review (2020) assumes that compulsory pre-primary education from the age of five increases attendance of children with disabilities, too. The Spending Review (2020) also suggests to expand continuing education programmes for pre-school teachers focused on acquiring skills to educate children with disabilities and to carry out the research focused on the implementation of disability issues in teachers' qualification education.64 65

Special educational needs: from categories of special needs to individual approach

Category and rather medical diagnosis-based approach in special educational needs concept has been criticised by various experts. In particular, the research⁶⁶ found out that current concept does not allow the individual approach to each child within the same category of disability but with different educational needs.

Moreover, current concept often focuses in practice on the barriers on the side of the child and family. It does not reflect the barriers on the side of the system (for example, when a pupil with reduced mobility is not accepted to the particular school because the school cannot provide barrier-free environment). Furthermore, current concept does not allow combinations of multiple difficulties, disadvantages or disabilities. For example, the research showed, that it is a problem to categorise the child with multiplication of disadvantages such as attention deficit hyperactivity disorder (ADHD) and developmental learning difficulties. The special education professional has to choose one disadvantage to include the child into the particular category.

Besides,, some parents refuse recognition of special educational needs of their child. It is considered as 'labelling' among some parents.⁶⁷ They are afraid of stigmatisation of their child and its consequences for education (for example, facing the barrier in access to mainstream school, reducing the educational requirements and expectations from teachers towards the child with disability/difficulty or teachers' attitudes towards some 'new' difficulties). Provision of support measures is conditioned by the particular category of special educational need and the status of 'integrated pupil'. Except of stigmatisation,

⁶² Hellebrandt, T. et al. (2020), 'Revízia výdavkov na skupiny ohrozené chudobou alebo sociálnym vylúčením. Záverečná správa' (Revision of expenditure on groups at risk of poverty or social exclusion. Final Report), MŠVVŠ SR, https://www.minedu.sk/data/att/15944.pdf.

⁶³ To dá rozum (2019) in Hellebrandt et al. (2020), https://www.minedu.sk/data/att/15944.pdf.

⁶⁴ Hellebrandt, T. et al. (2020).

⁶⁵ Ondrušová, D. – Kešelová, D. – Machajdíková, M. (2020), European Semester 2020-2021 - Country fiche on disability equality: Slovakia.

⁶⁶ Hall, R., Dráľ, P., Fridrichová, P., Hapalová, M., Lukáč, S., Miškolci, J., Vančíková, K. (2019), 'Analýza zistení o stave školstva na Slovensku' (The State-of-the-art Analysis on the School System in Slovakia), To dá rozum, Bratislava: MESA10, https://analyza.todarozum.sk/analyza-zisteni-o-staveskolstva-na-slovensku.pdf.

⁶⁷ Hall, R., Dráľ, P., Fridrichová, P., Hapalová, M., Lukáč, S., Miškolci, J., Vančíková, K. (2019).

this approach reveals also another issue. There was an anecdotical experience in 2019⁶⁸ which suggests that the current concept has not been able to systematically offer certain support measures at school for a child who did not reach the criteria for the diagnosis special educational need category but has some light difficulties in the educational process. In this case the support measures were offered only thanks to the individual initiative of the class teacher (allowing longer time for the school tests) and the special education professional in the counselling centre.

To solve these issues, the RRP (2020) aims at re-definition of the whole concept to reach the individual approach in meeting the specific needs of children and pupils with disabilities in educational process and suggests creating the catalogue of support measures. The new definition will be oriented on children and pupils facing the barriers in access to education and learning. The definition will be followed by the vertical model of support measures (catalogue of support measures). It will be based on the assessment of level of support needed for education.

This reform, financed from the RRP, is reflected in the Zero Action Plan on Strategy of Inclusive Access to Education for year 2021 as the measure 'To define support measures in education'. A planned outcome is a model of eligible support measures based on an assessment of the level of support needs of a child or pupil to develop his or her educational potential (including gifted pupils). The responsible authority is the National Institute of Education (ŠPÚ).⁶⁹

As regards continuing education of teachers, the Methodology and Pedagogy Centre provides courses on inclusive education issues within the professional development of teachers and school professionals for the school year 2021/2022. The courses are focused on creation of inclusive school culture and environment or on implementation of inclusion at school.⁷⁰ These courses are implemented within the National Project Professional Development of Teachers (see section 6.1 later).

5.2.2 Segregation in primary education and low educational attainment

According to the Analysis of findings on the state of education in Slovakia (2019), the share of primary school pupils educated in special stream is the highest among European countries. About 5.88 % pupils of all primary school pupils are educated in special education stream in Slovakia. The research findings (Analysis, 2019) revealed that there is a strong preference of education of pupils with special educational needs in special education stream among teachers and school professional staff if mainstream schools are not prepared for inclusion. However, they agreed with the importance of inclusion. Also the preference of particular educational stream differs by type of disability. According to teachers and other school professionals, segregated education is more beneficial for children with intellectual disabilities, autism, sensory impairments, behavioural or

⁶⁹ Ministry of Education, Science, Research and Sport (2021), 'Nultý Akčný plan Stratégie inkluzívneho prístupu vo výchove a vzdelávaní na rok 2021' (Zero Action Plan on Strategy of Inclusive Access to Education for year 2021), https://www.minedu.sk/data/att/17994.pdf.

⁶⁸ An individual experience from mainstream primary school in autumn 2019.

Methodology and Pedagogy Centre (2021), 'Katalóg programov vzdelávania, učiteľských fór a poradenských aktivít na školský rok 2021/2022' (Catalogue of educational programmes, teachers' fora and counselling activities for school-year 2021/2022), https://mpc-edu.sk/files/cis article/00000021/00001467 katalog-mpc-2021-2022.pdf.

communication disorders and with severe disabilities. Moreover, the research revealed that the transition from special education stream to mainstream education is difficult. Only 1.7 % of pupils at special schools transferred to mainstream education in the school year 2018/2019.⁷¹

Segregation refers mainly to the placement to special primary schools of pupils from socially disadvantaged background incorrectly diagnosed as persons with intellectual disability. According to the Analysis (2019) about 85 % pupils with the diagnosis of intellectual disability are educated in segregated environment (special schools or special classes at mainstream schools). This research revealed that only 15 % of children with intellectual disability are individually integrated in mainstream schools. It is the lowest share compared to other types of disabilities. Moreover, the research outcomes show that it is difficult for mainstream schools to educate integrated child with light intellectual disability as he/she follows different learning plan and content (Variant A).⁷² Despite that, 70 % of teachers in the research preferred mainstream school for these pupils. Besides, Variant A is followed regardless of pupil's individual skills and abilities. This learning plan allows to gain only primary education level (ISCED 1) although the pupil finishes all nine years of primary school. Thus, he/she cannot continue at secondary school to gain upper secondary education according to his or her individual knowledge, skills and abilities. Some individual cases give an example of this approach.⁷³ With the support of SOCIA Foundation, a case was submitted to the UN Committee on the Rights of Persons with Disabilities for permanent discrimination from regular secondary school education on the basis of disability and for violation of the right to inclusive education.⁷⁴

To eliminate incorrect diagnosis, there have been some changes in the diagnostics process in recent years. According to the Analysis (2019)⁷⁵ some school counselling centres follow the guidelines on diagnostics of light intellectual disability provided by the Research Institute of Child Psychology and Patopsychology for local school counselling centres. These guidelines help centres to make correct diagnosis on the basis of suitable diagnostics methods.

The RRP (2020) proposes the reform of the counselling and prevention system, implementation of measures to prevent early school leaving and adjustments of apprentices offering only lower secondary vocational level of education. This level of education enables no access to higher education and only a limited access to employment.

Although the measures proposed in RRP (2020) to reform the system of these apprentices refer mainly to persons from socially disadvantaged background (mostly from

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⁷¹ Hall, R., Dráľ, P., Fridrichová, P., Hapalová, M., Lukáč, S., Miškolci, J., Vančíková, K. (2019).

Variant A is a special learning plan for pupils with light intellectual disability used at special primary schools. Also pupils with light intellectual disability integrated at mainstream schools follow this plan.

Vitalia Bella (2020), 'Chce študovat' za chovateľa, ale náš školský zákon mu to neumožňuje. Len preto, že má mentálne znevýhodnenie' (He wants to study as breeder, but he cannot due to our educational act, as he has an intellectual disability), Denník N, 1 August 2020, https://dennikn.sk/1988941/chce-studovat-za-chovatela-ale-nas-skolsky-zakon-mu-to-neumoznuje-len-preto-ze-ma-mentalne-znevyhodnenie/.

Nadácia Socia (2021), 'Podpora podania na Výbor OSN pre práva osôb so zdravotným postihnutím' (Support for submission to the UN Committee on the Rights of Persons with Disabilities), https://www.socia.sk/podpora-podania-na-vybor-osn-pre-prava-osob-so-zdravotnym-postihnutim/.

⁷⁵ Hall, R., Dráľ, P., Fridrichová, P., Hapalová, M., Lukáč, S., Miškolci, J., Vančíková, K. (2019).

marginalized Roma communities), it can be assumed that the reform will be beneficial also for persons with disabilities (particularly for persons with light intellectual disability).

To reflect these issues the Ministry of Education, Science, Research and Sport (MŠVVaŠ) of the SR started a large reform on 25 August 2021.⁷⁶ Three amendments were approved by the government and proposed to the National Council of the SR for approval: amendment of the Act No. 245/2008 Coll. on Education (School Act),⁷⁷ amendment of the Act No. 138/2019 Coll. on pedagogical employees and professional employees⁷⁸ and amendment of the Act No. 61/2015 Coll on vocational education and training.⁷⁹

From the disability perspective, the reform proposes the main changes as follows:

- introduction of the term 'inclusive education': defined as 'joint education of children, pupils, students or participants of education provided on the basis of equal opportunities and respect for their educational needs and individual specifics and supporting their active involvement in educational activities of school or school facility'. Inclusive education is also set as one of the principles of education for the first time in the educational legislation of Slovakia.
- increasing availability of the counselling system for all pupils and parents: The counselling system will be divided into five levels from general basic counselling services to highly specialised counselling.⁸⁰
- improvements in lower secondary vocational education: This educational level is implemented at practical schools attended also by pupils with disabilities (especially by pupils with light intellectual disabilities). It does not allow to continue at secondary schools to gain upper secondary education (apprentice or school leaving exam). According to the proposal, pupils with lower secondary vocational education will have a possibility to take a commissional exam or participate in the whole additional course to reach the lower secondary education to continue at mainstream secondary schools.⁸¹ It is expected that this proposal will be helpful for all persons with disabilities attending Variant A at primary schools, continuing their education at practical schools.

⁷⁶ Ministry of Education (2021), 'Položili sa základy reformy školstva' (The basics of school reform were introduced), Press Release, https://www.minedu.sk/polozili-sa-zaklady-reformy-skolstva/.

'Návrh zákona, ktorým sa mení a dopĺňa Zákon č. 138/2019 o pedagogických zamestnancoch a odborných zamestnancoch v znení neskorších predpisov' (Proposal of the Amendment of the Act No. 138/2019 Coll. L. on Pedagogical Employees and Professional Employees), https://rokovania.gov.sk/RVL/Material/26284/2.

⁷⁹ 'Návrh zákona, ktorým sa mení a dopĺňa zákon č. 61/2015 Z. z. o odbornom vzdelávaní a príprave v znení neskorších predpisov' (Proposal of the Amendment of the Act No. 61/2015 Coll. L. on Vocational Education and Training), https://rokovania.gov.sk/RVL/Material/26283/2.

Ministry of Education (2021), 'Položili sa základy reformy školstva' (The basics of school reform were introduced), Press Release, https://www.minedu.sk/polozili-sa-zaklady-reformy-skolstva/.

61 'Dôvodová správa k návrhu novely zákona 245/2008 Z. z. o výchove a vzdelávaní' (Justification Report to the Proposal of the Amendment of the Act No. 245/2008 Coll. L. on Education), https://rokovania.gov.sk/RVL/Material/26285/2.

^{&#}x27;Yavrh zákona, ktorým sa mení a dopĺňa Zákon č. 245/2008 Z. z. o výchove a vzdelávaní (školský zákon) v znení neskorších predpisov' (Proposal of the Amendment of the Act No. 245/2008 Coll. L. on Education (School Act)), https://rokovania.gov.sk/RVL/Material/26320/1.

These main changes are also included as the legislative measures set in the Zero Action Plan on the Strategy of Inclusive Access to Education for the year 2021.⁸²

5.2.3 The pandemic and its impact on education

The State school inspection has conducted a research⁸³ on the distant education of pupils with disabilities during the second wave of the pandemic. The sample consisted of all 181 special schools in Slovakia, total of 140 schools replied with total of 12 599 pupils. The research focused on distant education at special schools. The sample consisted of special primary schools for pupils with intellectual disabilities (50 %), special primary schools for pupils with multiple disabilities (41.4 %) and special primary schools for pupils with other than intellectual disability (8.6 %). The outcomes were disaggregated by the type of family environment (standard socioeconomic background, marginalized Roma communities and families in material need) as the socioeconomic status has a significant impact on education in Slovakia. It turned out that during the second wave of the pandemic, almost 61 % of schools were providing education by combination of online and offline form. About 29 % provided only offline distant education. Full online classes were provided by 10 % of schools.

The type of distant education (online / offline) relates to the type of disability and socioeconomic background of families. Almost 70 % of pupils with intellectual disabilities from vulnerable environment were educated mostly by offline form, compared to about 40 % from standard socioeconomic background.

About 50 % of pupils with multiple disabilities from vulnerable family background were educated only offline, compared to about 20 % from standard socioeconomic environment. Data on pupils with other than intellectual disability are not reported.

About 12.4 % of pupils from these 140 schools did not join any form of distant education. Main reasons were lack of technical equipment and internet access, lack of space for education and lack of parental support. In its Component 6 'Accessibility, development and quality of inclusive education at all levels', the RRP aims to address these issues by introducing measures to reduce the impact of the pandemic on pupils at primary and secondary schools, including tutoring of pupils in the risk of low achievement or failure due to the limited possibilities to join distance education.

State School Inspection (2021), 'Zistenia z dotazníkového prieskumu v základných školách pre žiakov so zdravotným znevýhodnením o priebehu vzdelávania v školskom roku 2020/2021' (Findings from a questionnaire survey at primary special schools on distant education in the school year 2020/2021]), https://www.ssi.sk/wp-content/uploads/2021/08/Zistenia_dotaz_R_ZS_ZZ_20210830.pdf; 'Vzdelávanie žiakov so zdravotným postihnutím počas pandémie' (Education of pupils with disabilities during pandemic), https://www.ssi.sk/2021/08/24/vzdelavanie-ziakov-so-zdravotnym-znevyhodnenim-pocas-pandemie/.

Ministry of Education, Science, Research and Sport (2021), 'Nultý Akčný plan Stratégie inkluzívneho prístupu vo výchove a vzdelávaní na rok 2021' (Zero Action Plan on Strategy of Inclusive Access to Education for year 2021), https://www.minedu.sk/data/att/17994.pdf.

6 Investment priorities in relation to disability

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

6.1.1 ESIF in the employment area

National projects: Support of Employment of Persons with Disabilities – 3 and 4 (*Podpora zamestnávania občanov so zdravotným postihnutím* – 3 a 4).⁸⁴

The national project 3 was implemented since January 2015 to December 2019, the national project 4 is supposed to last from October 2019 to November 2023. and is operated by the Central Office of the Labour, Social Affairs and Family. Both projects cover all Slovak regions except of the Bratislava region.

The projects cover expenses of active labour market measures for persons with disabilities. The Table 16 in the Statistical Annex shows the number of people with disabilities who benefited from these projects in 2018 and 2019, as well as the total expenses spent for given ALMPs (incl. sources from the state budget).

The project has been implemented by the Central Office of Labour, Social Affairs and Family, since September 2019, to provide two types of subsidies to social integrative enterprises: a placement subsidy (see section 3.2) and compensation subsidy (including wage subsidies and compensation for additional costs related to employing persons with disabilities). Until the end of 2020, 166 enterprises received compensation subsidies and two enterprises received placement subsidy.⁸⁵

6.1.2 ESIF in social policies

National project: Deinstitutionalisation of social care facilities – Support of transformational teams (OP LZ NP 2018/4.2.1/01) –NP DI-2.

- Total ESF allocation: EUR 7.14 million.
- The implementation of the project has started in October 2018. The project is implemented in the partnership of the Implementation Agency of the Ministry of Labour, Social Affairs and Family, Council for Social Work Counselling, Slovak University of Technology in Bratislava Centre of Design for All, and Slovak Union of Supported Employment. Each of the partners is responsible for one of the dimensions of the project social services, accessibility of physical environment, access to the labour market. It is expected that more than 90 institutions providing residential social services will participate in the project, for which the transformation

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For more information see: https://www.upsvr.gov.sk/europsky-socialny-fond/narodne-projekty-v-programovom-obdobi-2014-2020/narodny-projekt-podpora-zamestnavania-obcanov-so-zdravotnym-postihnutim-4.html?page_id=944278.

Ministry of Labour, Social Affairs and Family of the Slovak Republic (2021), 'Správa o sociálnej situácii obyvateľstva Slovenskej republiky za rok 2020' (Report on the Social Situation of Population in the Slovak Republic for year 2020), https://www.employment.gov.sk/sk/ministerstvo/vyskum-oblasti-prace-socialnych-veci-institut-socialnej-politiky/spravy-soc-situacii.html.

plans should be prepared and implemented.⁸⁶ In August 2021, 60 institutions have been involved and the third call is open now.⁸⁷

National project: Support of availability and the development of outreach home-care service⁸⁸

- Total ESF allocation: EUR 4.9 million.
- The main objective of this project as well as its two previous editions is to support
 provision of home care services to care dependent citizens, and thus prevent their
 institutionalisation. This project is especially focused on the support of availability of
 home-care services in small villages. The project is implemented by the
 Implementation Agency of the Ministry of Labour.

Open call: Home-care service support⁸⁹

- Total ESF allocation: EUR 55 million.
- This call was open in July 2021. It is open for all registered providers of home-care social service. First round was closed on July 27 and requested allocation was already exceeded in three of eight regions.⁹⁰

National project: Support of social inclusion of selected groups of people with disabilities⁹¹

- Total ESF allocation: EUR 4.7 million.
- The project is implemented from October 2021, by the Ministry of Labour, Social Policy Section. National project aims to create conditions for setting up systemic support for selected groups of persons with disabilities with an emphasis on persons with intellectual disabilities and persons with autism spectrum disorders. The main goal of the project is to support the inclusion of these people and improve their living situation in line with the UN CRPD by improving the quality of professional services, especially in the field of social and employment services.

Central Office of Labour, Social Affairs and Family (2018), 'Informácia o plnení opatrení Stratégie deinštitucionalizácie systému sociálnych služieb a náhradnej starostlivosti v Slovenskej republike za rok 2018' (Information on the fulfilment of measures of the National Strategy on Deinstitutionalisation of the System of Social Services and Substitute Care for year 2018), https://rokovania.gov.sk/RVL/Material/23483/1.

For more details on this project see: https://www.nptos.gov.sk/o-projekte/zoznam-poskytovatelov-opatrovatelskej-sluzby-zapojenych-do-np-tos/.

For more details on this call see: https://www.mpsvr.sk/sk/esf/programove-obdobie-2014-2020/dopytovo-orientovane-projekty/socialne-zaclenenie/vyzva-op-lz-dop-2021/8-1.1/01/.

Ministry of Labour, Social Affairs and Family: Notice of available allocation after 1. round, https://www.mpsvr.sk/files/slovensky/esf/op-ludske-zdroje/vyzvy-2021/pos/vyzva-pos-ii-oznamenie-alokacia-1-kolo.pdf.

⁹¹ Ministry of Labour, Social Affairs and Family: https://www.eufondy.sk/data/files/4190_op-lz_2021_2_4_zamer-np-podpora-zaclenovania.pdf.

⁸⁷ 'Zoznam rezidenčných zariadení sociálnych služieb zapojených v národnom projekte: Deinštitucionalizácia zariadení sociálnych služieb – Podpora transformačných tímov' (List of residential care facilities participating in the national project: Deinstitutionalisation of social care facilities – Support of transformational teams), (OP L'Z NP 2018/4.2.1/01). Available at: https://npdi.gov.sk/o-projekte/zapojene-subjekty/.

ERDF open call: Support for the provision of new and existing social services and social protection of children and social guardianship in facilities at the community level.

This call was included in the indicative timetable of calls already in February 2020 and planned on May 2020 with allocation of EUR 47 million.⁹² However, the COVID-19 pandemic has postponed preparation of the call. Moreover, Slovakia has reallocated finances from ERDF to the ESF during the summer 2020. This reallocation has affected also Priority axis 2 in ERDF Operation programme IROP. Allocation for this call was decreased to EUR 26 million (including nursery for children up to 3 years).⁹³

Operational Programme Human Resources open call: Support of Deinstitutionalisation of social service facilities⁹⁴

- Total ESF Allocation: EUR 2.96 million.
- This call is designed for service providers involved in the DI process via the national project, to enable them to implement their transformational plans. The support covers additional consultations and the expenses for a position of transformation manager.

Operational Programme Human Resources open call: Development of new devices supporting social integration of people with disabilities.

- ESF total allocation: EUR 1.977 million.
- The call was open from 3 November 2017 to 15 October 2019. Altogether, 23 projects were granted funding within this call, including the development of special software for children with autism, or first aid bracelet.⁹⁵ According to public informational system on EU funds, five projects were terminated before completion.⁹⁶

National Project: Support of Universal Design⁹⁷

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⁹² Ministry of Regional development (2020), Indicative calls schedule for year 2020, version 2. February 2020, https://www.mpsr.sk/download.php?fID=18593.

Ministry of Regional development: Indicative calls schedule for year 2021, version 5. June 2021. https://www.mpsr.sk/aktualne/indikativny-harmonogram-vyziev-na-predkladanie-ziadosti-o-nenavratny-financny-prispevok-irop-rok-2021-verzia-5/16839/.

For more details, see: https://ia.gov.sk/sk/esf/programove-obdobie-2014-2020/dopytovo-orientovane-projekty/socialne-zaclenenie/vyzvy-op-lz-dop-2021/4-2.1/01/. Implementing Agency of the Ministry of Labour, Social Affairs and Family of the Slovak Republic (2017), 'Vývoj nových zariadení podporujúcich sociálnu integráciu osôb so zdravotným postihnutím' (Development of new devices supporting social integration of people with disabilities), https://ia.gov.sk/sk/dopytovo-orientovane-projekty/vyzvy/op-lz-dop-20174.1.html.

For more details see: <a href="https://www.itms2014.sk/prehlad-projektov/projekty?ff=09hr3pUY5g-TkZi2uKyGVP4ww2c_3qW_I2LA3NcQC0FqPhQF900dbUihckwENelakJHmCvwd1XkK2uIKXLEgI1Rqg-KY52ZoEFkTRyZZBpuA5LMBbnT-sBTcgOVrTMs0hrQI-r7YcXb7zeBVr3PkQ4qwHjJy7ljhKahhsYpLzVJrzYHcSAYEUidQTDx6ymhzA9YdZwACfhtYrEqcjMOJHxMQOQkGe3IPBtnNHJi83aevR47D3lawm3Nnnym9Ab5oKc4nVcjkNureDlcI2xzEkk.</p>

^{97 &#}x27;Projekty CEDA FAD STU' (Information about national project Universal Design Support), https://www.fa.stuba.sk/sk/pracoviska/ceda-vyskumne-a-skoliace-centrum-bezbarieroveho-navrhovania/projekty-ceda-fad-stu.html?page_id=3100.

- ESF total allocation: EUR 1.235 million.
- The aim of the research project implemented by Slovak Technical University is to examine the application of accessibility legislation and universal design abroad and to propose ways to implement accessibility and universal design of buildings and public spaces in accordance with Articles 2 and 9 of the UN Convention on the Rights of Persons with Disabilities in the Slovak Republic.

In addition to these, we have mentioned four projects supported in a call 'Digital Inclusion' within the Operational Programme Integrated Infrastructure, in the EDE country report on Digitalisation and digital transformation. Total allocation is €14 748 million.⁹⁸

6.1.3 ESIF in the educational area

National project: Helping Professions in education of children and pupils II [Pomáhajúce profesie v edukácii detí a žiakov II]^{99 100}

- The project is implemented by the Methodology and Pedagogic Centre from June 2020 to December 2022 in all regions in Slovakia within the Operational Programme Human Resources, the Priority axis 1. Education.
- The area of intervention focuses on reducing and preventing early school leaving and the support of equal access to quality pre-primary, primary and secondary education.
- The specific goal 1.1.1. is to increase inclusiveness and equal access to quality education and to increase the school outcomes and competencies of children and pupils.
- Total allocation is EUR 82.14 million. The project is financed from the ESIF and the state budget.
- The target group are all children and pupils attending pre-primary, primary and secondary schools, either public, private or religious. Children or pupils with special educational needs as well as children and pupils with disabilities are included.
- The project support schools to create inclusive teams which consist of pedagogical / teacher's assistant, school psychologists, special education teacher and social pedagogue.

6.2 Priorities for future investment (after 2021)

In the area of education the investments of RRP belong to components 6 and 7:

a) Component 6:

Investment 1: Ensuring physical accessibility of school buildings at all levels
of educational system: This disability specific investment involves the
preparation of the Action plan on debarierisation to eliminate physical,

Ondrušová, D., Kešelová, D., Machajdíková, M. (2021), Exploring the action of EU countries to harness the potential and address challenges of digitalisation and digital transformation to advance the rights of persons with disabilities - country report: Slovakia. EDE – European Disability Expertise.

⁹⁹ Methodology and Pedagogy Centre: 'O projekte POP II' (About the project POP II), https://archiv.mpc-edu.sk/sk/nppop-2/oprojekte.

Ondrušová, D. – Kešelová, D. – Machajdíková, M. (2020), European Semester 2020-2021 - Country fiche on disability equality: Slovakia.

information and technological barriers in school environment. Debarierisation at larger secondary schools will be financed from the RRP while smaller secondary schools, primary schools and pre-schools will be debarierised from the ESIF. New buildings will be built in line with the universal design principles.

b) Component 7:

- Investment 1: Digital infrastructure at schools: According to RRP, it supports
 development of digital infrastructure and enhancement of pupils' digital literacy
 and skills. It is also the investment to support inclusive education. From the
 disability perspective this investment includes also compensatory aids for
 pupils with disability, for example screen reader for blind pupils or screen
 magnifier for pupils with low vision.
- Investment 2: Development of school infrastructure: This investment extends
 the primary school capacities in certain districts without proper access to
 education. The investment is focused on schools with high number of children
 from socially disadvantaged background. Within this investment the current
 premises will be extended or reconstructed and new ones will be built. Support
 measures for children with special educational needs will be provided in these
 new capacities to provide inclusive education.

The estimated costs on both investments are of EUR 469 million.

In the area of social and health the investments of RRP belong to components 11, 12 and 13:

a) Component 11: Modern and accessible healthcare (EUR 1 163 million)

This Component plans to create an accessible and efficient hospital network that provides quality healthcare, to increase the availability of emergency health services and to strengthen primary care. People with disabilities are not mentioned as specific or vulnerable group. However, the Governmental Manifesto (2021-2024) states that proposed reform of the hospital network should also create space for systematic renewal of medical equipment and infrastructures which, like the buildings of medical facilities, will also respect the specific needs of persons with disabilities.

b) Component 12: Human, modern and accessible mental health care (EUR 105 million)

Planned reforms and investments shall foster systemic improvements in mental health care in Slovakia, underpinned by cooperation across different sectors of public administration and professional organisations. The measures aim to modernise psychiatric and psychological socio-medical care, to promote mental health and the prevention of psychological disorders in the general population, to strengthen socio-medical care and to increase its accessibility.

- creation of detention facilities 75 beds to provide adequate care for a small group of psychiatric patients who committed serious criminal offences;
- building psycho-social centres 38 centres to ensure adequate care for long-term patients in their home environment by mobile teams, thereby limiting placement in

- institutional facilities or improving the quality of life in these facilities. The centres shall provide health and social services through a multidisciplinary team;
- completing the psychiatric stationary network 15 stationaries to complete the network of psychiatric stationary facilities, providing daily psychiatric care;
- establishment of specialised centres for autism spectrum disorders 3 diagnostic intervention centres - to increase the availability of specialised care facilities for autism spectrum disorders.
- c) Component 13: Accessible and high-quality long-term socio-health care (EUR 265 million)

The regulatory reforms aim at a more coherent and better coordinated care system linking social and health care, an improved funding scheme centred around people's needs and providing better incentives for community-based care, a more coherent assessment of care needs for persons with disabilities, and improved supervision of social care. The reformed funding scheme shall also enhance efforts to de-institutionalise care by improving incentives for home-based and community-based care. Investments shall result in additional long-term care, palliative care and after-care service capacities, in particular in the provision of home-based and community-based care.

- increasing capacities of residential community based services (maximum six persons in one household) by 1 440 additional places;
- increasing capacities of integrated health and social services (maximum capacity of 30 beds);
- increasing capacities of outpatient community based services for additional 2 580 users;
- increasing capacity of outreach home nursing care 91 providers;
- supporting after-care services additional 650 places;
- new or reconstructed residential palliative care 270 beds;
- outreach palliative care 26 providers;
- new system and infrastructure for inspection /supervision in social care eight branches.

7 Annex: disability data relevant to the Semester

See also disability data in the Eurostat database¹⁰¹ and statistical reports.¹⁰²

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'.¹⁰³

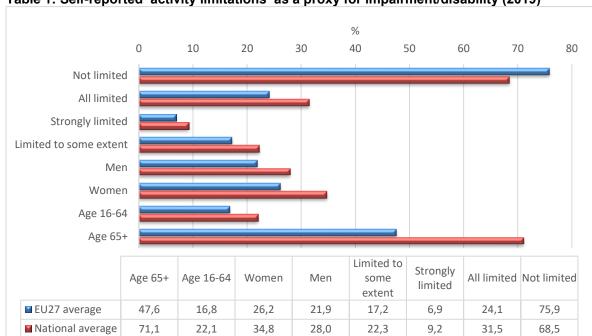


Table 1: Self-reported 'activity limitations' as a proxy for impairment/disability (2019)

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'. National estimates for Slovakia are compared with EU27 mean averages

¹⁰¹ Eurostat health Database, https://ec.europa.eu/eurostat/web/health/data/database.

¹⁰² Eurostat (2019) *Disability Statistics* https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Disability_statistics.

The SILC survey questions are contained in the Minimum European Health Module (MEHM)

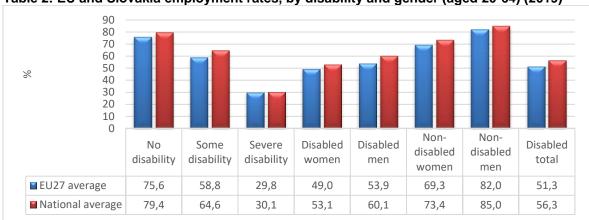
https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Special:WhatLinksHere/Glossary:Minimum_European_Health_Module_(MEHM).

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

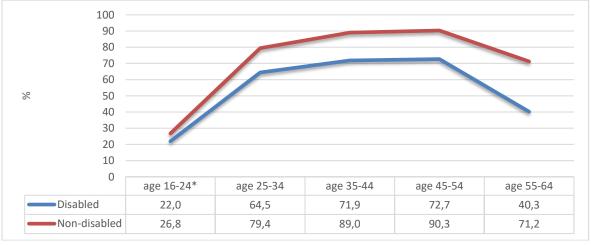
for the most recent year. 105 More people report limitations in Slovakia than the EU average.

7.1 Data relevant to disability and the labour market

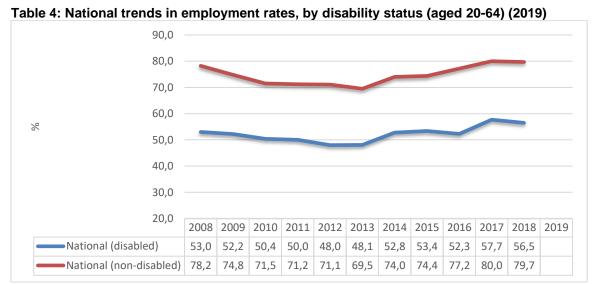
Table 2: EU and Slovakia employment rates, by disability and gender (aged 20-64) (2019)







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.



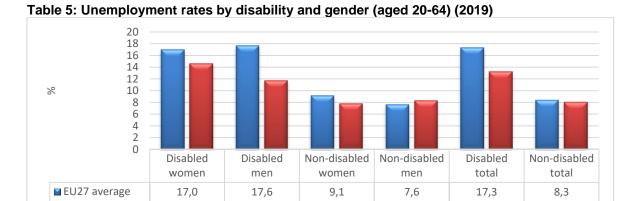
Source: EU-SILC 2019 Release 2021 version 1 (and preceding UDBs).

14,6

11,7

7.1.1 Unemployment

■ National average

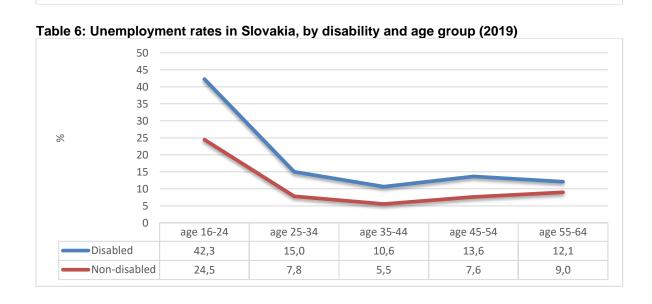


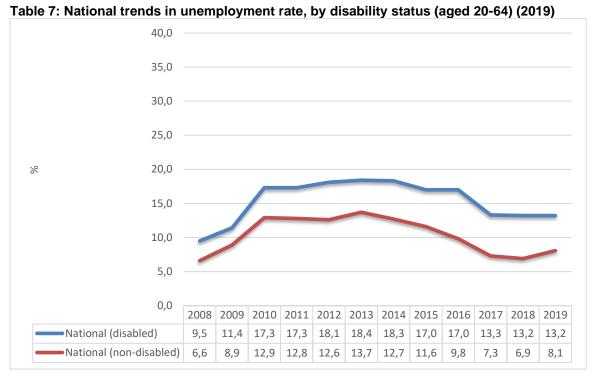
7,8

8,3

13,2

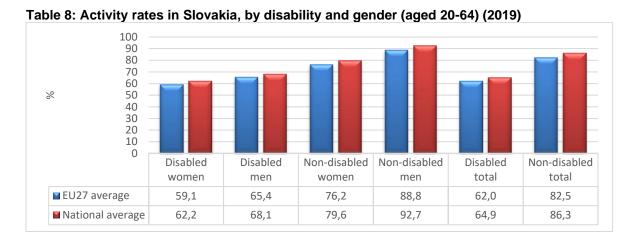
8,1

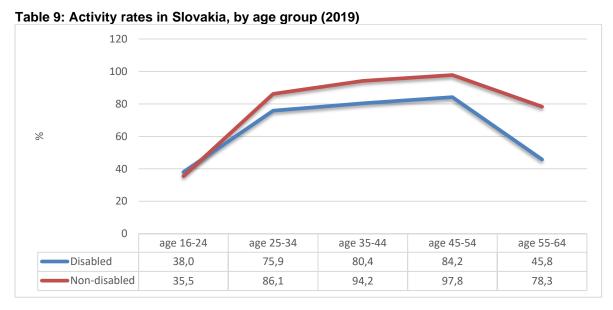


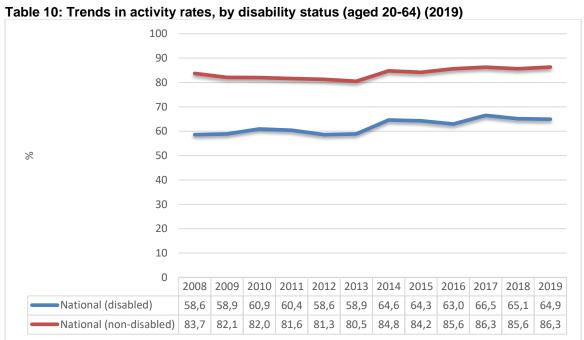


Source: EU-SILC 2019 Release 2021 version 1 (and preceding UDBs).

7.1.2 Economic activity







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

7.1.3 Alternative sources of labour market data in Slovakia

Disability data is not yet available from the core European Labour Force Survey but labour market indicators for Slovakia were disaggregated from ad modules conducted in 2001 and 2011. These can be found in the Eurostat disability database.¹⁰⁶

The national Labour Force Survey has been carried out in Slovakia since 1994 by the Statistical Office of the Slovak Republic. Persons with disabilities are identified based upon the respondents' response to the question concerning the granted status of persons with disabilities (question number 77 of the questionnaire type B for the members of the household). LFS results are processed quarterly and are published on the website of the Statistical Office of the Slovak Republic. Results for people with disabilities are published annually, in the report 'Selected indicators related to the social situation of persons with disabilities' (Vybrané indikátory sociálnej situácie osôb so zdravotným postihnutím). LFS provides employment and unemployment data for persons with disabilities.

Table 11: Economic activity rate, employment rate and unemployment rate of persons with

disabilities (%)

alcasimiles (78)	2013	2014	2015	2016	2017	2018	2019
Economic activity rate	17.6	21.4	20.1	19.8	19.8	20.9	21.0
Employment rate	14.0	17.3	16.6	16.6	17.1	18.7	18.8
Unemployment rate	20.0	19.7	17.5	16.0	13.8	10.4	10.4
Men							
Economic activity rate	19.8	24.6	21.7	21.1	20.4	22.0	23.9
Employment rate	15.8	19.3	17.8	18.2	17.4	19.2	21.0
Unemployment rate	20.4	21.9	17.5	13.8	14.7	12.7	12.3
Women							
Economic activity rate	15.6	18.7	18.7	18.4	19.4	19.9	18.3
Employment rate	12.5	15.5	15.4	15.0	16.9	18.3	16.8
Unemployment rate	19.8	17.0	17.3	18.3	13.0	8.1	8.1

Source: Statistical Office of the Slovak Republic, LFS, UDB 2013-2019.

Table 12: Share of economically active persons with disabilities by regions (%)

		•				, , ,	
Indicator	2013	2014	2015	2016	2017	2018	2019
Bratislava region	13.2	10.8	14.2	12.4	18.3	19.7	13.7
Trnava region	23.5	19.7	12.8	13.7	13.8	12.9	12.8
Trenčín region	15.3	15.1	14.2	17.3	19.4	16.1	15.6
Nitra region	1.9	5.1	7.2	8.5	8.9	7.9	9.0
Žilina region	17.0	13.5	14.3	12.5	9.1	13.9	18.3
Banská Bystrica region	17.7	20.5	19.6	16.0	12.1	13.4	13.2
Prešov region	6.9	7.9	9.2	9.5	8.8	8.6	9.2
Košice region	4.6	7.4	8.6	10.1	9.5	7.4	8.2

Source: Statistical Office of the Slovak Republic, LFS, UDB 2013-2019.

¹⁰⁶ Eurostat Health Database: https://ec.europa.eu/eurostat/web/health/data/database.

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Table 13: Share of unemployed people with disabilities by duration of unemployment (%)

Indicator	2013	2014	2015	2016	2017	2018	2019
0-6 months	18.3	28.1	18.3	39.8	15.9	21.9	39.4
7-12 months	8.6	15.8	13.6	9.3	13.8	12.9	16.9
1-2 year/s	5.8	10.3	21.9	12.1	15.4	11.0	12.0
More than 2 years	67.3	45.8	46.3	38.9	54.9	54.2	31.7

Source: Statistical Office of the Slovak Republic, LFS, UDB 2013-2019.

Administrative data on labour market participation of people with disabilities

Table 14: Employed people with disabilities

	2014	2015	2016	2017	2018	2019	2020
No. of persons with disabilities*	240,445	244,958	248,160	249,966	253,169	251,128	251,471
From that: No. of employed persons	75,545	85,391	92,157	96,938	101,931	105,102	101,752
Share of employed persons (%)	31.4	32.2	37.1	38.8	40.3	41.9	40.5

^{*}In this context, persons with disabilities refer to those who are recognised as having disabilities on grounds of disability assessment, which is conducted by the Social Insurance Agency for the purpose of disability pension, i.e. those who receive disability pension.

Source: Social Insurance Agency (on request).

Table 15: Unemployed people with disabilities - Average number of registered jobseekers

	2013	2014	2015	2016	2017	2018	2019	2020
All jobseekers	415,006	385,661	354,582	300,988	227,542	181,703	168,030	209,634
Jobseekers with disabilities	11,659	12,800	12,917	10,800	8,018	6,439	5,808	7,294
Share of jobseekers with disabilities (%)	2.81	3.32	3.64	3.59	3.52	3.56	3.46	3.48

Source: Správy o sociálnej situácii obyvateľstva Slovenskej republiky za rok (2013, ..., 2019). 107

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¹⁰⁷ [Reports on the Social Situation of Population in the Slovak Republic for year (2013, ..., 2019)]. Ministry of Labour, Social Affairs and Family of the Slovak Republic, 2020. Available at: http://www.employment.gov.sk/sk/ministerstvo/vyskum-oblasti-prace-socialnych-veci-institut-socialnej-politiky/spravy-socialnej-situacii-obyvatelstva-slovenskej-republiky.html.

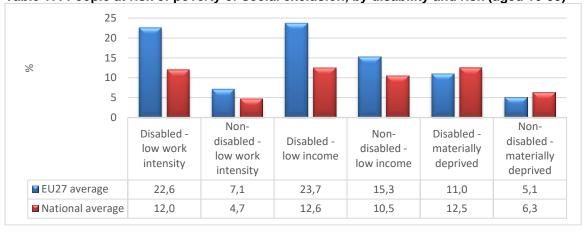
Table 16: Number of participants and the expenses for the ALMPs for persons with disabilities

Table 10. Number	No of people with disabilities in 2019	No. of people with disabilities in 2020	Change between 2019 and 2020 (pps)	Expenses in €in 2019	Expenses in €in 2020	Change between 2019 and 2020 (pps)
allowance to set up a sheltered workshop or a sheltered workplace	123	43	-65.04	443 273	129 396	-70.81
allowance to maintain employees with disabilities at work	32	24	-25.0	53 018	46 589	-12.13
self- employment allowance	54	17	-68.52	320 921	123 871	-61.40
allowance to cover expenses for work assistant	1 253	1 229	-1.92	6 599 428	7 246 594	9.81
allowance to partially cover the operating expenses of sheltered workshop and sheltered workplace	9 480	8 814	-7.03	32 022 270	32 056 936	0.11
Total	10 942	10 127	-7.45	39 438 910	39 603 386	0.42

Source: Správa o sociálnej situácii obyvateľstva Slovenskej republiky za rok 2020108.

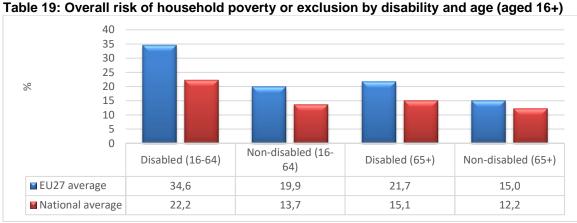
7.2 EU data relevant to disability, social policies and healthcare (2019)

Table 17: People at risk of poverty or social exclusion, by disability and risk (aged 16-59)

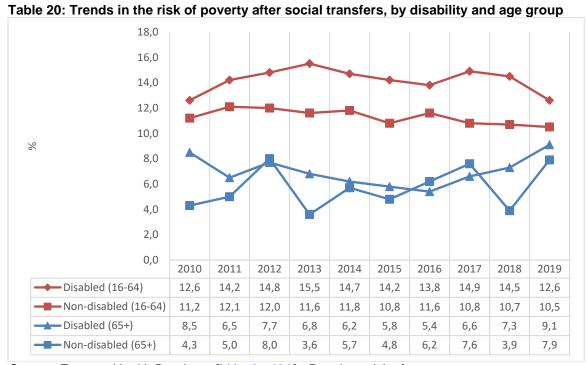


Ministry of Labour, Social Affairs and Family of the Slovak Republic (2020), Report on the Social Situation of Population in the Slovak Republic for year 2019, https://www.employment.gov.sk/files/slovensky/ministerstvo/analyticke-centrum/2020/sprava_o_soc_situacii_obyvatelstva_sr_2019.pdf.

Table 18: People at risk of poverty or social exclusion, by disability and gender (aged 16+) 35 30 25 20 15 10 5 % Non-Non-No Some Severe Disabled Disabled disabled disabled disability disability disability women men women men ■ EU27 average 19,1 26,1 34,7 29,4 27,5 20,1 18,1 ■ National average 13,5 16,4 25,8 20,3 17,6 13,8 13,3



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



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.

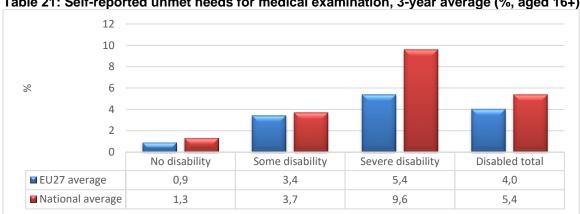


Table 21: Self-reported unmet needs for medical examination, 3-year average (%, aged 16+)

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 Slovakia

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-povertv. 109

Table 22: Protection Allowance, monthly

	contribution amount	Number of recipients	contribution amount	Number of recipients
2018	63.07 €	7 073	34.69 €	5 458
2019	66.20 €	6 546	36.40 €	5 246
2020	67.50 €	5 789	37.30 €	11 402

Source: MLSAaF SR, Report on the social situation for years 2018, 2019 and 2020.

Table 23: Provision of home-care allowance and personal assistance allowance, 2018-2020

	201	8	2019		2020	
	number of users, monthly average	income, monthly average	number of users, monthly average	income, monthly average	number of users, monthly average	income, monthly average
home-care allowance	53 356	215.03 €	57 048	317.87 €	61 734	363.13 €
personal assistance allowance	10 100	443.49€	10 657	551.00 €	11 117	578.92 €

Source: MLSAaF SR, Report on the social situation for years 2018, 2019 and 2020.

Table 24: Capacity of residential and outpatient forms of social services / number of users of outreach form of social services for persons with peeds

outi eacii io	outreach form of social services for persons with needs										
	residential		outpatient		outreach		total				
2016	40 278	64.22%	5 689	9.07%	16 749	26.71%	62 716				
2017	39 725	61.55%	7 757	12.02%	17 057	26.43%	64 539				

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

2018	40 838	64.30%	6 682	10.52%	15 994	25.18%	63 514
2019	41 059	64.84%	6 143	9.70%	16 124	25.46%	63 326

Source: MLSAaF SR, Report on the social situation for year 2020.

Table 25

1 4010 1	<u> </u>				
	number of children in number of group professional families in institutiona		ups of children care		
		thereof children with disability		thereof groups with children with disabilities	number of children with disabilities in these groups
2018	1 310	64	429	66	470
2019	1 370	53	436	66	498
2020	1 426	72	444	67	497

Source: MLSAaF SR, statistical reports V/A(MPSVR SR)05-01.

Table 26

early childhood intervention /	number of pro	oviders	number of users		
year	public	non-public	at public providers	at non-public providers	
2019	16	19	399	1 301	
2020	16	23	440	1 775	

Source: MLSAaF SR, Report on the social situation for year 2020.

7.3 EU data relevant to disability and education

Table 27: Early school leaving rates, by disability status (aged 18-24 and 18-29)¹¹⁰

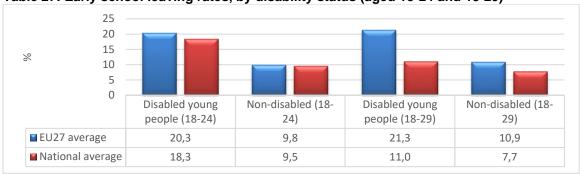
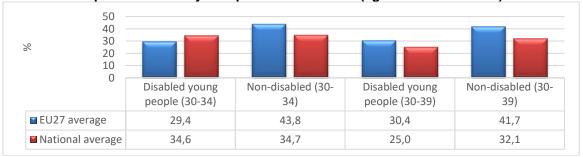


Table 28: Completion of tertiary or equivalent education (aged 30-34 and 30-39)



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 Slovakia

As for ES 2019/2020.111 aalternative sources of national education data have been provided by the Statistical office of the Slovak Republic. These data show qualification rates (secondary / tertiary) of all persons with disabilities and are disaggregated by economic status, education and age. From the methodological perspective, with regards to early school leavers, only the ages 15-29 are available in these statistics, not the category of 18-24-year olds.

¹¹⁰ 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.

¹¹¹ European Semester 2020-2021 country fiche on disability equality. Slovakia. Available at: https://ec.europa.eu/social/main.jsp?pager.offset=20&catId=1532&langId=en&moreDocuments=yes.

Table 29: Economic active population with disabilities by age and education (in %)

Indicator	2014 (N= 76 70	2015 (N=76 2 00)	2016 (N=72 9 00)	2017 (N=75 1 00)	2018 (N=82 9 00)	2019 (N=84 8 00)
15 - 29 years	0) 13.1	12.9	12.6	8.2	7.9	7.0
Without education + primary	10.1	1210	1210	0.2	7.0	1.0
education + lower secondary education	0.5	0.9	1.0	0.5	0.1	1.0
Apprenticeship +secondary without school leaving exam	2.9	3.2	2.8	1.5	0.9	1.1
Apprenticeship + upper secondary education	7.4	4.9	5.5	3.9	4.4	3.1
Tertiary education	2.2	3.8	3.3	2.2	2.4	1.8
30 - 39 years	25.0	18.3	19.6	18.8	21.6	16.7
Without education + primary education + lower secondary education	1.6	1.2	0.7	1.2	2.7	0.7
Apprenticeship +secondary without school leaving exam	8.4	5.2	4.4	3.6	4.9	4.4
Apprenticeship + upper secondary education	8.0	8.0	9.2	9.3	9.5	8.3
Tertiary education	7.0	3.8	5.4	4.7	4.5	3.3
40 - 49 years	26.4	26.3	23.0	28.7	26.9	28.3
Without education + primary education + lower secondary education	2.3	2.0	1.0	1.4	3.0	2.5
Apprenticeship +secondary without school leaving exam	9.7	11.0	9.8	11.7	8.5	10.4
Apprenticeship + upper secondary education	10.1	9.3	7.9	11.4	11.2	10.7
Tertiary education	4.2	3.9	4.4	4.2	4.4	4.7
50 +	35.6	42.6	44.7	44.3	43.6	48.1
Without education + primary education + lower secondary education	4.2	4.8	5.6	3.5	3.0	3.6
Apprenticeship +secondary without school leaving exam	13.9	17.1	19.6	19.8	18.3	22.0
Apprenticeship + upper secondary education	11.1	14.9	14.1	15.3	16.6	17.0
Tertiary education	6.3	5.9	5.4	5.7	5.7	5.5
	•	•		•	•	

Table 30: Economic inactive population with disabilities by age and education (in %)

Indicator	2014 (N=2810	2015 (N=3028	2016 (N=2968	2017 (N=3034	2018 (N=3140	2019 (N=3195
	00)	00)	00)	00)	00)	00)
15 - 29 years	9.6	8.6	7.1	7.3	7.3	7.1
Without education + primary education + lower secondary education	6.7	6.0	5.5	5.4	5.2	4.9
Apprenticeship + secondary without school leaving exam	0.9	0.7	0.4	0.8	0.8	1.0
Apprenticeship + upper secondary education	1.6	1.7	1.2	0.8	1.1	0.9
Tertiary education	0.6	0.1	0.1	0.3	0.2	0.3
30 - 39 years	9.2	8.4	8.1	8.5	8.5	8.6
Without education + primary education + lower secondary education	2.8	3.2	3.7	3.5	3.7	4.2
Apprenticeship + secondary without school leaving exam	3.2	2.4	1.9	2.2	2.5	2.1
Apprenticeship + upper secondary education	2.5	2.3	2.0	2.3	1.8	1.7
Tertiary education	0.6	0.5	0.6	0.6	0.4	0.6
40 - 49 years	9.4	10.6	10.9	11.2	10.9	11.5
Without education + primary education + lower secondary education	2.4	2.4	2.8	2.7	2.8	3.0
Apprenticeship +secondary without school leaving exam	4.1	5.2	5.2	5.5	4.6	4.0
Apprenticeship + upper secondary education	2.5	2.6	2.7	2.7	3.0	3.5
Tertiary education	0.4	0.4	0.3	0.3	0.6	1.0
50 +	71.9	72.5	73.9	72.9	73.3	72.8
Without education + primary education + lower secondary education	21.1	20.9	20.0	19.6	20.1	18.5
Apprenticeship + secondary without school leaving exam	31.0	29.9	30.3	29.8	29.9	29.5
Apprenticeship + upper secondary education	16.5	17.8	19.7	20.2	19.7	20.6
Tertiary education	3.2	3.8	3.8	3.4	3.6	4.2

Table 31: Working population with disabilities by age and education (in %)

Indicator	2014 (N=61 50 0)	2015 (N=62 90 0)	ge and educ 2016 (N=61 20 0)	2017 (N=64 80 0)	2018 (N=74 30 0)	2019 (N=76 00 0)
15 - 29 years	11.3	11.5	12.0	7.2	7.8	6.6
Without education + primary education + lower secondary education	0.4	0.9	0.4	0.3	0.1	1.0
Apprenticeship + secondary without school leaving exam	1.7	2.5	2.9	1.1	0.8	0.9
Apprenticeship + upper secondary education	6.9	4.5	5.5	3.4	4.6	2.9
Tertiary education	2.3	3.6	3.3	2.4	2.3	1.7
30 - 39 years	26.0	19.4	19.8	17.7	20.9	15.7
Without education + primary education + lower secondary education	1.6	1.2	0.8	1.0	2.3	0.4
Apprenticeship + secondary without school leaving exam	8.0	5.4	4.9	1.8	4.6	3.6
Apprenticeship + upper secondary education	8.2	8.4	8.8	9.5	9.2	8.5
Tertiary education	8.2	4.4	5.3	5.4	4.8	3.1
40 - 49 years	27.6	26.5	24.1	29.4	27.3	28.7
Without education + primary education + lower secondary education	2.3	1.7	0.9	1.1	2.3	1.8
Apprenticeship + secondary without school leaving exam	10.3	10.7	10.7	11.5	8.2	10.7
Apprenticeship + upper secondary education	11.2	10.2	8.2	12.1	12.2	11.1
Tertiary education	3.7	3.9	4.3	4.7	4.6	5.1
50 +	35.2	42.6	44.1	45.7	44.1	49.1
Without education + primary education + lower secondary education	3.4	3.7	4.8	3.8	2.7	3.1
Apprenticeship + secondary without school leaving exam	12.8	17.0	18.9	19.8	17.4	22.6
Apprenticeship + upper secondary education	11.6	15.5	14.6	15.7	17.6	17.5
Tertiary education	7.4	6.4	5.9	6.2	6.3	5.8

Table 32: Unemployed population with disabilities by age and education (in %)

Indicator	2014 (N=15 1	2015 (N=11 1	2016 (N=11 7	2017 (N=10 3	2018 (N=8 60	2019 (N=8 80
	00)	00)	00)	00)	0)	0)
15 - 29 years	20.6	19.0	15.7	14.5	8.7	10.4
Without education + primary education + lower secondary education	0.9	1.0	4.4	1.9	0.0	1.2
Apprenticeship + secondary without school leaving exam	8.0	6.5	2.6	4.5	1.7	2.5
Apprenticeship + upper secondary education	9.6	6.9	5.3	7.3	3.0	4.5
Tertiary education	2.0	4.7	3.3	0.8	4.0	2.2
30 - 39 years	21.0	13.1	18.3	25.9	27.8	25.3
Without education + primary education + lower secondary education	1.6	1.4	0.0	2.5	6.2	3.2
Apprenticeship + secondary without school leaving exam	10.1	4.2	1.8	14.8	8.1	11.1
Apprenticeship + upper secondary education	7.2	6.2	10.8	7.8	11.4	6.3
Tertiary education	2.1	1.3	5.7	0.8	2.1	4.8
40 - 49 years	21.4	25.3	17.8	24.0	24.2	24.5
Without education + primary education + lower secondary education	2.2	3.4	1.7	3.0	8.5	8.4
Apprenticeship + secondary without school leaving exam	7.3	12.6	4.7	13.1	10.8	7.5
Apprenticeship + upper secondary education	5.6	5.2	6.2	7.0	2.5	7.8
Tertiary education	6.3	4.1	5.2	0.9	2.4	0.8
50 +	37.1	42.6	48.1	35.5	39.3	39.8
Without education + primary education + lower secondary education	7.6	9.8	10.3	1.5	5.6	7.7
Apprenticeship + secondary without school leaving exam	18.2	17.3	23.2	19.5	26.0	17.2
Apprenticeship + upper secondary education	9.1	11.9	11.5	12.5	7.7	12.8
Tertiary education	2.2	3.7	3.1	2.0	0.0	2.1

Table 33: Pupils with special educational needs at mainstream and special schools (frequencies)

	Mainstream schools	Special schools	Total
2006	16 512	31 252	47 764
2007	18 426	31 510	49 936
2008	19 459	31 451	50 910
2009	21 471	31 893	53 364
2010	23 612	32 272	55 884
2011	25 875	32 289	58 164
2012	27 611	32 294	59 905
2013	29 976	32 274	62 250
2014	33 682	32 145	65 827
2015	34 848	31 684	66 532
2016	36 075	30 946	67 021
2017	37 590	30 566	68 156
2018	38 895	30 488	69 383
2019	40 070	30 038	70 108
2020	41 335	29 475	70 810

Source: Statistical Yearbook of Education. Slovak centre of scientific and technical information. 112 Note: High-skilled pupils and children/pupils from socially disadvantaged background belong to the children/pupils with special educational needs according to the legislation, as well. They are not included in the table. This table focuses only on pupils with disability/impairment/disorder.

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¹¹² Available at: https://www.cvtisr.sk/cvti-sr-vedecka-kniznica/informacie-o-skolstve/statistiky/statisticka-rocenka-publikacia/statisticka-rocenka-specialne-skoly.html?page_id=9600 and authors' processing.

Table 34: Pupils with special educational needs at mainstream schools by the type of disability

frequencies)										
	Autism	Intellectual disability	Hearing impairment	Visual impairment	Communication disorder	Physical disability	Behavioural disorders	Developmental learning difficulties	Others	Total
2006	107	3 896	441	353	880	1 359	728	8 739	9	16 512
2007	105	3 879	447	370	929	1 434	992	10 270	n/a	18 426
2008	153	3 792	471	386	841	1 418	1 119	11 279	n/a	19 459
2009	190	3 778	492	385	831	1 454	1 292	13 049	n/a	21 471
2010	204	3 754	504	378	885	1 416	1 488	14 983	n/a	23 612
2011	274	3 860	508	387	1 022	1 388	1 674	16 762	n/a	25 875
2012	327	3 653	509	405	1 112	1 116	1 031	16 981	2 477	27 611
2013	417	3 634	522	401	1 315	1 104	1 122	18 210	3 251	29 976
2014	541	3 750	565	496	1 563	1 007	1 112	19 752	4 896	33 682
2015	678	3 953	605	462	1 747	934	900	20 033	5 536	34 848
2016	804	3 864	622	487	1 879	946	680	20 768	6 025	36 075
2017	943	3 717	663	490	2 238	859	704	21 553	6 423	37 590
2018	1 109	3 352	682	459	2 668	813	657	23 029	6 126	38 895
2019	1 303	3 432	620	401	3 159	801	533	22 159	7 662	40 070
2020	1 614	3 277	647	430	3 628	768	527	22 342	8 102	41 335

Source: Statistical Yearbook of Education. Slovak centre of scientific and technical information. ¹¹³ Note: High-skilled pupils and children/pupils from socially disadvantaged background belong to the children/pupils with special educational needs according to the legislation, as well. They are not included in the table. This table focuses only on pupils with disability/impairment/disorder.

Table 35: Persons with special educational needs at special and mainstream schools by level of education

	Pre-schools		Primary s	chools	Secondary schools		
	special	mainstream	special	mainstream	special	mainstream	
2006	797	642	24 985	13 828	5 470	2 042	
2007	816	592	25 256	15 016	5 438	2 818	
2008	839	498	25 118	15 425	5 494	3 536	
2009	952	490	25 380	16 747	5 561	4 234	
2010	984	468	25 615	18 244	5 673	4 900	
2011	1 023	513	25 580	19 887	5 686	5 475	
2012	1 067	475	25 528	21 040	5 699	6 096	
2013	1 105	513	25 386	22 576	5 783	6 887	
2014	1 209	579	25 143	25 443	5 793	7 660	
2015	1 317	592	24 889	25 954	5 478	8 302	
2016	1 416	496	24 177	26 781	5 353	8 798	
2017	1 521	550	23 712	27 868	5 333	9 172	
2018	1 667	554	23 626	28 822	5 195	9 519	
2019	1 785	519	22 987	29 697	5 266	9 854	
2020	1 762	810	22 298	30 179	5 415	10 346	

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¹¹³ Available at: https://www.cvtisr.sk/cvti-sr-vedecka-kniznica/informacie-o-skolstve/statistiky/statisticka-rocenka-specialne-skoly.html?page_id=9600.

Source: Statistical Yearbook of Education. Slovak centre of scientific and technical information.¹¹⁴ Note: High-skilled pupils and children/pupils from socially disadvantaged background belong to the children/pupils with special educational needs according to the legislation, as well. They are not included in the table. This table focuses only on pupils with disability/impairment/disorder.

Table 36: Pupils with intellectual and other disabilities at special schools by variant

	intell	ectual disal	bility	other	·	intellectual
	total	variant A	variant B and C	disability/disorder/ impairment	total	disability (%)
2006	20 099	17 509	2 590	4 886	24 985	80.4
2007	20 598	17 461	3 137	4 658	25 256	81.6
2008	20 789	17 406	3 383	4 329	25 118	82.8
2009	20 943	17 289	3 654	4 437	25 380	82.5
2010	21 057	17 195	3 862	4 558	25 615	82.2
2011	21 084	17 052	4 032	4 496	25 580	82.4
2012	21 060	16 870	4 190	4 468	25 528	82.5
2013	20 996	16 509	4 487	4 390	25 386	82.7
2014	20 639	16 158	4 481	4 504	25 143	82.1
2015	20 502	16 103	4 399	4 387	24 889	82.4
2016	19 746	15 466	4 280	4 431	24 177	81.7
2017	19 055	14 811	4 244	4 657	23 712	80.4
2018	18 698	14 417	4 281	4 928	23 626	79.1
2019	17 217	13 675	3 542	5 770	22 987	74.9
2020	16 412	12 941	3 471	5 886	22 298	73.6

Source: Statistical Yearbook of Education. Slovak centre of scientific and technical information.¹¹⁵ Note: High-skilled pupils and children/pupils from socially disadvantaged background belong to the children/pupils with special educational needs according to the legislation, as well. They are not included in the table. This table focuses only on pupils with disability/impairment/disorder.

Available at: https://www.cvtisr.sk/cvti-sr-vedecka-kniznica/informacie-o-skolstve/statistiky/statisticka-rocenka-specialne-skoly.html?page_id=9600 and authors' processing.

¹¹⁴ Available at: https://www.cvtisr.sk/cvti-sr-vedecka-kniznica/informacie-o-skolstve/statistiky/statisticka-rocenka-publikacia/statisticka-rocenka-specialne-skoly.html?page_id=9600.

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