



DIRECTORATE-GENERAL FOR INTERNAL POLICIES

POLICY DEPARTMENT
ECONOMIC AND SCIENTIFIC POLICY **A**



Discrimination and Access to Employment for Female Workers with Disabilities



Discrimination and Access to Employment for Female Workers with Disabilities

Study for the EMPL Committee



DIRECTORATE GENERAL FOR INTERNAL POLICIES
POLICY DEPARTMENT A: ECONOMIC AND SCIENTIFIC POLICY

Discrimination and Access to Employment for Female Workers with Disabilities

STUDY

Abstract

The aim of this study is to exploit existing data and information on the access of women with disabilities to the labour market, in order to assess how multiple discrimination – gender and disability – affects the employment opportunities of these women.

In addition, the study analyses whether and how the EU legislative and national policy frameworks address the multiple discrimination faced by women with disabilities. This combines a gender mainstreaming approach, such as the internalisation of a gender perspective in all disability policies and legislation, with specific measures targeted to women with disabilities. The study also includes clear indications on implementation and monitoring mechanisms. The analysis is based on available European comparative data and in-depth analysis of seven European Member States.

This document was requested by the European Parliament's Committee on Employment and Social Affairs.

AUTHORS

Istituto per la Ricerca Sociale (IRS):

Manuela Samek LODOVICI, Project Leader

Nicola ORLANDO, Operative coordinator

Research Team

Daniela LOI, Serena Marianna DRUFUCA, Nicola ORLANDO, Flavia PESCE.

Country experts:

Denmark: Bent GREVE

France: Anne EYDOUX

Germany: Flavia PESCE

Italy: Flavia PESCE

Poland: Malgorzata GRABAREK and Izabela PRZYBYSZ.

Spain: Elvira GONZÁLEZ GAGO and Nuria GUILLÓ RODRÍGUEZ

UK: Kari P HADJIVASSILIOU and Chiara MANZONI

RESPONSIBLE ADMINISTRATOR

Dr. Marion SCHMID-DRÜNER

EDITORIAL ASSISTANT

Laurent HAMERS

LINGUISTIC VERSIONS

Original: EN

ABOUT THE EDITOR

Policy departments provide in-house and external expertise to support EP committees and other parliamentary bodies in shaping legislation and exercising democratic scrutiny over EU internal policies.

To contact Policy Department A or to subscribe to its newsletter please write to:

Policy Department A: Economic and Scientific Policy

European Parliament

B-1047 Brussels

E-mail: Poldep-Economy-Science@ep.europa.eu

Manuscript completed in June 2017

© European Union, 2017

This document is available on the Internet at:

<http://www.europarl.europa.eu/supporting-analyses>

DISCLAIMER

The opinions expressed in this document are the sole responsibility of the author and do not necessarily represent the official position of the European Parliament.

Reproduction and translation for non-commercial purposes are authorised, provided the source is acknowledged and the publisher is given prior notice and sent a copy.

CONTENTS

LIST OF ABBREVIATIONS	5
LIST OF TABLES	7
LIST OF FIGURES	7
LIST OF BOXES	10
EXECUTIVE SUMMARY	11
1. INTRODUCTION	21
2. INTRODUCTION THE STUDY: DEFINITIONS AND GENDER RELEVANCE	23
2.1. Multiple discrimination: definition	24
2.2. Relevance of the gender dimension in disability issues	25
3. THE EMPLOYMENT AND SOCIO-ECONOMIC CONDITIONS OF WOMEN WITH DISABILITIES	29
3.1. Gender differences in the incidence of disability among the working-age population	40
3.2. Gender differences in access to education and training	44
3.3. Gender differences in labour market conditions	51
3.4. Poverty and income inequalities among women with disabilities	71
3.5. Conclusions	80
4. THE LEGAL AND POLICY FRAMEWORK: A WIDESPREAD POLICY BLINDNESS	84
4.1. The international and European legal and policy framework on disability in a gender perspective	85
4.2. The International and European legal and policy framework on gender equality in a disability perspective	95
4.3. The role of the European Structural and Investment Funds in improving the chances of female workers with disabilities to have equal opportunities	98
5. COMPARATIVE ANALYSIS OF THE COUNTRY CASE STUDIES	105
5.1. The evolution of the national debate on 'multiple discrimination' in relation to women with disabilities	108
5.2. The socio-economic conditions of women with disabilities	111
5.3. The national legal and policy framework on disability and employment in a gender perspective	123
5.4. The role of the European Structural and Investment Funds	127
5.5. Examples of good practices	129
5.6. Current and future policy challenges according to national stakeholders	132
6. CONCLUSIONS AND POLICY RECOMMENDATIONS	134
6.1. The invisibility of women with disabilities	134
6.2. Policy developments	135

6.3. Policy recommendations	137
-----------------------------	-----

REFERENCES **143**

ANNEX (online only)

- Annex 1** Assessment of the availability and quality of gender-disaggregated data on disability and employment
- Annex 2** Additional tables
- Annex 3** Annex to chapter 5
- Annex 4** Analysis of international/european legislative document on disability
- Annex 5** National case studies

Annexes 1 2 3 4:

[http://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU\(2017\)602067\(ANN01\)_EN.pdf](http://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU(2017)602067(ANN01)_EN.pdf)

Spain Case Study:

[http://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU\(2017\)602067\(ANN02\)_EN.pdf](http://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU(2017)602067(ANN02)_EN.pdf)

Italy Case Study:

[http://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU\(2017\)602067\(ANN03\)_EN.pdf](http://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU(2017)602067(ANN03)_EN.pdf)

Poland Case Study:

[http://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU\(2017\)602067\(ANN04\)_EN.pdf](http://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU(2017)602067(ANN04)_EN.pdf)

UK Case Study:

[http://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU\(2017\)602067\(ANN05\)_EN.pdf](http://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU(2017)602067(ANN05)_EN.pdf)

Germany Case Study:

[http://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU\(2017\)602067\(ANN06\)_EN.pdf](http://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU(2017)602067(ANN06)_EN.pdf)

Denmark Case Study:

[http://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU\(2017\)602067\(ANN07\)_EN.pdf](http://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU(2017)602067(ANN07)_EN.pdf)

France Case Study:

[http://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU\(2017\)602067\(ANN08\)_EN.pdf](http://www.europarl.europa.eu/RegData/etudes/STUD/2017/602067/IPOL_STU(2017)602067(ANN08)_EN.pdf)

LIST OF ABBREVIATIONS

AGG	General Act On Equal Treatment (in its German acronym)
ALMPs	Active labour market policies
ANED	Academic Network of European Disability Experts
APPG	Women and Work All Party Parliamentary Group
BDF	Business Disability Forum
CES	Centro de Estudos Sociais da Universidade de Coimbra
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
CRPD	Committee on the Rights of Persons with Disabilities
DAP	Disability Action Plan
DG	General Directorate
DG-CS	General Directorate for Social Cohesion
DG REGIO	Directorate General Regional Policy
DoH	Department of Health
DSRK	Long-term National Development Strategy (in its Polish acronym)
DWP	Department for Work and Pensions
EA	Entreprises adaptées
EC	European Commission
EDF	European Disability Forum
EDS	European Disability Strategy
EHSIS	European Health and Social Integration Survey
EMFF	European Maritime and Fisheries Fund
EP	European Parliament
EPSCO	Employment, Social Policy, Health and Consumer Affairs Council configuration
ERDF	European Regional Development Fund
ESA	Employment and Support Allowance
Esat	Etablissements et services d'aide par le travail
ESI Funds	European Structural and Investment Funds
ESF	European Social Fund
EU	European Union
EU LSF	European Labour Force Survey
EU LFS-AHM	European Labour Force Survey Ad Hoc Module

EU-SILC	European Statistics on Income and Living Conditions
FRA	European Union Agency for Fundamental Rights
HID	Disabilities, incapacities, dependencies
ICF	International Classification of Functioning, Disability and Health
ICT	Information and Communications Technology
ID	Index of Dissimilarity
ILO	International Labour Organization
INE	National Institute for Statistics (in its Spanish acronym)
ISTAT	Italian National Institute of Statistics (in its Italian acronym)
J2E	Journey to Employment
LHPAD	Long-standing health problem and/or basic activity difficulty
NAP	National Action Plan
NEET	Not (engaged) in Education, Employment or Training
NGOs	Non - governmental organizations
OECD	Organisation for Economic Co-operation and Development
OMC	Open Method of Coordination
OP	Operational Programme
OPEJ	National Operational Programme Youth Employment (in its Spanish acronym)
PES	Public employment service
POEFE	National Operational Programme for Employment, Training and Education (in its Spanish acronym)
POISES	National Operational Programme for Social Inclusion and the Social Economy (in its Spanish acronym)
REC	Rights, Equality and Citizenship Programme 2014-2020
SRKL	Human Capital Development Strategy 2020 (in its Polish acronym)
SMEs	Small and medium-sized enterprises
TFEU	Treaty on the Functioning of the EU
TUC	Trade Union Congress
TO	Thematic Objective
UN	United Nations
UNCRPD	UN Convention on the Rights of Persons with Disabilities
USAID	United States Agency for International Development
WHO	World Health Organization

LIST OF TABLES

Table 3.1:	How to compute and to read gender gaps and disability gaps for each indicator	34
Table 3.2:	People with disabilities by definition of disability and gender (thousands)	40
Table 3.3:	Horizontal (by industry) and vertical (by occupation) gender segregation (15-64) both among people with and without disabilities in the EU-28, 2011 (Index of Dissimilarity)	68
Table 3.4:	EU28 – Gender and disability gaps (p.p.) in the main education and training, labour market and poverty indicators	82
Table 4.1:	Main International and European legal and policy documents on disability	85
Table 5.1:	The National Debate in the Country Case Studies	110
Table 5.2:	EU28 and Case Study Countries – Population (15-64) with Disability by Gender and Gender Gaps (p.p.) in the Population (15-64) with Disability	112
Table 5.3:	EU28 and Case Study Countries – Main Education and Training Indicators Disaggregated by Gender and by Disability Definition and Gender Gaps (p.p.) and Disability Gaps by Disability Definition	114
Table 5.4:	Main Labour Market Access Indicators Disaggregated by Gender and by Disability Definition and Gender, and Disability Gaps (p.p.) by Disability Definition	117
Table 5.5:	EU28 and Case Study Countries – Main Employment Condition Indicators Disaggregated by Gender and by Disability Definition, and Gender and Disability Gaps (p.p.) by Disability Definition	120
Table 5.6:	EU28 and Case Study Countries – Main Poverty and Income Indicators Disaggregated by Gender, and Gender and Disability Gaps (p.p.)	122

LIST OF FIGURES

Figure 3.1:	Share of people aged 15–64 with basic activity difficulties or disability, by gender and EU Member State (%)	41
Figure 3.2:	Gender gaps (p.p. in absolute value) in the share of people aged 15–64 with a basic activity difficulty, with an employment disability or a disability by age, EU28 (2011) and EU27 (2012) (%)	42
Figure 3.3:	Share of people aged 15–64 and over with disabilities, by gender and household type, EU27 (2012)	43
Figure 3.4:	People reporting a limitation in work by the reason for limitation in work and by sex, EU28 (2011) (%)	44
Figure 3.5:	Gender gaps (p.p.) in the share of early leavers from education and training (age group 18–24), by disability definition and by Member State (EU28, 2011)	46

Figure 3.6:	Disability gaps (p.p.) in the share of women early leavers from education and training (age group 18–24), by disability definition and by Member State (EU28, 2011)	46
Figure 3.7:	Distribution of population by disability definition and educational attainment level, EU28 (2011)	47
Figure 3.8:	Gender gaps in tertiary educational attainment (age group 30–34), by disability definition and by Member State (EU28, 2011)	48
Figure 3.9:	Disability gaps in tertiary educational attainment (age group 30–34), by disability definition and by Member State (EU28, 2011)	49
Figure 3.10:	Gender gaps in participation in education and training (15–64), by disability definition and by Member State (EU28, 2011)	50
Figure 3.11:	Disability gaps in participation in education and training (15–64), by disability definition and by Member State (EU28, 2011)	50
Figure 3.12:	Disability gaps in employment rates (age 15–64), by disability definition and Member State (EU28, 2011)	52
Figure 3.13:	Gender gaps (p.p.) in employment rate (age 15–64), by definition of disability and by Member State (EU28, 2011)	53
Figure 3.14:	Disability gaps (p.p.) in unemployment rate (age 15–64), by disability definition and by Member State (EU28, 2011)	54
Figure 3.15:	Gender gaps (p.p.) in unemployment rate (age 15–64), by disability definition and by Member State (EU28, 2011)	55
Figure 3.16:	Main reasons for leaving the last job or business (in %; missing answers not included) for women not employed, by definition of disability (EU28, 2011)	56
Figure 3.17:	Main reasons for leaving the last job or business (in %; missing answers not included) for people not employed, by gender and by definition of disability (EU28, 2011)	57
Figure 3.18:	Disability gaps (p.p.) in inactivity rate (age 15–64), by disability definition and by Member State (EU28, 2011)	58
Figure 3.19:	Gender gaps (p.p.) in inactivity rate (age 15–64), by disability definition and by Member State (EU28, 2011)	59
Figure 3.20:	Main reason for not seeking employment business (in %; missing answers not included) for inactive women, by definition of disability (EU28, 2011)	60
Figure 3.21:	Main reason for not seeking employment business (in %; missing answers not included) for inactive people, by gender and by definition of disability (EU28, 2011)	61
Figure 3.22:	Gender gaps (p.p.) in NEET rate of young people (15–34), by disability definition and by Member State (EU28, 2011)	62
Figure 3.23:	Disability gaps (p.p.) in in NEET rate of young people (15–34), by disability definition and by Member State (EU28, 2011)	63
Figure 3.24:	Disability gaps (p.p.) in the share of part-time employment, by definition of disability and by Member State (EU28, 2011)	64

Figure 3.25:	Gender gaps (p.p.) in the share of part-time employment, by definition of disability and by Member State (EU28, 2011)	64
Figure 3.26:	Disability gaps (p.p.) in the share of temporary employees, by definition of disability and by Member State (EU28, 2011)	65
Figure 3.27:	Gender gaps (p.p.) in the share of temporary employees, by definition of disability and by Member State (EU28, 2011)	66
Figure 3.28:	Disability gaps (p.p.) in percentage of people working from home, by disability definition and by Member States (EU28, 2011)	67
Figure 3.29:	Gender gaps (p.p.) in the percentage of people working from home, by disability definition and by Member States (EU28, 2011)	67
Figure 3.30:	Gender gaps (p.p.) in the share of people employed, by disability definition and by economic activity (EU28, 2011)	69
Figure 3.31:	Disability gaps (p.p.) in the share of people employed, by disability definition and by economic activity (EU28, 2011)	69
Figure 3.32:	Gender gaps (p.p.) in the share of people employed, by disability definition and by occupation (EU28, 2011)	70
Figure 3.33:	Disability gaps (p.p.) in the share of people employed, by disability definition and by occupation (EU28, 2011)	71
Figure 3.34:	Gender gaps (in p.p.) in the rate of people at risk of poverty or social exclusion (16 years and over), by level of activity limitation and by Member State (EU28, 2014)	72
Figure 3.35:	Disability gaps (in p.p.) in the rate of people at risk of poverty or social exclusion (16 years and over), by level of activity limitation and by Member State (EU28, 2014)	72
Figure 3.36:	Gender gaps in the severe material deprivation rate (people with 16 years and over), by Member State (EU28, 2014)	73
Figure 3.37:	Disability gaps in the severe material deprivation rate (16 years and over), by Member State (EU28, 2014)	74
Figure 3.38:	Gender gaps in the proportion of people (less than 60 years) living in households with very low work intensity, by Member State (EU28, 2014)	74
Figure 3.39:	Disability gaps in the proportion of people (less than 60 years) living in households with very low work intensity, by Member State (EU28, 2014)	75
Figure 3.40:	Gender gaps in the 'in-work at-risk-of-poverty' rate (18 years and over), by Member State (EU28, 2014)	76
Figure 3.41:	Disability gaps in the 'in-work at-risk-of-poverty' rate (18 years and over), by Member State (EU28, 2014)	76
Figure 3.42:	Gender gaps in the percentage of people (16 years and over) unable to face unexpected financial expenses, by Member State (EU28, 2014)	77
Figure 3.43:	Disability gaps in the percentage of people (16 years and over) unable to face unexpected financial expenses, by Member State (EU28, 2014)	78

Figure 3.44:	Gender gaps in the rate of people (16 years and over) at risk of poverty before and after social transfers (pensions included in social transfers), by Member State (EU28, 2014)	79
Figure 3.45:	Disability gaps in the rate of people (16 years and over) at risk of poverty before and after social transfers (pensions included in social transfers), by Member State (EU28, 2014)	79

LIST OF BOXES

Box 3.1:	Definitions of disability adopted in the main EU data sources	30
Box 3.2:	Mental disability or illness and work	31
Box 3.3:	Definitions of gender gap and disability gap	33
Box 4.1:	Some examples of the potential effects of legislation on disability and disabled women's employment	94

EXECUTIVE SUMMARY

In the EU28 over 44 million people aged between 15 and 64 years had a basic activity difficulty, and almost 35 million had a 'disability in employment' (ELFS 2011). Women are the majority (54 %) of people with disabilities and are more likely than men to report a basic activity difficulty (15.1 % versus 12.9 %) or a disability in employment (11.9 % versus 10 %), or a disability according to the EHSIS definition (14 % versus 11.7 %). Considering the increase of the number of elderly people and female longer life expectancy, this number is expected to increase.

The aim of this study is to exploit existing data and information on the access of women with disabilities to the labour market, in order to assess how multiple discrimination (i.e. gender and disability) affects the employment opportunities of these women.

In addition, the study analyses whether and how the EU legislative and national policy frameworks address the multiple discrimination faced by women with disabilities, combining a gender mainstreaming approach (e.g. the internalisation of a gender perspective in all disability policies and legislation) with specific measures targeted to women with disabilities and clear indications on implementation and monitoring mechanisms.

The study is based on the triangulation of different and complementary methods, data collection tools and activities. Secondary information and data (drawn from existing studies, documents and data sources) as well as primary data (acquired through case studies) are at the basis of the analysis. The following research tools have been adopted:

- desk analysis, including a literature and legislative review and a statistical analysis of the available data on the topic;
- field work, carried out through seven structured country case studies;
- collection of examples of good practices, detected through both the desk analysis and the field work.

The Report presents the main findings of the study and it is structured into six chapters. Following the Introduction, Chapter 2 provides a discussion of the background to the study with a focus on the debate at international and European level on the intersection of gender and disability.

Chapter 3 describes the main features of the employment and socio-economic conditions of women with disabilities, with focus on the gender and disability gaps women with disabilities face when their socio-economic conditions are compared to men with disabilities (gender gap) and to women without disabilities (disability gap). The analysis is based on the data and indicators available at the EU level in order to derive, whenever possible, differences across countries.

The following Chapter 4 provides an overview of the existing legal and policy framework in order to assess whether and to what degree it addresses multiple discrimination. The analysis is focused on international and European law and policies on disability and gender equality, in order to verify whether measures specifically addressed to disabled women and aimed to combat multiple discrimination have been adopted. In addition, this chapter considers whether and to what extent the 2014–2020 European Structural and Investment Funds address the employment and socio-economic conditions of women with disabilities.

The focus of Chapter 5 is on the national debate and policies adopted at the national level, including the use of Structural Funds, in the seven countries considered in depth in the case studies. In addition, this chapter compares a number of selected national good practices

that provide useful indications for the policy recommendations presented in the final Chapter 6.

A number of Annexes complete the report, with an assessment of the availability and robustness of existing Eurostat data on disability and employment in the perspective of gender-disaggregated analysis; additional statistical tables; comparative tables of the seven country case studies; disability policy fiches; and the complete seven case country case studies.

The debate over the concept and definition of disability and the shortcomings of existing data

As described in Annex 1, Eurostat makes available a number of data on disability from different sources, in some cases disaggregated by gender and age. However, the available data sources cover only people with disabilities aged 15+ who live in private households, while they do not consider people living in care institutions or children under 15 with disabilities. Data collection and comparison is also hampered by the fact that the definition of disability adopted varies across Member States and data sources, making it almost impossible to make a comparison across them. In addition, gender-disaggregated Eurostat data do not allow distinguishing by physical or mental disabilities and degree of disabilities.

These definitions reflect different models of disability and impairment, which also affect the strategies adopted for meeting the needs of people with disabilities. Two main models of disability are considered: the medical model, focusing on the individual's health condition, which can potentially impact on her/his quality of life; and the social model, which instead focuses on socially-created barriers, both physical and social/cultural, that do not accommodate the variety of abilities of the population. These two models take a different perspective of the interaction between the health condition of an individual and the environment, and are particularly important when considering gender differences in disability.

The social model is at the basis of the 'evolving concept' of disability adopted by the UN Convention on the Rights of Persons with Disabilities (UN CRPD). According to this concept persons with disabilities are *those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others*. This definition, by focusing on barriers to full and effective participation in society, overrides the formerly typical medical or welfare approach. It regards disability as the effect of the barriers a person with impairment is facing in her/his interactions with his or her environment rather than the person's physical or mental condition (disability). Disability results from the interaction between individuals with a health condition (e.g. cerebral palsy, Down's syndrome and depression) and personal and environmental factors (e.g. negative attitudes, inaccessible transportation and public buildings, and limited social supports).

This implies the need to adopt a common and shared theoretical framework and definition of disability. The International Classification of Functioning, Disability and Health, known as ICF, could represent a starting point for a common definition of disability, as it combines the 'social' with the person's health conditions, and defines disability as an umbrella term for impairments, activity limitations and participation restrictions. The collection of gender-oriented data in accordance with this classification could improve knowledge on gender differences in the socio-economic conditions of persons with disabilities, as well as on the multiple discrimination women with disabilities are likely to suffer due to the intersection of gender and disability.

The importance of the gender dimension in disability issues and policies

It is now acknowledged that people with disabilities are among the most marginalised groups in the world, and women are the most marginalised among the disabled.

Multiple discrimination occurs when a person is subject to discrimination on more than one ground. For this reason, some scholars argue that a single issue analysis of discrimination does not reflect reality. In the gender literature, different terms have been used to refer to this concept: additive discrimination, compound discrimination and intersectional discrimination. The main difference relates to the way different forms of discrimination are considered, whether separately or also taking into account the additional marginalisation due to their intersection, as for instance in the case of forced sterilisation of disabled women, where discrimination intersects gender and disability. In EU policy documents and legislation, the term *multiple discrimination* is used, even if it might be associated with a separateness of strands of discrimination, which in reality are intersected.

Women with disabilities are likely to face multiple disadvantages and forms of exclusion and to suffer high levels of stigmatisation. However, multiple discrimination and intersectional discrimination on the grounds of gender and disability remain significantly under-researched. It is only since the mid 1980s that serious attempts have been made to identify and understand how being female and having a disability interacts and how women with disabilities view their experiences.

Moreover, women with disabilities are not an homogeneous group, and their experience and needs depend on the type and severity of disability, the age and manner of disability onset, socio-economic and demographic characteristics, and biographical experiences. On the other hand, social norms contribute to the stigmatisation of women with disabilities as undervalued, undesirable, asexual and dependent, and give thus rise to abuse. The greater vulnerability of disabled women can thus be understood through an intersectional perspective as simultaneous discrimination relating to disability and gender.

Access to social and health services is highlighted in the literature as a problematic area for women with disabilities in Europe, together with their under-representation in the labour market and in access to full citizenship rights. As for women in general, also for women with disabilities, the lack of appropriate childcare and support for care of the elderly, or the high cost of such care can further aggravate access to and permanence in the labour market for women with disabilities.

The literature underlines that the health risks women face in their occupations are less visible and less likely to be recognised, being often more related to psychological and stress-driven disabilities rather than physical disabilities related to manual work. There is also little research and evidence on gender differences in the type of employment (including sheltered workshops) and in employment conditions (e.g. on rehabilitation, recruitment, promotion, access to training, remuneration, access to reasonable accommodation, occupational segregation, economic decision-making ...), in access to social benefits, and to social and rehabilitation services.

The interest in identifying and understanding the phenomenon of multiple discrimination in relation to the intersection of gender and disability is however relatively new both at the EU and national levels. Women with disabilities have historically been neglected both in policymaking and in the disability and gender equality literature, as well as by the disability and women's movements. The country case studies show that the debate on the definition of multiple discrimination, with particular reference to the intersection between disability and gender, is still weak or even in some countries totally absent.

The socio-economic marginalisation of women with disabilities.

In order to consider the two main grounds of discrimination suffered by women with disabilities, a **gender gap** (calculated as the difference between women and men with disabilities) and a **disability gap** (calculated as the difference between women with and women without disabilities) have been computed for the main indicators relating to access to education and training, labour market, poverty risk and financial conditions.

As described in Chapter 3, existing data show that women with disabilities are discriminated in the labour market and in access to full citizenship rights. This occurs in ways that are similar to the discrimination faced by women without disabilities and men with disabilities, but they also suffer additional discrimination due to the intersection of gender and disability. Besides a high disability gap compared to women without disabilities, women with disabilities often also suffer a gender gap compared to men with disabilities. **The disability gaps are generally higher than gender gaps for all the dimensions considered.**

Both gaps are particularly high when considering indicators of labour market participation, employment and working conditions, employment segregation, and poverty risks.

Conversely, Eurostat data **do not show a gender disadvantage in the access to education and training.** As for women without disabilities, on average, women with disabilities are more highly educated, more likely to participate in education and training and less likely to leave school early than men with disabilities; however, they have a lower education attainment, lower participation rates in education and training, and higher drop-out rates than women without disabilities. Gender and disability gaps in drop-out rates are higher when considering people with an employment disability than those with difficulties in basic activities.

Disability represents a barrier, for both women and men, in accessing the open labour market. However, **women with disabilities experience greater difficulties than their male counterparts.** At EU level, the main labour market indicators (employment, unemployment, NEET and inactivity rates) show that women with disabilities are more likely to be inactive and less likely to be employed than men with disabilities and women without. Moreover, on average in Europe, women with disabilities are more likely than both men with disabilities and women without to work part-time and to work from home. While disability and health issues are among the major reasons for leaving a job (especially for men), for women they are also among the main reasons for not seeking employment.

A greater penalisation also exists in relation to the poverty risk and the likelihood to meet financial difficulties. Women with an activity limitation face worse income, poverty and living conditions than men with the same limitation, and women with no such limitation, although with wide differences across Member States, depending on the welfare approach adopted. Gender gaps are generally lower than disability gaps, reflecting the difficult economic conditions of all people with disabilities. As for the overall population, for people with disabilities having a job also appears to reduce gender differences in the risk of poverty. In the majority of EU Member States, social transfers also seem effective in reducing the disability and gender gaps in poverty risks suffered by women with disabilities.

The legal and policy framework: a widespread policy blindness.

The difficulties faced by women with disabilities have been rarely considered in international and national legislation and policies. Gender and disability have been usually addressed separately when promoting equality and non-discrimination policies.

Although some progress has been made in recent years in recognising the rights of persons with disabilities, the situation faced by women with disabilities is still little understood or acknowledged. Even feminist movements have not explicitly considered women with disabilities and have paid only a scant attention to their conditions and rights. At EU level, disability has generally been treated as part of the anti-discrimination strategy without attention to multiple discrimination and more specifically to the intersection of disability and gender.

Gradual changes in legislation and policymaking have occurred especially in the last decade, mainly driven by the entry into force of the **2006 UN Convention of the Rights of Persons with Disabilities (UN CRPD)**, which recognises the discrimination on the basis of gender and disability suffered by women (art. 6). The convention adopts a human rights perspective: people are disabled by society and its barriers, not just by their impairments.

The adoption of the UN Convention by the EU on 22 January 2011 represented a major change in the EU and Member States' legal systems, as the legally binding convention requires the mainstreaming of disability rights throughout all EU policies and legislation. The gender equality jurisprudence developed under the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), also includes concerns about women and girls with disabilities and recommendations to be implemented. In order to support its implementation in the EU, in 2016 the European Parliament underlined the need for the EU institutions and Member States to incorporate the perspective of women with disabilities into their policies and programmes. The European Union and Member States are also recommended to develop affirmative actions addressed to disabled women as well a policy framework for participation of women with disabilities in the labour market and, more generally, in policy making.

However, **the European Union has neither mainstreamed a disability perspective in its gender policies and programmes, nor adopted a gender perspective in its disability strategies.**

Likewise, although attention to disability has increased in the **2014–2020 European Structural and Investment Funds (ESI Funds)**, gender and disability-related issues when addressed are usually tackled separately or disabled women are simply mentioned as a specific disadvantaged group among others with no specific actions planned and carried out.

National legislations and policies on disability and employment also do not adopt an intersectional approach in addressing women and disability. In all the seven country case studies considered in the report (Denmark, France, Germany, Italy, Poland, Spain and the UK) **the specific needs of women with disabilities remain usually out of the public and political debate**, and the intersectional approach remains mostly a field for researchers and academic debate. The double discrimination faced by women with disabilities is also not a priority in the agenda of associations of people with disabilities, and even when it has been incorporated in the discourse, it has not been embraced by policymakers.

Exceptions among the selected case studies are **Germany, Spain and Italy**. In **Germany** attention to multiple discrimination is formalised in German laws and acts (as the General

Act on Equal Treatment) and the debate on women with disabilities started in the mid-1980s, particularly in relation to gender based violence and political representation. **Spain** also has addressed many measures specifically to women with disabilities. In **Italy**, the law (D.lgs.216/03) recognises indirectly the presence of double discrimination for women with disabilities, highlighting the need to adopt measures taking into account the different impact of discrimination on women and men. More recently, the Biennial Action Plan for the promotion of the rights and the integration of people with disabilities adopted in 2016 recognises the need to reduce all forms of additional discrimination, including gender discrimination, and to adopt a gender perspective in all community policies and services. In the other analysed countries **disability and gender discrimination have been treated as separate issues** among stakeholders, policymakers and in the media, and the **gender perspective has been considered only in recent years**, although marginally, in the public, political, and institutional debate about disability discrimination. In **France**, for example, the 2016 report of the Defender of Rights has explored the definition of multiple discrimination as a first attempt to put this question in the public debate.

The move from a unilateral to a multiple perspective is very recent and in some cases has been translated into an **increasing number of local and national associations of women with disabilities**, or groups of women within the associations of people with disabilities. In Germany, networks of women with disabilities are now quite widespread and in 2007 a **European Network of Women with Disabilities** was established in Berlin.

The change of perspective is also **changing the type of issues** the debate is addressing with respect to women and disability, with strong differences across the considered countries. While in some countries, such as Poland, the focus is still on medical intervention and rehabilitation, in others it has moved to other areas. For example, to employment and training opportunities (e.g. Spain), the gender pay gap (e.g. the UK), the intersection of gender and ethnicity (e.g. France), vulnerability (e.g. Italy), the political representation, motherhood and sexuality, and gender based violence (e.g. Germany).

Although double, and in some case multi-discrimination has been partially introduced in the national discussion, the debate is still mostly driven by International and European institutions. The major impulse to the debate on multiple discrimination was the 2006 UN Convention on the Rights of Persons with Disabilities (UN, 2006), ratified by 27 EU Member States, including those covered in this study.

The examples of good practices provided by the country experts are mainly aiming at the **integration of women with disabilities in the labour market** and to protect them against **poverty, violence and social exclusion**. In some cases (Denmark and UK), the examples listed target the whole population of people with disability, without any specific reference to women. A number of different types of measures and practices can be identified, including the following.

- **Measures targeted to companies** support workplace adaptation and the maintenance of the job, through the creation of a disability manager position in companies, training and coaching services, workplace flexibility measures (e.g. teleworking, smart working, job sharing, working time flexibility and/or part-time, etc.) to address the specific needs of workers with disabilities. Examples are the Spanish employment network for women with physical and organic disabilities *REDEM+*; and the UK employer-led initiatives like the *Business Disability Forum* (BDF), although this does not specifically address women with disabilities. No measures to support self-employment and business start-ups among women with disabilities has been mentioned.

- **Vocational guidance and empowerment measures** targeted to women with disabilities. For example, the Spanish Social mentoring programme for women with disabilities; the Italian *Sportello Donna Disabile*; and the German *Initiative Inklusion*, although this is not specifically targeted for women.
- **Traineeship or employment support measures**, such as the Spanish **ICT training for women with disabilities living in rural areas**, and the French initiative Digital house. Although not specifically targeted to women, the *Journey to Employment (J2E) Job Clubs* in the UK support women and men with health conditions and disabilities closer to, or back into employment. In Denmark, according to the expert *flex jobs* enable the individual to adapt the number of working hours to her/his ability to work.
- **Measures to support NGOs and social cooperatives** providing sheltered jobs and/or on-the-job training specifically addressing women with disabilities. Two examples come from Italy, with the so-called progetto per ricucire L'Orlando Furioso, launched in Turin in 2004, and the first social ironing shop launched in Milan in 2012 (*Stireria sociale 'La vaporosa'*), employing young women with disabilities.
- **Awareness-raising measures** supporting the employment and empowerment of women with disabilities and firms' social responsibility have been implemented. For example in Germany the project *Women's representativeness in institutions: an idea makes a school* supporting the so-called *Trainers Tandem courses*. Among awareness-raising measures, several projects involved surveys, studies, reports and research projects on disability and gender, like the project *RISEWISE–RISE Women with Disabilities in Social Engagement* promoted in Italy by Genoa University.
- **Action Plans supporting the mainstreaming of disability and gender**, like the Spanish National *Action Plan for Women with disabilities (2007)* adopting a dual strategy to face the double discrimination experienced by women with disabilities, with positive actions and transversal measures in the various spheres of action recorded in the plan.

Policy recommendations

To conclude, although the multiple discrimination faced by women with disabilities is increasingly recognised in the debate and policymaking, the steps taken are still too modest and austerity measures risk the impediment of further developments. It is important that this issue be taken up by women and disability associations and in academic research, in order to increase the social and political awareness on the multiple discrimination faced by women with disabilities and the need for targeted measures.

The UN Committee on the Rights of Persons with Disabilities, and the stakeholders and experts interviewed in the case studies underline that the implementation of the UN Convention is still hampered by a number of challenges mainly due to:

- the lack of strategies with a comprehensive approach;
- the lack of social awareness on the problem of multiple discrimination;
- the lack of research and information, especially with respect to statistical data;
- the lack of political representation of people with disabilities, especially women.

In order to address these challenges, the UN Committee and the European Parliament stress the need for EU Institutions and Member States to **incorporate the perspective of women with disabilities into their policies and programmes on gender equality, as well as a gender mainstreaming approach in their strategies on disability**. The

European Union and Member States are also recommended to develop affirmative actions addressed to women with disabilities as well a policy framework for participation of women with disabilities in the labour market.

In detail, a gender perspective has to be considered when designing and implementing the following measures contained in the UNCRPD.

- **Awareness-raising measures (art. 8).** These measures should address compounded disability and gender stereotypes that can be particularly harmful.
- **Accessibility measures (art. 9).** The lack of consideration of gender and/or disability aspects prevents women with disabilities from living independently and participating fully in all areas of life on an equal basis with others. This includes measures relating to the physical environment, transportation, information and communications, and to other facilities and services open or provided to the public.
- **Measures supporting living independently and being included in the community (art. 19).** Cultural norms and patriarchal family values may adversely affect the right of women with disabilities to choose their place of residence, and often oblige them to live in a particular living arrangement. Old age and impairment can also increase their risk of institutionalisation, and consequently the risk of being exposed to violence and abuse.
- **Social protection (art. 28).** Poverty is both a compounding factor and the result of multiple discrimination. Women with disabilities, especially in old age, are more likely to be institutionalised and do not have equal access to social protection and poverty reduction programmes.
- **Measures supporting access to education (art. 24) and employment (art. 27).** Gender and disability stereotypes enhance discriminatory and segregationist attitudes, policies and practices in education and training. Concerning employment, persons with disabilities face general barriers when trying to exercise their right to work. Women with disabilities also face the specific barriers faced by women in general, including the lack of work-balance measures, sexual harassment and unequal pay, and discriminatory attitudes dismissing their claims.
- **Health and rehabilitation measures (arts. 25 and 26).** Women with disabilities face barriers to accessing health and rehabilitation services including, for example, the lack of education and information on sexual and reproductive health and rights; physical barriers to gynaecological, obstetric and oncology services; and attitudinal barriers to fertility and hormone treatments. In addition, physical and psychological rehabilitation services are often not available for the type of impairments and health problems women are more likely to suffer, and when available may not be age or gender sensitive.
- **Participation in political and public life (art. 29).** Women and girls with disabilities are disproportionately under-represented in public decision-making. Due to multiple forms of discrimination, they often have fewer opportunities to establish or join organisations that can represent their needs as women with disabilities.

The recommendations provided in a 2009 study for the European Commission (Ecotec, 2009) to comply with these indications are still applicable. **EU institutions** should revise both their disability and gender equality policies and:

- **Develop a comprehensive information and awareness-raising campaign** on the UN Convention to promote rights and combat prejudice and discrimination against disabled persons and women with disabilities in particular.

- **Adopt a women-friendly European Accessibility Act**, with accessible enforcement and complaint mechanisms, to ensure that people with disabilities have full and barrier-free access to products, infrastructures and services.
- **Enforce the implementation of EU legislation on accessible information and public websites.** These campaigns should target women with disabilities and their families, public authorities, companies, the media and organisations representing people with disabilities and women.
- Explore the possibility of a **European Directive for the equal treatment of persons with disabilities** in all policy fields, and fully incorporating the gender dimension.
- **Support Member States in ensuring the right of disabled people to live independently** and to be included in the community and **guarantee a sufficient funding** for measures supporting people with disabilities, and women in particular, in the Structural Funds post-2020, in a context of increasing pressure on the EU's budget.
- **Support Member States in safeguarding the rights and fundamental freedoms of women with disabilities**, ensuring full legal capacity/equal recognition before the law as well as their participation in political and public life.
- **Support and fund the development of a complete and up-to-date statistical systems** with disaggregated data and indicators by sex, age and type and degree of impairment to support research and informed policy making, and to pave the way for the monitoring and evaluating of how effectively the Convention is being implemented.
- **Support research activity, as well as peer reviews and mutual learning activities** involving research institutions, national bodies with policy responsibility for issues related to women with disabilities, and civil society bodies at European and national level. EU programmes, like the Rights, Equality and Citizenship 2014-2020 Programme, the Employment and social innovation (EaSI) Programme, ESI Funds and Horizon 2020, could support these research and learning activities.
- **Support the associations of women with disabilities** and involve them in the policy making consultation mechanisms.
- **Strengthen their internal bodies and mechanisms on disability and gender equality issues.** In this respect EU Institutions may consider: i) ensuring that the Disability High-Level Group addresses the intersectionality of gender and disability; ii) strengthening the Commission's inter-service working groups on disability; and iii) supporting capacity building within European institutions on issues relating to women with disabilities.

Similar recommendations apply to **Member States**. Member States should comply with the UNCRPD, by:

- **Evaluating and reforming the legislative and policy frameworks** on disability and gender issues. The different impact of existing policies on women and men with disabilities should be assessed in order to derive indications for more effective measures.
- Designing and implementing a comprehensive **National Strategy for Women with Disabilities** covering the full range of policy fields set out in the UN Convention.
- Ensuring that **statistics and data collected are disaggregated by gender**.

- **Increasing the representation and participation of women with disabilities** in decision-making, through consultation, training and awareness-raising measures.

1. INTRODUCTION

The aim of the study is to exploit existing data and information on the access of women with disabilities to the labour market, and to assess how multiple discrimination (i.e. gender and disability) affects the employment opportunities of women with disabilities. It will also evaluate how EU and national legal and policy frameworks address this issue, in order to provide policy recommendations to improve the situation of female workers with disabilities.

To this end, the study will also assess to what extent a dual approach is adopted, combining a *gender mainstreaming approach* (e.g. the internalisation of a gender perspective in all disability policies and legislation) with *measures targeted to women with disabilities* and clear indications on implementation and monitoring mechanisms.

As described in the Methodological Note, the study is based on the triangulation of different and complementary methods, data collection tools and activities, to allow for the synthesis of different types of evidence and from different information sources. Secondary information and data (drawn from existing studies, documents and data sources) as well as primary data (acquired through case studies) will be at the basis of the analysis.

To undertake this, the research activities have been structured into five research phases and the following research tools:

- desk analysis, including a literature and legislative review and a statistical analysis of the available data on the topic
- field work, to be carried out through structured country studies
- collection of examples of good practices, detected through both the desk analysis and the field work.

This **Final Report** presents the main findings of the study and it is structured into six chapters.

Following the Introduction, chapter 2 provides a discussion of the background to the study with a focus on the debate at international and European level on the intersection of gender and disability.

Chapter 3 describes the main features of the employment and socio-economic conditions of women with disabilities, with focus on the gender and disability gaps women with disabilities face when their socio-economic conditions are compared to men with disabilities (gender gap) and to women without disabilities (disability gap). The analysis is based on the data and indicators available at the EU level, in order to derive, whenever possible, differences across countries. Eurostat makes available a number of data on disability at EU and national level, in some cases disaggregated by gender and age, and provided by different statistical sources. However, the available data sources adopt different definitions of disability, making it almost impossible to make a comparison across them.

Chapter 4 then provides an overview of the existing legal and policy framework in order to evaluate whether and to what degree it addresses multiple discrimination. The analysis is focused on international and European law and policies on disability and gender equality, in order to verify whether measures specifically addressed to disabled women and aimed to combat multiple discriminations have been adopted. In addition, this chapter considers whether and to what extent European Structural and Investment Funds address the employment and socio-economic conditions of women with disabilities.

Chapter 5 provides a comparative analysis of the seven case studies considered in depth, with focus on the national debate and policies, including the use of Structural Funds. In addition this chapter compares the selected national good practices in order to derive indications for the policy recommendations presented in the final chapter 6.

Five annexes complete the report. Annex 1 provides an assessment of the availability and robustness of existing Eurostat data on disability and employment in the perspective of gender-disaggregated analysis. Annex 2 provides additional statistical tables. Annex 3 presents some comparative tables of the seven country case studies. Annex 4 includes the disability policy fiches, and Annex 5 the seven case country case studies.

2. INTRODUCTION THE STUDY: DEFINITIONS AND GENDER RELEVANCE

KEY FINDINGS

- The interest in identifying and understanding the phenomenon of multiple discrimination is relatively new.
- Multiple discrimination occurs when a person is subjected to discrimination on more than one ground. In the gender literature, different terms have been used to refer to this: additive discrimination, compound discrimination and intersectional discrimination.
- Women with disabilities have historically been neglected both in policymaking and in the disability and gender equality literature, as well as by the disability and women's movements.
- However, women with disabilities are likely to face multiple disadvantages and forms of exclusion and to suffer high level of stigmatisation as undesirable, asexual and dependent, giving rise to sexual and physical abuse.
- Access to social and health services is highlighted in literature as a problematic area for women with disabilities in Europe together with their under-representation in the labour market and in access to full citizenship rights.
- The lack of appropriate childcare and support for care of the elderly, or the high cost of such care can make it much more difficult for women with disabilities than for men to gain access to education.

Women are more likely than men to report a basic activity difficulty (15.1 % versus 12.9 %) or a disability in employment (11.9 % versus 10 %), or a disability according to the EHSIS definition (14 % versus 11.7 %) ¹.

However, multiple discrimination (McCall, 2001) ² and intersectional discrimination (European Training and Research Centre for Human Rights and Democracy, 2012) on the grounds of gender and disability remain significantly under-researched ³.

Indeed, women with disabilities have historically been neglected by those concerned with issues of disability as well as the feminist movement. It is only since the mid 1980s that serious attempts have been made to identify and understand how being female and having a disability interacts and how women with disabilities view their experiences ⁴.

¹ See later section 3.1

² McCall, L., (2001), *Complex inequality* [electronic resource]: *gender, class, and race in the new economy*, New York, Routledge.

³ Among the important studies to be quoted, please see the study published by the Commission in 2007 on The situation of women with disabilities in the framework of the European Year of Equal Opportunities for All and in view of the CRPD51. In 2011, the European Disability Forum presented a 2nd Manifesto on the rights of women and girls with disabilities in the European Union and in 2012, USAID put forward the report Women with disabilities in Europe and the Eurasia region.

⁴ *Women with disabilities: issues, resources, connections revised*, Rannveig Traustadottir, The Center on Human Policy, Syracuse University, June 1997.

2.1. Multiple discrimination: definition

The interest in identifying and understanding the phenomenon of multiple discrimination is relatively new, being explored mainly by sociologists and lawyers⁵.

Multiple discrimination occurs when a person is subjected to discrimination on more than one ground. Individuals can in fact belong to several disadvantaged groups at the same time, and potentially suffer specific forms of discrimination. For this reason in the academic field some scholars argued that a single issue analysis of discrimination did not reflect reality.

In the gender literature different terms have been used to refer to this: additive discrimination, compound discrimination and intersectional discrimination⁶.

According to the Fundamental Rights Agency (FRA, 2012), *multiple discrimination* occurs when a person is discriminated on the basis of several grounds operating separately, for instance, by being treated less favourably on the grounds of ethnic origin in one situation and because of gender in another⁷. A different term used to describe this form of discrimination is additive discrimination⁸.

The UN Beijing Platform for Action for Equality, issued in 1995, adopts the concept of 'multiple discrimination', as the 'multiple barriers' women and girls face ... *to their empowerment and advancement because of such factors as their race, age, language, ethnicity, culture, religion or disability or because they are indigenous people*⁹. In these cases the terms *additive* or *compound* discrimination can also be used in the literature.

Compound discrimination, instead describes a situation where a person suffers discrimination on the basis of two or more grounds at the same time and where one ground adds to discrimination on another ground – in other words, one ground becomes compounded by one or more other discrimination grounds¹⁰.

As regards intersectional discrimination literature agrees that it occurs when somebody is discriminated against on several grounds at the same time and in such a way that these are inseparable, as for instance in the case of forced sterilisation of Roma women where discrimination intersects gender, ethnicity and poverty¹¹.

⁵ Tackling Multiple Discrimination – Practices, policies and laws, European Commission, 2007

⁶ Burri, S. and Schiek, D., (2009), *Multiple discrimination in EU law, opportunities for legal responses to intersectional gender discrimination?*, European Network of Legal Experts in the Field of Gender Equality – European Commission; Makkonen, T., (2002), *Multiple, compound and intersectional discrimination: bringing the experiences of the most marginalized to the fore*, Institute for Human Rights. Åbo Akademi University.

⁷ FRA, (2012), *Multiple discrimination in healthcare*, <http://fra.europa.eu/en/project/2011/multiple-discrimination-healthcare>

⁸ Harnet, Sarah (2003) Equality at the Intersections: The Legislative and Judicial Failure to Tackle Multiple Discrimination, Oxford Journal of Legal Studies, Vol.23, No. 1, p. 68

⁹ United Nations (1995), *Beijing Declaration and Platform for Action*, United Nations, Reprinted by UN Women in 2014.

¹⁰ Moon, Gay (2006) "Multiple discrimination – problems compounded or solutions found?" Justice Journal pp. 86-102.

¹¹ European Training and Research Center for Human Rights and Democracy, (2012), *Locating intersectional discrimination*, a detailed report on the Conference of 18th/19th October 2012 in Graz on 'Intersectional disadvantage and discrimination – social realities and legal practice', <http://antidiscrimination.etc-graz.at/cms/index.php?id=22>. Intersectional discrimination is also referred to in a very recent study for the European Parliament – FEMM Committee (2017), *Gender Equality Plans in the private and public sectors in the European Union*, [http://www.europarl.europa.eu/RegData/etudes/STUD/2017/583139/IPOL_STU\(2017\)583139_EN.pdf](http://www.europarl.europa.eu/RegData/etudes/STUD/2017/583139/IPOL_STU(2017)583139_EN.pdf)

The term *multiple discrimination* is used in EU policy documents and legislation, even if it might be associated with a separateness of strands of discrimination, which in reality are intersected¹².

2.2. Relevance of the gender dimension in disability issues

Women with disabilities have historically been neglected both in policymaking and in the disability and gender equality literature, as well as by the disability and women's movements. Research often assumes the experience of disabled men to be representative of the disabled experience in general and consequently the majority of research on people with disabilities has not included a gender perspective.

Moreover, although women with disabilities are collectively defined as a social monolith¹³, the differences among disabled women are substantial, and they experience the phenomenon of disability differently: their experience depends on the type and severity of disability, the age and manner of disability onset, socio-economic and demographic characteristics, and biographical experiences. On the other hand, social norms contribute to the stigmatisation of women with disabilities as undervalued, undesirable, asexual and dependent, and give thus rise to abuse.

The greater vulnerability of disabled women can thus be understood through an intersectional perspective as simultaneous discrimination relating to disability and gender¹⁴.

The gender dimension is in fact particularly relevant when addressing disability issues, as women with disabilities are likely to face multiple disadvantages and forms of exclusion.

Indeed, gendered studies of disability conducted in Western industrial nations reveal some **important patterns**¹⁵. As regards the public dimension for example, more women than men are classified as disabled, particularly as ageing populations mean that larger proportions of the elderly are women with impairments. The type of impairments are indeed different for women and men, with women more likely to experience degenerative conditions, while men are more likely to experience injury-related events. Moreover, as detailed in chapter 3, while all disabled people are much more likely to live in poverty, women with disabilities are likely to be poorer than men, are less likely to be in the paid workforce than either men with disabilities or non-disabled women, and in general have lower incomes from employment. Women with disabilities are also less likely to have access to rehabilitation than men, and to employment outcomes when they do receive rehabilitation¹⁶.

When considering the private field, some studies underlined some interesting patterns as regards the gender dimension of disability, referring for example to the following: disabled women are more likely to experience sexual violence in relationships and in institutions, in particular being vulnerable to domestic violence; moreover, when sexually abused, disabled women are likely to have few if any social supports or options; women with disability experience more extreme social categorisation than men, being more likely to be seen

¹² Yuval-Davis, N., (2007), Intersectionality, citizenship and contemporary politics of belonging, *Critical Review Of International Social And Political Philosophy* Vol. 10, Iss. 4, 2007.

¹³ Foster, Kenneth, and Mark Sandel. 2010. Abuse of Women with Disabilities: Toward an Empowerment Perspective. *Sexuality and Disability* 28: 177–86.

¹⁴ Köbsell, Swantje. 2010. *Gendering Disability: Behinderung, Geschlecht und Körper*. In *Gendering Disability: Intersektionale Aspekte von Behinderung und Geschlecht*, ed. Jutta Jacob, Swantje Köbsell, and Eske Wollrad, 17–34. Bielefeld: Transcript .

¹⁵ Helen Meekosha (2004), *Gender and disability*, Draft entry for the Sage Encyclopaedia of Disability

¹⁶ Meekosha, H. and L. Dowse (1997). "Enabling Citizenship: Gender, Disability and Citizenship." *Feminist Review*(Autumn): 49-72

either as hypersexual or de-sexualised and inert. As regards the developing countries, gender patterns in relation to disability indicate that disabled girls are likely to find their access to education even more limited than girls in general¹⁷.

Evidence also suggests that women tend to be directed towards home-based activities, while men are likely to be supported into more public and outward-looking opportunities.

Thus there are gender differences in the ways disability affects women's and men's quality of life and socio-economic conditions. It is also increasingly acknowledged that women and men may present specific forms of disabilities and needs which are seldom considered in the policy agendas of many countries¹⁸. For example, **the most common forms of disability among women are those occurring in old age**, as women live longer than men on average. Gender-based differences also exist in diagnoses of mental health problems, with women more likely to experience anxiety and depression, often linked to family and work at home, but these disabilities are rarely recognised for pension/disability insurance.

In addition there is ample evidence that women with disabilities experience major psychosocial problems that remain largely neglected including depression, stress, lowered self-esteem, and social isolation¹⁹.

Access to social and health services is highlighted as a problematic area for women with disabilities in Europe: women with disabilities in fact face a significant number of barriers in accessing health and social services that can be related to physical accessibility, limited adaptability of health services in the field of motherhood, sexuality and reproductive health, and lack of trained professionals. Furthermore, women with disabilities typically receive health services that are rarely targeted specifically at them²⁰.

Women with disabilities are also more likely than disabled men to be under-represented in the labour market and in access to full citizenship rights. In most countries disabled women are more likely to be out of the labour force than disabled men, although the relative importance of the gender and disability barriers differs from country to country. The extent of participation by women with disabilities in the labour market is closely related to the definitions, criteria and incentives provided by welfare regimes, as well as to social and cultural barriers. Efforts to raise the labour market participation of women with disabilities, therefore, needs to take the context of each welfare regime and social approaches to disability into account²¹.

Even when women with disabilities work, they are more likely than men to be confronted with disadvantage, exclusion and discrimination. Being women and disabled, they often experience unequal hiring and promotion conditions, unequal access to training and retraining, unequal pay for equal work and occupational segregation²². Even when they do have access to training and complete it, they are more likely to remain unemployed or work in part-time jobs.

¹⁷ Helen Meekosha (2004), *Gender and disability*, Draft entry for the Sage Encyclopaedia of Disability

¹⁸ <http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTSOCIALPROTECTION/EXTDISABILITY/0>

¹⁹ Nosek, M. A. and R. B. Hughes (2003). "Psychosocial issues of women with physical disabilities: the continuing gender debate." *Rehabilitation Counseling Bulletin* 46 (4): 224

²⁰ Ecotec, *Study on the situation of women with disabilities in light of the UN Convention for the Rights of Persons with Disabilities (VC/2007/317)* A Final Report for the DG Employment, Social Affairs and Equal Opportunities of the European Commission, December 2009.

²¹ Ibidem

²² O'Reilly, A., (2003), *The right to decent work of persons with disabilities*, Skills Working Paper No. 14, ILO Geneva; ILO (2007), *Achieving equal employment opportunities for people with disabilities through legislation – Guidelines*, ILO Geneva (First published 2004, revised edition 2007).

Social protection systems do not typically recognise women with disabilities, as they are often based on the medical model of disability and, in such cases, tend not to take account of the extent to which women become disabled due to the working environment. Hence, there are barriers to women's participation in rehabilitation programmes, disabilities or diseases related to home care and care services are usually not considered in insurance schemes, and no preventive and long-term care programmes are envisaged in most countries.

There is also a **significant disability disadvantage in education and training** with rates of participation and attainment in education for people with disabilities significantly lower than for people without disabilities; however, as in the case of non-disabled women the gender effect is larger in vocational training with women with disabilities showing lower rates of participation.

The **lack of appropriate childcare and support for care of the elderly**, or the high cost of such care can make it much more difficult for women with disabilities than for men to gain access to education²³. It has been shown in fact, that vocational training programmes for people with disabilities have success with women only if taking into account their specific needs as regards, for example, the timing, the location or the provision of childcare facilities.

Women with disabilities are also under-represented in recreational activities, culture and sport, as well as in terms of participation, leadership, management and media coverage.

In some countries, **prejudices against women and girls with disabilities result in widespread denial of their right to experience their sexuality, to create families and have children**. Forced sterilisation, especially in the case of institutionalised women, is often performed under the auspice of legitimate medical care (including prevention of pregnancy resulting from sexual abuse) or the consent of parents or siblings in their name. The denial of reproductive rights also involves the exclusion of women with disabilities from comprehensive reproductive and sexual healthcare, poorly managed and assisted pregnancy and birth and the denial of rights to parenting. In many countries these practices are justified as the 'best interests' of girls and women with disabilities, however they are often a way to compensate for the lack of adequate measures to support caregivers and mothers with disabilities in their parenting and to protect women and girls with disabilities against sexual abuse and exploitation²⁴.

Regarding this concern, **violence against women with disabilities** is probably the field that has so far been studied the most, whether or not in the context of violence against women generally. Research on the issue of violence and abuse against women with disabilities encounters the difficulties they experience in expressing their suffering to another person.

Nevertheless, in the past decade, research on violence against women with disabilities has found indications of highly increased prevalence rates compared to women without disabilities²⁵. A girl with a disability is twice as likely to be sexually or physically abused than a girl without a disability, and the most dangerous place for her is in her own home²⁶.

²³ Maria Leonor Beleza (2003), *Discrimination against women with disabilities*, Council of Europe.

²⁴ Ecotec, *Study on the situation of women with disabilities in light of the UN Convention for the Rights of Persons with Disabilities (VC/2007/317)* A Final Report for the DG Employment, Social Affairs and Equal Opportunities of the European Commission, December 2009.

²⁵ Schröttle, Monika, Sandra Glammeier, Brigitte Sellach, Claudia Hornberg, Henry Puhe, Barbara Kavemann, and Julia Zinsmeister. 2013. *Lebenssituation und Belastungen von Frauen mit Beeinträchtigungen und Behinderungen in Deutschland. Langfassung*. BMFSFJ, Berlin.

Women with disabilities are indeed at greater risk of being abused than other people, but **access to justice and legislation to prevent exploitation, violence and abuse typically lacks a focus on disability**, even when a gender dimension is present. In many cases the higher risks of women with disabilities of being victims of abuse or not being able to exercise their rights is related to their greater 'invisibility' and isolation – an invisibility often linked to their lower presence in the labour market.

<http://www.bmfsfj.de/RedaktionBMFSFJ/Broschuerenstelle/Pdf-Anlagen/Lebenssituation-und-Belastungen-von-Frauen-mit-Behinderungen-Langfassung-Ergebnisse.pdf>

²⁶ Leslie Myers (1999), "People with disabilities and abuse: implications for centres for independent living", Houston.

3. THE EMPLOYMENT AND SOCIO-ECONOMIC CONDITIONS OF WOMEN WITH DISABILITIES

KEY FINDINGS.

- Eurostat makes available a number of data on disability at EU and national level, in some cases disaggregated by gender and age. However, the available data sources: i) adopt different definitions of disability, making it almost impossible to make a comparison across them; ii) are compiled from household surveys, excluding people living in collective households and institutions and those below 15 or 16 years of age.
- Women are the majority (54 %) of people with disabilities and are more likely than men to report a basic activity difficulty (15.1 % versus 12.9 %) or a disability in employment (11.9 % versus 10 %), or a disability according to the EHSIS definition (14 % versus 11.7 %). In 2011 the EU LFS ad hoc module on the employment of disabled people reported over 24 million women aged between 15 and 64 years in the EU28 with a basic activity difficulty and about 19 million with a 'disability in employment'.
- Due to the intersection of disability and gender, women with disabilities suffer a greater disadvantage compared to men with disabilities. On average, in the EU28 disability gaps (calculated by comparing the situation of women with disabilities to that of women without disabilities) are higher than gender gaps (calculated by comparing the situation of women and men with disabilities) in all the dimensions considered, and particularly in the labour market and income conditions.
- As for women in general, women with disabilities perform better than their male counterpart in participation to education and training; however, they show a lower education attainment and lower participation in training than women without disabilities.
- Disability represents a barrier for both women and men in accessing the labour market. Women with disabilities are however more likely to be inactive both with respect to men with disabilities and to women without disabilities. When employed women with disabilities are more likely than men and women without disabilities to work part-time and from home, while no significant differences emerge with regard to temporary employment.
- The difficult access to employment for women with disabilities results in a greater poverty risk and a likelihood of meeting financial difficulties compared to both men with disabilities and women without disabilities. Income, poverty and living conditions of women with an activity limitation are worse than those of women with no such limitation, although there are wide differences across Member States. Gender gaps are generally lower than disability gaps, reflecting the difficult economic conditions of all the people with disabilities. Employment and social transfers appear to reduce the gender gap in the share of people with activity limitation at risk of poverty, although to a lower extent than for those with no limitations.

The analysis presented in this chapter is based on the elaboration of publicly available (non-confidential) Eurostat data. Whenever possible data are disaggregated by Member State, although in some cases (e.g. small Member States) this is likely to produce

problems of statistical significance, due to the restricted number of individuals to be considered (i.e. women with disabilities). In Chapter 5 we present a further comparative analysis on a subset of selected case studies based on the indicators and integrated, whenever possible, with other data from national sources provided by national country expert. For more details see 5.2.

The following Eurostat data sources have been considered:

- the 2011 Ad Hoc Module of the European Labour Force Survey (EU LFS) on the employment of persons with disabilities;
- the one-off 2012 European Health and Social Integration Survey (EHSIS);
- the European Statistics on Income and Living Conditions (EU-SILC).

Annex 1 provides an assessment of the quality of existing Eurostat data on disability and employment in the perspective of gender-disaggregated analysis.

As discussed more in detail in Annex 1, and summarised in Box 3.1, the **available statistics and data sources adopt different definitions of disability**, making it almost impossible to make a comparison across data sources. The main reason is the existence of various definitions for disability, due to the lack of a common underlying model of disability. Some countries define disability according to the level of performance in employment or in other social activities, while others consider only the medical or rehabilitation aspects. These definitions are inconsistent between countries but also between policy sectors in the same country. Therefore, there is an evident need for measurement methods in the health and disability sector towards a common understanding of the distribution and types of impairments of individuals and populations (Leonardi et al., 2014)²⁷.

Box 3.1: Definitions of disability adopted in the main eu data sources

According to the WHO's ICF classification, disability is an umbrella term covering impairments, activity limitations and participation restrictions: An impairment is a problem in body function or structure; an activity limitation is a difficulty encountered by an individual in executing a task or action; a participation restriction is a problem experienced by an individual's involvement in life situations. Thus, disability is a complex phenomenon, reflecting an interaction between features of a person's body and features of the society in which the person lives.

Eurostat makes available a number of data on disability at EU and national level, in some cases disaggregated by gender and age, and provided by different statistical sources. Existing EU disability statistics are based on household surveys, thus excluding people living in collective households and institutions in which the prevalence of disability may be high; in addition, most of them have an age threshold excluding people aged less than 15 or 16 years. Moreover, the data sources available at EU level adopt different definitions of disability:

- A) The **2011 Ad Hoc Module of the European Labour Force Survey (EU LFS)** on the employment of persons with disabilities adopts the following definitions of disability:
- Definition 1 – people having a 'basic activity difficulty' (such as sight, hearing, walking, communicating);

²⁷ Leonardi M, Koutsogeorgou E, Quatrini A, Covelli V (2014), Women with disability across Europe: issues on updated and available data, *J Women's Health Care* 3: 175.

- **Definition 2** – people having an ‘employment disability’ (limited in-work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD).

As shown in the analysis below, the adopted definition of disability is not neutral; disability gaps appear to be usually underestimated when adopting the first definition compared to the second one.

- B) In the **one-off 2012 European Health and Social Integration Survey (EHSIS)**, according to the biopsychosocial model applied to the survey, people with disabilities are those who face barriers to participation in any of 10 life areas (including employment and training, and education)²⁸, associated inter alia with a health problem or basic activity limitation. Therefore, a person with a health problem or basic activity limitation as barrier in any life domain is categorised as disabled.
- C) In **EU-SILC**, disability is approximated according to the concept of global activity limitation, which is defined as a ‘limitation in activities people usually do because of health problems for at least the past six months’ (that is a suitable proxy for disability, according to both the scientific community and disabled persons’ organisations).

Gender-disaggregated Eurostat data do not allow distinguishing by physical or mental disabilities and degree of disabilities. Box 3.2 below summarises the main information that can be derived from the OECD and WHO data on mental disability and illness.

Box 3.2: Mental disability or illness and work

Mental health has been defined by the World Health Organization (WHO) as ‘a state of well-being in which the individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community’ (WHO, 2007)²⁹. Mental ill-health falls into two categories:

- **Psychological** distress or symptoms that do not reach the clinical threshold of a diagnosis within psychiatric classification systems. Psychological distress is a phenomenon that can concern everybody from time to time.
- **Mental disorders** which do reach the clinical threshold of a diagnosis according to the classification systems. Mental disorders are on average more disabling and affect only a fraction of the adult population.

Mental disorders are quite diverse in terms of their underlying diagnosis, ranging from major psychiatric impairments (such as schizophrenia and other psychotic disorders, bipolar disorders and severe depression, severe personality disorders and severe substance abuse) to less severe disorders (such as anxiety disorders or episodic depression, and symptoms such as anxiety and depression which are often a secondary condition in addition to a physical disability).

The diagnosis gives important indications about possible work-related problems (e.g. possible work incapacities and the specific support needs), but the extent of disability can vary significantly across individuals with the same diagnosis. In fact, beyond the diagnosis,

²⁸ These areas are: mobility, transport, accessibility to buildings, education and training, employment, internet use, social contact and support, leisure pursuits, economic life, attitudes and behaviour.

²⁹ WHO (2007), ICF-International Classification of Functioning, Disability and Health, World Health Organization, Geneva.

the severity of the disorder, its duration and chronicity are the most important determinants of current and future disability, and therefore it is most important to understand the relationship between mental health and work. The more severe, enduring and chronic a mental disorder is, the larger is the impact on disability and work capacity.

An important question for policymakers is the extent to which mental disorders are disabling. A mental disorder is a psychological or behavioural pattern, possibly but not necessarily associated with disability. Contrasting disorder and disability, two complementary messages can be derived.

First, even among those with severe mental disorder, a large segment is not necessarily suffering from disability; many of them have substantial or even full ability and work capacity.

At the same time, many of those with far more widespread common mental disorders do report disability and will face significant difficulties in accessing the labour market.

The available evidence shows that (OECD, 2012; WHO website on Mental Health Programme)³⁰:

- Based on population surveys, the employment rate of people with 'common mental disorders' is around 60-70%, or 10–15 percentage points lower than for people with no mental disorder. This seems a high rate but, given the large size of this group, this gap reflects a large output loss to the economy, for the individuals concerned and their families. The corresponding employment rate of people with 'severe mental disorders' is around 45–55 %.
- Despite the positive effects of employment on mental health, too many people with a mental disorder are out of work. People with a severe mental disorder are 6–7 times more likely to be unemployed than people with no such disorder, and for those with a common mental disorder it is 2–3 times. Moreover, there is a high share of long-term unemployment (as a percentage of total unemployment) among people with severe mental disorders, leading to a high risk of discouragement and labour market withdrawal.
- Women and people with low educational attainment are highly over-represented in the group of people with a mental disorder in all countries. Differences across age are small in most cases, with some over-representation of young adults and some under-representation of older workers.
- Gender is a critical determinant of mental health and mental illness (see WHO website on Mental Health Programme). Gender determines the differential power and control men and women have over the socio-economic determinants of their mental health and lives, their social position, status and treatment in society and their susceptibility and exposure to specific mental health risks.
- Gender-specific risk factors for common mental disorders that disproportionately affect women include gender-based violence, socio-economic disadvantage, low income and income inequality, low or subordinate social status and rank, and unremitting responsibility for the care of others.

Sources: OECD (2012), *Sick on the Job? Myths and realities about mental health and work*, Mental Health and Work, OECD Publishing. World Health organisation (WHO) Website – Mental Health Programme

http://www.who.int/mental_health/prevention/genderwomen/en/

³⁰ OECD (2012), *Sick on the Job? Myths and Realities about Mental Health and Work*, Mental Health and Work, OECD Publishing; World Health organisation (WHO) Web site – Mental health programme
http://www.who.int/mental_health/prevention/genderwomen/en/

As previously mentioned, women with disabilities suffer a double disadvantage due to the intersection of gender and disability which penalises them both with respect to men with disabilities (gender discrimination) and to women without disabilities (disability discrimination). In order to consider both these aspects and to assess their different dimension, we follow the methodology adopted in a recent ANED paper³¹ and calculate two indicators (see Box 3.3 for further details):

- a **gender gap**, resulting from the comparison between women with disabilities and men with disabilities;
- a **disability gap**, resulting from the comparison between women with, and women without, disabilities.

Box 3.3: Definitions of gender gap and disability gap

In the socio-economic literature, the gender gap is usually referred to as systematic differences in the outcomes that men and women achieve in the labour market, in education and training, in pay, as well as in social inclusion (e.g. income, poverty).

In this study for each indicator, we calculate the gender gap as the difference, in percentage points (p.p.), between the indicator of men with disabilities and the indicator of women with disabilities:

$$\text{gender gap} = \text{Indicator } X_i \text{ (MEN WITH DISABILITIES)} - \text{Indicator } X_i \text{ (WOMEN WITH DISABILITIES)}$$

with $i = 1$ to n , indicating the indicators adopted in this study

Gender gaps may be positive or negative. Whether this implies a better or a worse outcome for women with disabilities than for men with disabilities depends on the indicators considered.

The **disability gap** is referred to systematic differences in outcomes that women with disabilities and women without disabilities achieve in the labour market, in education and training, in pay as well as in social inclusion. As for the gender gap, for each indicator used in this study, a disability gap is computed as the difference in percentage points (p.p.) between the indicator of women with disabilities and the indicator of women without disabilities:

$$\text{disability gap} = \text{Indicator } X_i \text{ (WOMEN WITH DISABILITIES)} - \text{Indicator } X_i \text{ (WOMEN WITHOUT DISABILITIES)}$$

with $i = 1$ to n , indicating all the indicators adopted in this study.

Disability gaps may be positive or negative according to the indicator considered.

Table 3.1 shows how gender and disability gaps are computed for each indicator and how to interpret the gaps for the situation of women with disabilities compared to men with disabilities, and to women without disabilities.

³¹ See the report European comparative data on Europe 2020 & People with disabilities – Task 6: Comparative data and indicators by the Academic Network of European Disability Experts (ANED, 2014).

Table 3.1: How to compute and to read gender gaps and disability gaps for each indicator

Indicator	Gender Gap			Disability Gap		
	<i>How is computed</i>	<i>Positive gap</i>	<i>Negative gap</i>	<i>How is computed</i>	<i>Positive gap</i>	<i>Negative gap</i>
Share of people (15-64) by type/presence of disability (and by age, marital status, household type)	<i>Difference between the share of men with disabilities and the share of women with disabilities</i>	Higher incidence of disabilities among men	Higher incidence of disabilities among women	--	--	--
Rate of early leavers from education and training (18-24)	<i>Difference between the early leavers rate of men with disabilities and the early leavers rate of women with disabilities</i>	Men with disabilities have a higher risk than women with disabilities	Men with disabilities have a lower risk than women with disabilities	<i>Difference between the rate of early leavers of women with disabilities and the rate of early leavers of women without disabilities</i>	Women with disabilities have a higher risk than women without disabilities	Women with disabilities have a lower risk than women without disabilities
Distribution of people (15-64) by educational level	<i>Difference between the share of men with disabilities and the share of women with disabilities in each educational level</i>	Higher share of men with disabilities in the level of educational attainment with respect to women with disabilities	Lower share of men with disabilities in the level of educational attainment with respect to women with disabilities	<i>Difference between the share of women with disabilities and the share of women without disabilities at each educational level</i>	Higher share of women with disabilities in the level of educational attainment with respect to women without disabilities	Lower share of women with disabilities in the level of educational attainment with respect to women without disabilities
Tertiary educational attainment (age group 30-34)	<i>Difference between the share of men with disabilities with a tertiary educational attainment and the share of women with disabilities with a tertiary educational attainment</i>	Higher share of highly educated men with disabilities with respect to women with disabilities	Lower share of highly educated men with disabilities compared to women with disabilities	<i>Difference between the share of women with disabilities with a tertiary educational attainment and the share of women without disabilities with a tertiary educational attainment</i>	Higher share of women with disabilities with tertiary educational attainment than women without disabilities	Lower share of women with disabilities with tertiary educational attainment than women without disabilities

Indicator	Gender Gap			Disability Gap		
	<i>How is computed</i>	<i>Positive gap</i>	<i>Negative gap</i>	<i>How is computed</i>	<i>Positive gap</i>	<i>Negative gap</i>
	<i>tertiary educational attainment</i>			<i>educational attainment</i>		
Participation rate in education and training (15-64)	<i>Difference between the participation rate in education and training of men with disabilities and the participation rate of women with disabilities</i>	Higher participation rate in education and training of men with disabilities with respect to women with disabilities	Lower participation rate in education and training of men with disabilities with respect to women with disabilities	<i>Difference between the participation rate in education and training of women with disabilities and the participation rate of women without disabilities</i>	Higher participation rate in education and training of women with disabilities than women without disabilities	Lower participation rate in education and training of women with disabilities compared to women without disabilities
Employment rate (15-64)	<i>Difference between the employment rate of men with disabilities and the employment rate of women with disabilities</i>	Higher employment rate of men with disabilities than women with disabilities	Lower employment rate of men with disabilities than women with disabilities	<i>Difference between the employment rate of women with disabilities and the employment rate of women without disabilities</i>	Higher employment rate of women with disabilities compared to women without disabilities	Lower employment rate of women with disabilities compared to women without disabilities
Unemployment rate (15-64)	<i>Difference between the unemployment rate of men with disabilities and the unemployment rate of women with disabilities</i>	Higher unemployment rate of men with disabilities compared to women with disabilities	Lower unemployment rate of men with disabilities compared to women with disabilities	<i>Difference between the unemployment rate of women with disabilities and the unemployment rate of women without disabilities</i>	Higher unemployment rate of women with disabilities than women without disabilities	Lower unemployment rate of women with disabilities than women without disabilities
Inactivity rate (15-64)	<i>Difference between the inactivity rate of men with disabilities and the inactivity rate of women with disabilities</i>	Higher inactivity rate of men with disabilities with respect to women with disabilities	Lower inactivity rate of men with disabilities with respect to women with disabilities	<i>Difference between the inactivity rate of women with disabilities and the inactivity rate of women without disabilities</i>	Higher inactivity rate of women with disabilities compared to women without disabilities	Lower inactivity rate of women with disabilities compared to women without disabilities
NEET rate of young people	<i>Difference between the NEET rate of</i>	Higher NEET rate of men with	Lower NEET rate of men	<i>the NEET rate of</i>	Higher NEET rate of women with	Lower NEET rate of women with

Indicator	Gender Gap			Disability Gap		
	<i>How is computed</i>	<i>Positive gap</i>	<i>Negative gap</i>	<i>How is computed</i>	<i>Positive gap</i>	<i>Negative gap</i>
(15-34) by presence/type of disability	<i>men with disabilities and the NEET rate of women with disabilities</i>	disabilities with respect to women with disabilities	with disabilities with respect to women with disabilities	<i>women with disabilities and the NEET rate of women without disabilities</i>	disabilities compared to women without disabilities	disabilities compared to women without disabilities
Share of temporary employees (15-64)	<i>Difference between the share of temporary employees among men with disabilities and the share of temporary employees among women with disabilities</i>	Higher share of temporary employees among men with disabilities with respect to women with disabilities	Lower share of temporary employees among men with disabilities with respect to women with disabilities	<i>Difference between the share of temporary employees among women with disabilities and the share of temporary employees among women without disabilities</i>	Higher share of temporary employees among women with disabilities compared to women without disabilities	Lower share of temporary employees among women with disabilities compared to women without disabilities
Share of people (15-64) in part-time employment	<i>Difference between the share of part-timers among men with disabilities and the share of part-timers among women with disabilities</i>	Higher share of part-timers among men with disabilities than among women with disabilities	Lower share of part-timers among men with disabilities than among women with disabilities	<i>Difference between the share of part-timers among women with disabilities and the share of part-timers among women without disabilities</i>	Higher share of part-timers among women with disabilities than among women without disabilities	Higher share of part-timers among women with disabilities than among women without disabilities
Share of people working from home	<i>Difference between the share of men with disabilities working from home and the share of women with disabilities working from home</i>	Higher share of men with disabilities working from home than women with disabilities	Lower share of men with disabilities working from home than women with disabilities	<i>Difference between the share of women with disabilities working from home and the share of women without disabilities working from home</i>	Higher share of women with disabilities working from home than women without disabilities	Lower share of women with disabilities working from home than women without disabilities
Share of people (15-64) reporting a limitation in	<i>Difference between the share of men reporting a limitation in work</i>	Higher share of men reporting a limitation in work compared	Lower share of men reporting a limitation in work compared	--	--	--

Indicator	Gender Gap			Disability Gap		
	<i>How is computed</i>	<i>Positive gap</i>	<i>Negative gap</i>	<i>How is computed</i>	<i>Positive gap</i>	<i>Negative gap</i>
work (and by reason for limitation)	<i>and the share of women reporting a limitation in work</i>	to women	to women			
At risk of poverty or social exclusion rate (16 years and over)	<i>Difference between the at risk of poverty or social exclusion rate of men with disabilities and the at-risk of poverty or social exclusion rate of women with disabilities</i>	Men with disabilities have a higher risk than women with disabilities	Men with disabilities have a lower risk than women with disabilities	<i>Difference between the at risk of poverty or social exclusion rate of women with disabilities and the at-risk of poverty or social exclusion rate of women without disabilities</i>	Women with disabilities have a higher risk than women without disabilities	Women with disabilities have a lower risk than women without disabilities
At-risk-of-poverty rate (16 years and over)	<i>Difference between the at-risk-of-poverty rate of men with disabilities and the at-risk-of-poverty rate of women with disabilities</i>	Men with disabilities have a higher risk than women with disabilities	Men with disabilities have a lower risk than women with disabilities	<i>Difference between the at-risk-of-poverty rate of women with disabilities and the at-risk-of-poverty rate of women without disabilities</i>	Women with disabilities have a higher risk than women without disabilities	Women with disabilities have a lower risk than women without disabilities
Severe material deprivation rate (16 years and over)	<i>Difference between the severe material deprivation rate of men with disabilities and the severe material deprivation rate of women with disabilities</i>	Men with disabilities have a higher risk than women with disabilities	Men with disabilities have a lower risk than women with disabilities	<i>Difference between the severe material deprivation rate of women with disabilities and the severe material deprivation rate of women without disabilities</i>	Women with disabilities have a higher risk than women without disabilities	Women with disabilities have a lower risk than women without disabilities
Share of people (less than 60 years) living in	<i>Difference between the share of men with disabilities (aged less than 60</i>	Higher share of men with disabilities (aged less than	Lower share of men with disabilities (aged less than	<i>the share of women with disabilities (aged less than 60 years)</i>	Higher share of women with disabilities (aged less than 60 years)	Lower share of women with disabilities (aged less than 60

Indicator	Gender Gap			Disability Gap		
	<i>How is computed</i>	<i>Positive gap</i>	<i>Negative gap</i>	<i>How is computed</i>	<i>Positive gap</i>	<i>Negative gap</i>
households with very low work intensity	<i>years) living in households with very low work intensity and the share of women with disabilities (aged less than 60 years) living in households with very low work intensity</i>	60 years) living in households with very low work intensity compared to women with disabilities	60 years) living in households with very low work intensity compared to women with disabilities	<i>living in households with very low work intensity and the share of women without disabilities (aged less than 60 years) living in households with very low work intensity</i>	living in households with very low work intensity compared to women without disabilities	years) living in households with very low work intensity compared to women without disabilities
At risk of poverty before social transfers (16 years and over)	<i>Difference between the at-risk-of-poverty rate before social transfers of men with disabilities and the at-risk-of-poverty rate before social transfer of women with disabilities</i>	Men with disabilities have a higher risk than women with disabilities	Men with disabilities have a lower risk than women with disabilities	<i>Difference between the at-risk-of-poverty rate before social transfer of women with disabilities and the at-risk-of-poverty rate before social transfer of women without disabilities</i>	Women with disabilities have a higher risk than women without disabilities	Women with disabilities have a lower risk than women without disabilities
In-work at-risk-of-poverty rate (18 years and over)	<i>Difference between the in-work at-risk-of-poverty rate of men with disabilities and the in-work at-risk poverty rate of women with disabilities</i>	Men with disabilities have a higher risk than women with disabilities	Men with disabilities have a lower risk than women with disabilities	<i>Difference between the in-work at-risk-of-poverty rate of women with disabilities and the in-work at-risk-of-poverty rate of women without disabilities</i>	Women with disabilities have a higher risk than women without disabilities	Women with disabilities have a lower risk than women without disabilities
Share of people (16 years and over) unable to face unexpected	<i>Difference between the share of men with disabilities unable to face unexpected financial expenses and the</i>	Higher share of men with disabilities unable to face unexpected financial	Lower share of men with disabilities unable to face unexpected financial	<i>Difference between the share of women with disabilities unable to face unexpected financial expenses and the</i>	Higher share of women with disabilities unable to face unexpected financial expenses compared to	Lower share of women with disabilities unable to face unexpected financial expenses

Indicator	Gender Gap			Disability Gap		
	<i>How is computed</i>	<i>Positive gap</i>	<i>Negative gap</i>	<i>How is computed</i>	<i>Positive gap</i>	<i>Negative gap</i>
financial expenses	<i>share of women with disabilities unable to face unexpected financial expenses</i>	expenses with respect to women with disabilities	expenses with respect to women with disabilities	<i>share of women without disabilities unable to face unexpected financial expenses</i>	women without disabilities	compared to women without disabilities
Share of people (16 years and over) in arrears	<i>Difference between the share of men with disabilities in arrears and the share of women with disabilities in arrears</i>	Higher share of men with disabilities in arrears than women with disabilities	Lower share of men with disabilities in arrears than women with disabilities	<i>Difference between the share of women with disabilities in arrears and the share of women without disabilities in arrears</i>	Higher share of women with disabilities in arrears than women without disabilities	Lower share of women with disabilities in arrears than women without disabilities

3.1. Gender differences in the incidence of disability among the working-age population

Women are more likely than men to report a disability, probably as a result of aging and the longer life expectancy of women. As life expectancy increases, this pattern is becoming even more evident in almost all the EU countries.

In the EU28 over 44 million people aged between 15 and 64 years had a basic activity difficulty, and almost 35 million had a 'disability in employment' (ELFS 2011). Women are the majority (54 %) of people with disabilities and are more likely than men to report a basic activity difficulty (15.1 % versus 12.9 %) or a disability in employment (11.9 % versus 10 %), or a disability according to the EHSIS definition (14 % versus 11.7 %). Considering the increase of the number of elderly people and female longer life expectancy, this number is expected to increase³².

Table 3.2: People with disabilities by definition of disability and gender (thousands)

Data source	Definition of disability	Territorial coverage	People with disabilities (aged 15-64)	Men with disabilities (aged 15-64)	Women with disabilities (aged 15-64)
2011 EU LFS - AHM	Difficulty in basic activities	EU28	44,459.5	20,405.8	24,053.7
	Limitation in work caused by a health condition or difficulty in a basic activity		34,777.8	15,849.2	18,928.6
2012 EHSIS	a health problem or basic activity limitation as barrier in any life domain	EU27*	42,228.4	19,089.6	23,138.8

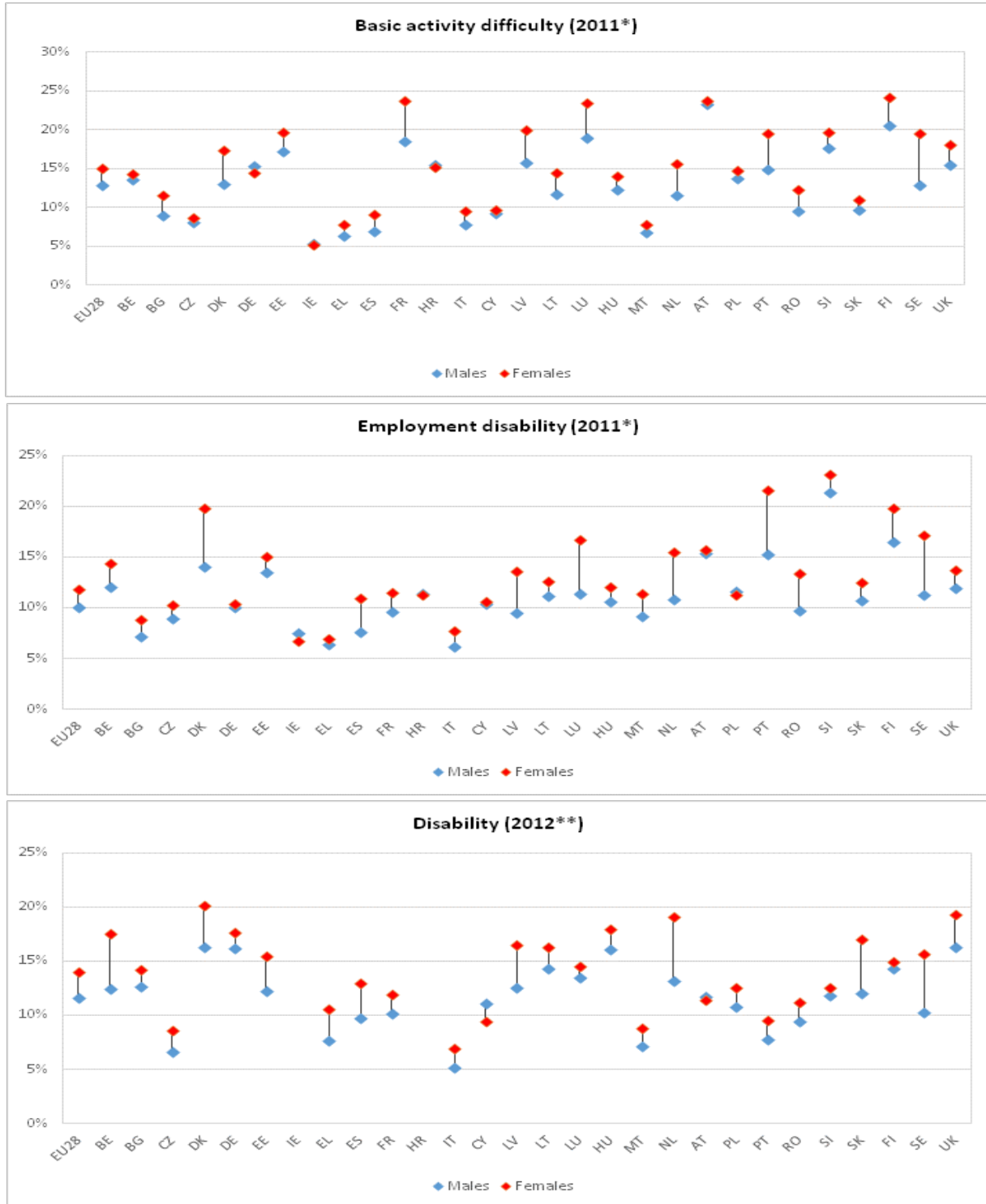
Note: The EHSIS data for the EU-27 exclude not only Croatia (which was the 28th Member State of the EU) but also Ireland. The EU-27 data are thus considered as estimates.

As shown in Figure 3.1, this pattern is common, with a few exceptions³³, in most of the EU Member States for which data are available. The narrowest gaps are observed in: Cyprus and Austria (0.5 percentage points in the share of people reporting a 'basic activity difficulty'); Cyprus (0.2 p.p. in the proportion of people reporting a 'disability in employment'); and Finland (0.6 p.p. for the percentage of people 'with a disability'). The highest gaps are instead found in Sweden (6.6 p.p. for people with a 'basic activity difficulty'); Portugal (6.3 p.p. for people with an 'employment disability'); and the Netherlands (6 p.p. for people 'with a disability').

³² A slightly lower number is estimated in the 2012 EU27 EHSIS data, counting as disabled 42 million working-age people, with 23 million women. This difference is due to the countries covered: the EHSIS data excludes both Croatia and Ireland.

³³ Although in most cases with a very low difference, a higher proportion of men than women reported: i) both a basic activity difficulty and a disability employment in Ireland and Croatia; ii) a basic activity difficulty in Germany; iii) a disability in employment in Poland; a disability in Cyprus and Austria.

Figure 3.1: Share of people aged 15–64 with basic activity difficulties or disability, by gender and EU Member State (%)



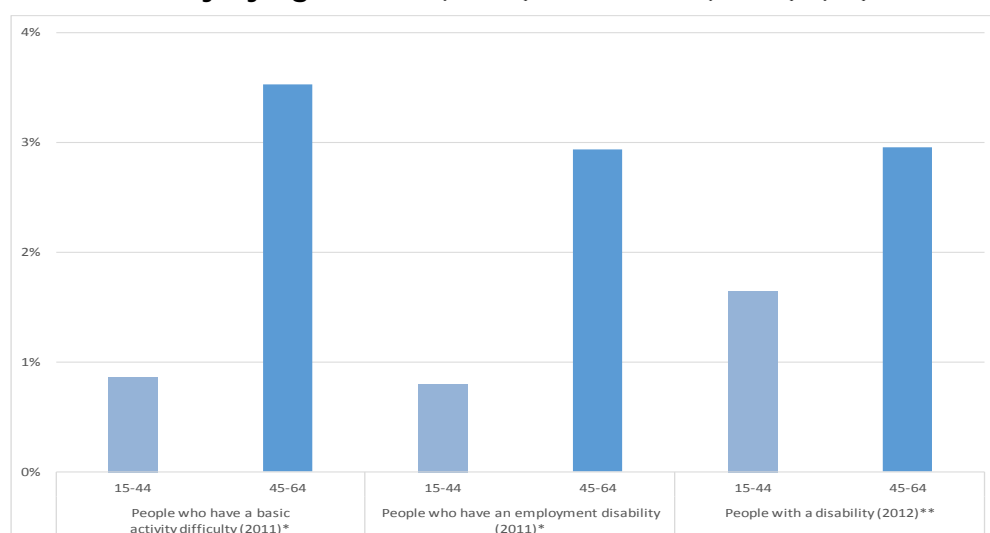
Notes: * 2011 EU LFS-AHM definitions of disability: Definition 1 – People having a ‘basic activity difficulty’ (such as sight, hearing, walking, communicating). Definition 2 – People having an ‘employment disability’ (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD). ** The 2012 EHSIS data for the EU27 exclude not only Croatia (which was the 28th Member State of the EU) but also Ireland. For this reason the EU27 data are considered as estimates. According to 2012 EHSIS, people with disabilities are those who face barriers to participation associated with a long-standing health problem and/or a basic activity difficulty.

Sources: *2011 EU LFS-AHM; ** 2012 EHSIS. See Table 1a and 2b in Annex 2.

Gender differences by age.

Age is not neutral to disability. Ageing men and women are more exposed to disability, and ageing people with disabilities tend to witness an aggravation of their situation. As women live longer than men, they are more likely to experience arthritis, falls, depression and dementia diseases compared to men, although more research is needed (Vicki et al, 2016)³⁴. As shown in Figure 3.2 for the EU average, **the gender gap in the share of people reporting a disability is higher among people aged 45–64 than among those aged 15–44 in most EU Member States**, with the exception of Austria (for disability in employment), and in Luxembourg, Portugal, Slovakia, Finland and the UK (for those with a disability).

Figure 3.2: Gender gaps (p.p. in absolute value) in the share of people aged 15–64 with a basic activity difficulty, with an employment disability or a disability by age, EU28 (2011) and EU27 (2012) (%)



Notes* Definition 1 – People having a ‘basic activity difficulty’ (such as sight, hearing, walking, communicating); Definition 2 – People having an ‘employment disability’ (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD). ****** The 2012 EHSIS data for the EU27 exclude both Croatia and Ireland, the EU27 data are thus estimates. People with disabilities are defined as those who face barriers to participation associated with a long-standing health problem and/or a basic activity difficulty.

Source: *2011 EU LFS-AHM; ** 2012 EHSIS. See Tables 2a and 2b in Annex 2.

Not only age, but also the **date of occurrence of a disability** is important, especially in interpreting the outcomes of people with disabilities (both men and women) in accessing education and training as well as the labour market. Men and women who become disabled when adult, for instance due to an accident, have more chances to complete education and training. Similarly, they have more chances to be integrated into employment, especially if they had a professional experience before disability occurred.

Gender differences by household type.

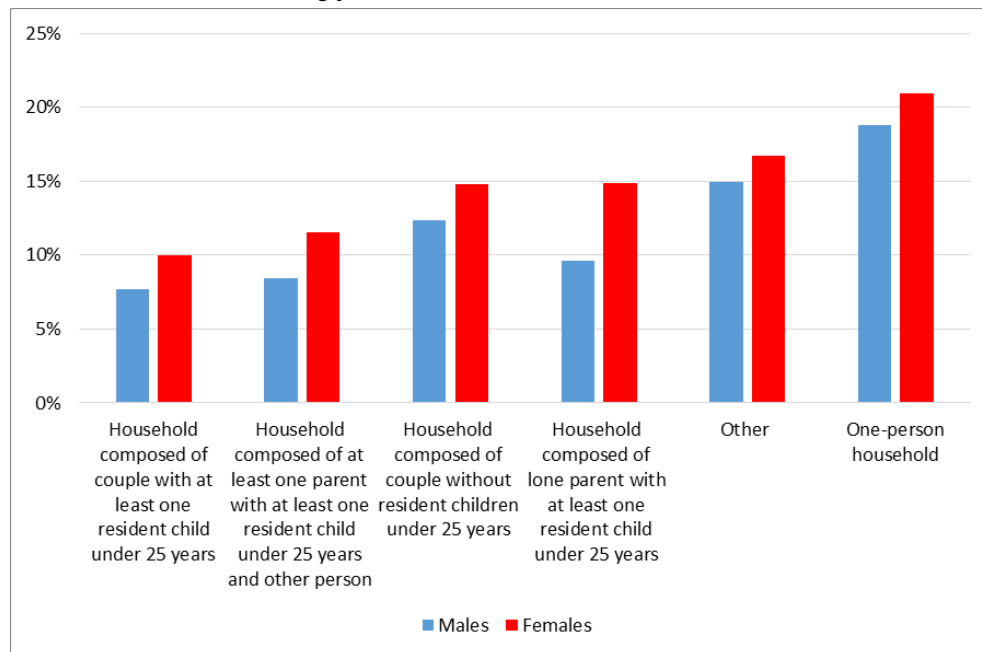
The 2012 EHSIS data provide updated information on the prevalence of disability by household composition.

³⁴ Vicki A. Freedman, Douglas A. Wolf, and Brenda C. Spillman. Disability-Free Life Expectancy Over 30 Years: A Growing Female Disadvantage in the US Population. American Journal of Public Health: June 2016, Vol. 106, No. 6, pp. 1079-1085.

As shown in Figure 3.3, at EU27 level and in the large majority of EU Member States, **the prevalence of disability is higher among women than among men independently of the household composition. For both women and men, the highest prevalence of disability is registered among single persons, couples without children and the heterogeneous category of other households.**

The lowest prevalence of disability is instead recorded for both women and men among households with children, especially couples with children (10 % among women and 7.7 % among men). These lower values may reflect the fact that households with children are likely to be composed of relatively young adults, which are less likely to be disabled than older cohorts, and that people with disabilities are less likely to have children. Indeed, parenting remains an area in which women with disabilities are likely to encounter significant prejudice and discrimination (being often considered inadequate to provide care and well-being for their children) (Frohman, 2009)³⁵. Moreover, the lack of financial support and of care services, coupled with the higher cost of parenting with a disability has been identified as a significant barrier to women with disabilities who are parents, or seeking to become parents (Lee & Oh 2005, Preston 2009)³⁶.

Figure 3.3: Share of people aged 15–64 and over with disabilities, by gender and household type, EU27 (2012)



Notes: The EHSIS data for the EU27 exclude not only Croatia (which was the 28th Member State of the EU) but also Ireland. For this reason the EU27 data are considered as estimates. People with disabilities are those who face barriers to participation associated with a long-standing health problem and/or a basic activity difficulty.

Sources: 2012 EHSIS. See Tables 3a and 3b in Annex 2.

Overall, the lowest share of women with disabilities is registered in Italy for households composed of a lone parent with at least one resident child under 25 years (3.3 %), while the highest share is found in the UK for the single-person households (31.4 %).

³⁵ Frohman, C. (2009), 'Parenting Issues for Women with Disabilities in Australia', A Policy Paper by Women With Disabilities Australia (WWDA).

³⁶ Lee, E. & Oh, H. (2005), 'A Wise Wife and Good Mother: Reproductive Health and Maternity Among Women with Disability in South Korea'. *Sexuality and Disability*, Vol. 23, No. 3, pp. 121-144. Preston, P. (2009), 'Parents with Disabilities'. *National Center for Parents with Disabilities: Through the Looking Glass*, Berkeley, California. www.lookingglass.org

Gender differences in limitations in work.

Individuals may be subject to limitations on the work they can do for a variety of reasons. In this section, these reasons are briefly investigated on the basis of the 2011 LFS-AHM publicly available data, with attention to the gender dimension as well as to health-related limitations.

In the EU28, in 2011, **the share of women reporting a limitation in work was higher than the share of men** (22.8 % versus 18.6 %) (see Table 4a and 4b in Annex 2). This occurs in all the EU Member States, with a gender gap ranging from 0.4 percentage points in Croatia to 10.9 percentage points in Cyprus.

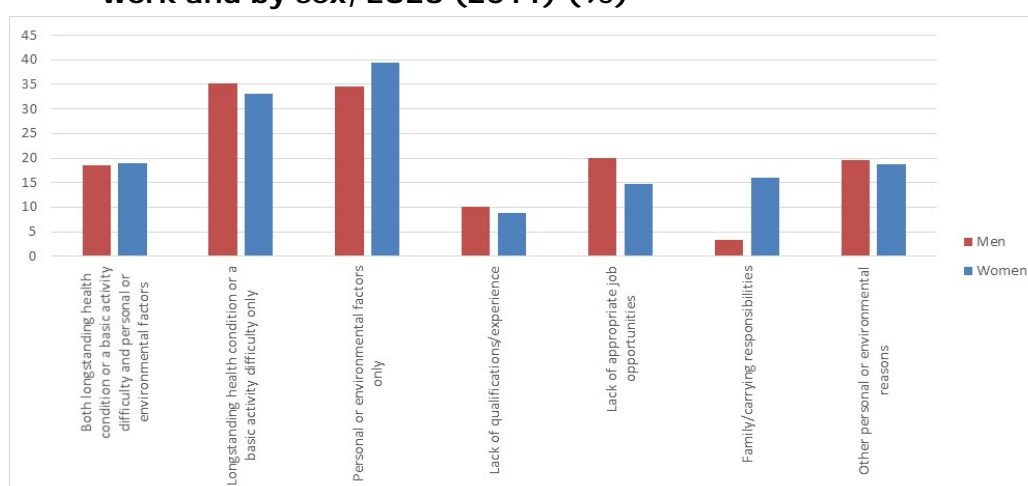
A higher share of women than men reporting a limitation in work indicate 'personal or environmental factors only' as the reason for this limitation (39.4 % versus 34.5 % of the men), as they are more likely than men with disabilities to suffer harassment in the workplace. This gender gap is present in most Member States, except for Bulgaria, Denmark, Estonia, Latvia, Lithuania, Hungary, Romania, Slovakia, Finland and Sweden where the opposite is true.

Also relevant, even though lower than that of men, is the share of women indicating 'long-standing health condition or a basic activity difficulty only' as the reason restricting the work they can do (33.1 % at EU level compared to 35.2 % for men).

Finally, almost one out of five women and men (18.9 % and 18.6 % respectively) report a limitation in work for both the above-mentioned reasons.

The share of women reporting a restriction in the work they can do due to long-standing health condition or a basic activity difficulty only is lower than the share of men in all the Member States, except for Bulgaria, Denmark, Spain, Latvia, Lithuania, Luxembourg, Slovakia, Finland and Sweden, where the opposite is true.

Figure 3.4: People reporting a limitation in work by the reason for limitation in work and by sex, EU28 (2011) (%)



Source: 2011 EU LFS-AHM. See Tables 5a and 5b in Annex 2.

3.2. Gender differences in access to education and training

Data available from the 2011 ad hoc module of the EU LFS refer to the following main indicators on education and training:

- early leavers from education and training;
- the highest level of education attained and tertiary educational attainment;

- participation in lifelong learning.

These indicators are computed according to the two main definitions of disability considered in the 2011 LFS ad hoc module on employment of the people with disabilities³⁷.

As for the population without disabilities, on average, in Europe, **women with disabilities are more highly educated and less likely to early school leaving than men with disabilities; however they have a lower education attainment and higher drop-out rates than women without disabilities.**

Early school leaving

Young women aged 18-24 reporting a basic activity difficulty are much more likely than non-disabled young women to leave education and training with only a lower secondary education. In the EU28 average more than one young woman aged 18–24 out of five (22.7%) had left education and training with only a lower secondary education, compared to 10.8 % of women without difficulty. However, as in the case of women without disability, **early drop-out from education and training is lower among young women than among young men with a basic activity difficulty (27.7 %).**

At Member State level, data about the proportion of women aged 18–24 with a basic activity difficulty who left education and training are available only for 12 countries (AT, CZ, IE, ES, FI, HU, IT, NL, PL, RO, SE, UK) and are reliable only for four countries (IE, IT, ES, UK)³⁸. Although caution is required in interpreting these data due to their low reliability, in Member States for which data are available:

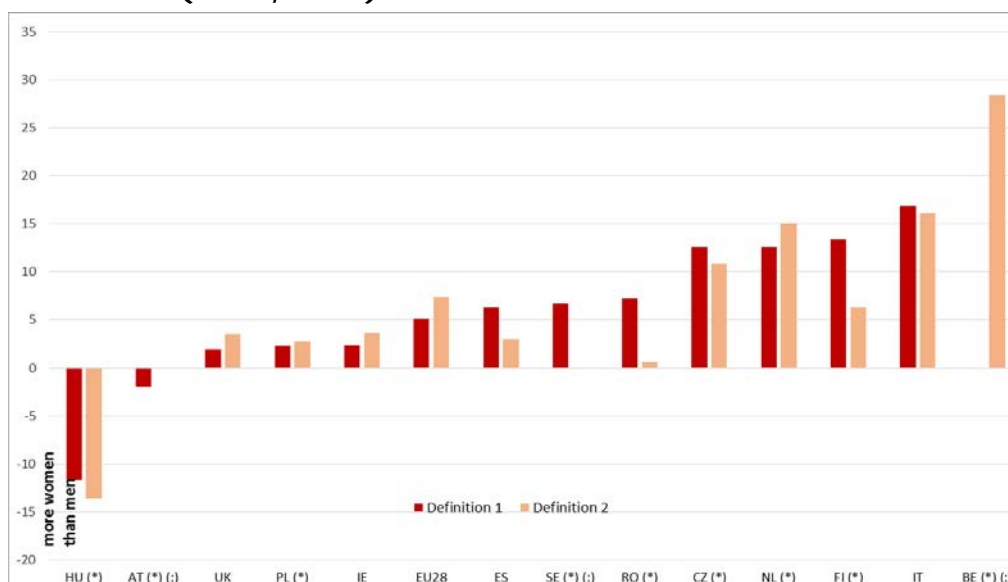
- the share of early school leavers is higher among young men aged 18–24 with a basic activity difficulty than among young women in 10 out of 12 countries, with the exception of Austria and Hungary where the opposite is true;
- the share of early school leavers is higher among women aged 18–24 with a basic activity difficulty than among young women without difficulty in all the 12 countries, and the disability gap is particularly high in Hungary and Romania.

Gender and disability gaps are higher when considering people with an employment disability. Early school leaving among young women with an employment disability reaches 27.9 % compared to 10.6 % for not disabled young women, and 35.3 % among young men with an employment disability. In EU Member States for which data are available, only Hungary presents a higher early school leaving among young women than men with an employment disability.

³⁷ Definition 1 – People having a ‘basic activity difficulty’ (such as sight, hearing, walking, communicating); definition 2 – People having an ‘employment disability’ (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD).

³⁸ The 2011 EU LFS-AHM on the ‘employment of people of disabilities’ is based on a sample of population. For this reason, these data are subject to the usual types of errors associated with sampling techniques and interviews. **Data reliability**, regarding the accuracy of the data, usually arises when data are drawn from a (too) small or restricted sample of the population. This could be the case of the 2011 EU LFS–AHM when the analysis is focused on a restricted group of individuals (i.e. people with disabilities disaggregated by sex) in each EU Member State. In fact, disaggregation by Member States is likely to produce problems of statistical significance, as the number of observations in each cell is likely to be too low (and thus the sampling error greater), especially in the case of small Member States. In the specific case of the early leavers from education and training aged 18–24 years, among men and women with disabilities by Member States, the number of observations in each cell is indeed likely to be very small. Because data are available with a gender disaggregation for people with disabilities only for 12 Member States and in order to guarantee a minimum of geographical representativeness at EU level in the statistical analysis, early leavers from education and training in Member States for which data are of low reliability are also considered.

Figure 3.5: Gender gaps (p.p.) in the share of early leavers from education and training (age group 18–24), by disability definition and by Member State (EU28, 2011)



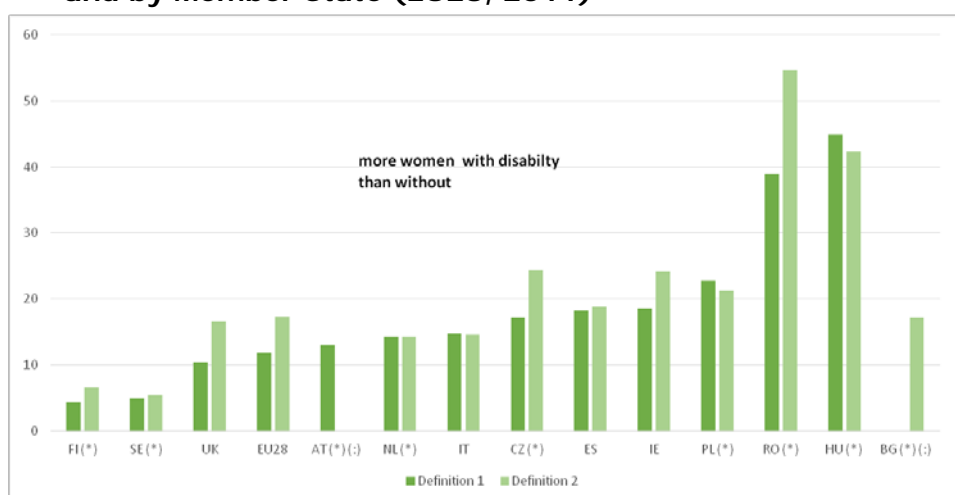
Notes: (*) Low reliability; (:) Not available with gender disaggregation.

Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an ‘employment disability’ (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD).

The **gender gap** is computed as the difference between the early leavers rate of men with disabilities and the early leavers rate of women with disabilities (age group: 18–24). A positive gender gap implies that the share of early school leavers among women with disabilities is lower than among to men with disabilities (i.e. women with disabilities show a better outcome compared to men with disabilities). The opposite is true when the gender gap is negative.

Source: 2011 EU LFS-AHM. See Tables 6a and 6b in Annex 2.

Figure 3.6: Disability gaps (p.p.) in the share of women early leavers from education and training (age group 18–24), by disability definition and by Member State (EU28, 2011)



Notes : (*) Low reliability ; (:) Gender disaggregation not available.

Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an ‘employment disability’ (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD).

The **disability gap** is computed as the difference between the share of early leavers among women with disabilities and the rate of early leavers among women without disabilities. A positive disability gap implies that the share of early school leavers is higher among women with disabilities compared to women without disabilities. The opposite is true when the disability gap is negative.

Source: 2011 EUH LFS-AHM. See Tables 6a and 6b in Annex 2.

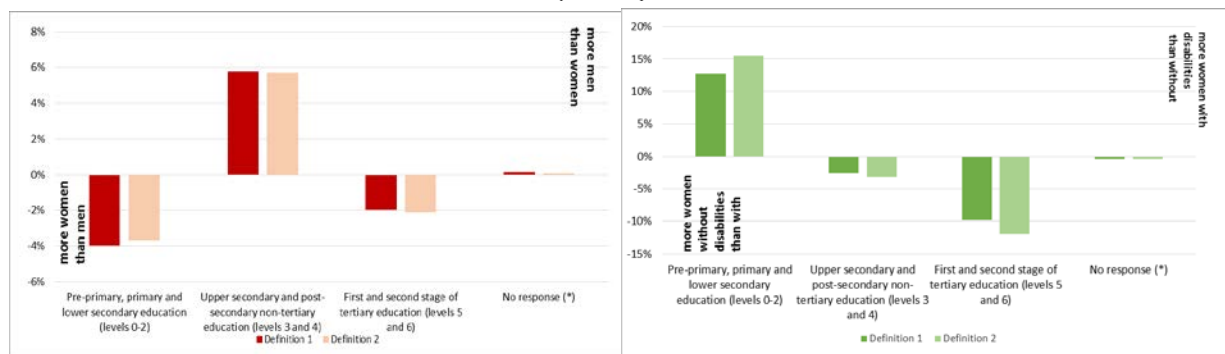
Educational attainment.

At the EU28 level, on average more than two out of five (40.6 %) women having a basic activity difficulty attained only pre-primary, primary and lower secondary education levels compared to around 28 % of women without a difficulty. Women having a basic activity difficulty are also disadvantaged with respect to men with the same difficulty, with a gender gap of about 4 percentage points. When considering women with an employment disability, the disability gap is higher (15.5 percentage points), while the gender gap is slightly lower (3.7 percentage points).

In ten Member States (Belgium, Bulgaria, Ireland, Greece, Italy, Malta, the Netherlands, Portugal, Finland and Sweden) however, the share of women with a basic activity difficulty or with an employment disability who attained only pre-primary, primary and lower secondary education was lower than the share of men with the same disabilities.

Latvia and Lithuania emerge as countries where women with a basic activity difficulty or with an employment disability perform better compared to *both* men with the same disability and women without disabilities: the share of disabled women with only pre-primary, primary and lower secondary education was lower than the share of disabled men, *and* than the share of women without disabilities.

Figure 3.7: Distribution of population by disability definition and educational attainment level, EU28 (2011)



Notes: (*) Low reliability

Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an 'employment disability' (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD).

The **gender gap** is computed as the difference between the share of men with disabilities for each educational level and the share of women with disabilities for each educational level. A negative gender gap implies that the share of women with disabilities with high (low) educational level is higher than among men with disabilities (i.e. women with disabilities show a better (worse) outcome compared to men with disabilities). The opposite is true when the gender gap is positive.

The **disability gap** is computed as the difference between the share of men with disabilities for each educational level and the share of women with disabilities for each educational level. A negative disability gap implies that the share of women with disabilities with high (low) educational level is lower compared to women without disabilities (i.e. women with disabilities show a worse (better) outcome compared to women without disabilities). The opposite is true when disability gap is positive.

Source: 2011 EU LFS-AHM. See Tables 7a and 7b in Annex 2.

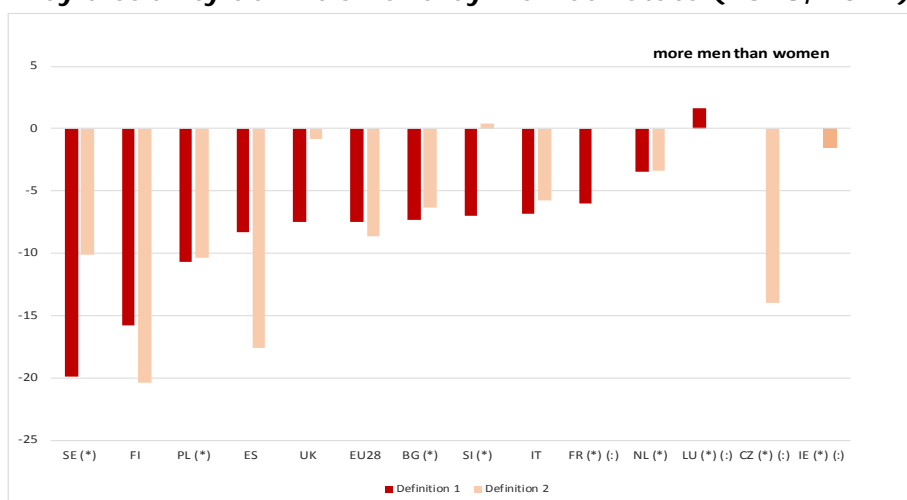
Turning to tertiary education, in almost all the EU Member States, disabled women aged 30–34 are more likely than disabled men to have attained a tertiary education, but less likely than women without disability.

On average at the EU28 level, 27.6 % of women with a basic activity difficulty and 26.1 % of women with an employment disability had a tertiary educational level compared to only 19.9 % and 17.5 % of men with the same difficulties respectively, as well as to 39.5 % of women without these disabilities.

The higher share of women with disabilities who attained tertiary education compared to men with disabilities is confirmed in all the Member States for which data are available³⁹, except for Luxembourg (when difficulty in basic activities are considered) and for Slovenia (for both definitions).

Also, the lower share of women with disabilities with tertiary education compared to women without disabilities is confirmed in all the Member States for which data are available, with the exception of Austria in the case of women with difficulty in basic activities.

Figure 3.8: Gender gaps in tertiary educational attainment (age group 30–34), by disability definition and by Member State (EU28, 2011)



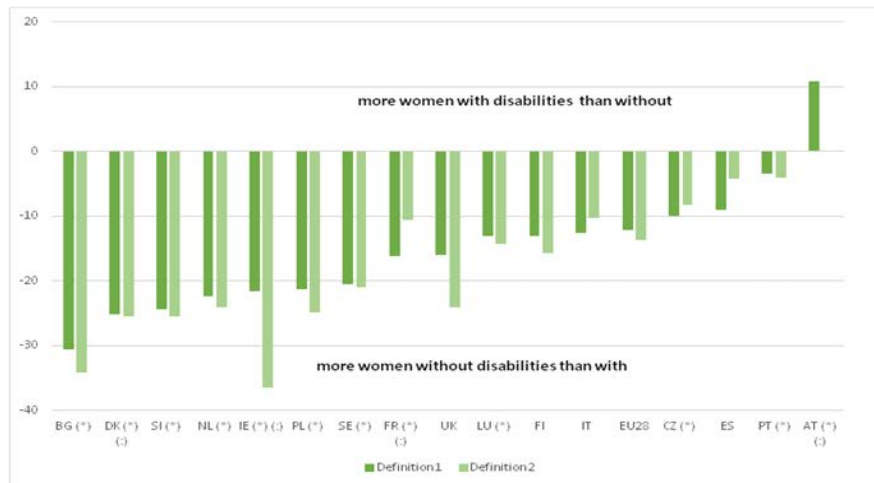
Notes: (*) Low reliability; (:) Not available with gender disaggregation.

Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an 'employment disability' (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD). The **gender gap** is computed as the difference between the share of men with disabilities with a tertiary educational attainment and the share of women with disabilities with a tertiary educational attainment. A negative gender gap implies that the share of women with disabilities with a tertiary educational attainment is higher compared to men with disabilities (i.e. women with disabilities show a better outcome with respect to men with disabilities). The opposite is true when the gender gap is positive.

Source: 2011 EU LFS-AHM. See Tables 8a and 8b in Annex 2.

³⁹ At country level, data about the share of women aged 30–34 having completed tertiary education are available for only 16 Member States, and reliable for only 8 Member States (ES, FI, IE, IT, LU, PT, SE, UK) with regard to difficulty in basic activities. While they are available only 15 Member States and reliable for only 6 member States (ES, FI, IE, PT, SE, UK) with regard to limitation in work caused by a health condition or difficulty in a basic activity.

Figure 3.9: Disability gaps in tertiary educational attainment (age group 30–34), by disability definition and by Member State (EU28, 2011)



Notes: (*) Low reliability; (:) Not available with gender disaggregation.

Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an 'employment disability' (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD).

The **disability gap** is computed as the difference between the share of women with disabilities with a tertiary educational attainment and the share of women without disabilities with a tertiary educational attainment. A negative disability gap implies that the share of women with disabilities with a tertiary educational attainment is lower compared to women without disabilities. The opposite is true when the disability gap is positive.

Source: 2011 EU LFS-AHM. See Tables 8a and 8b in Annex 2.

Participation in formal and non-formal education and training.

The same patterns found in the educational levels is observed in the participation in education and training (formal and non-formal education). On average at the EU level, the participation of women with disabilities is higher than the participation of men with disabilities, but lower than that of women without disabilities.

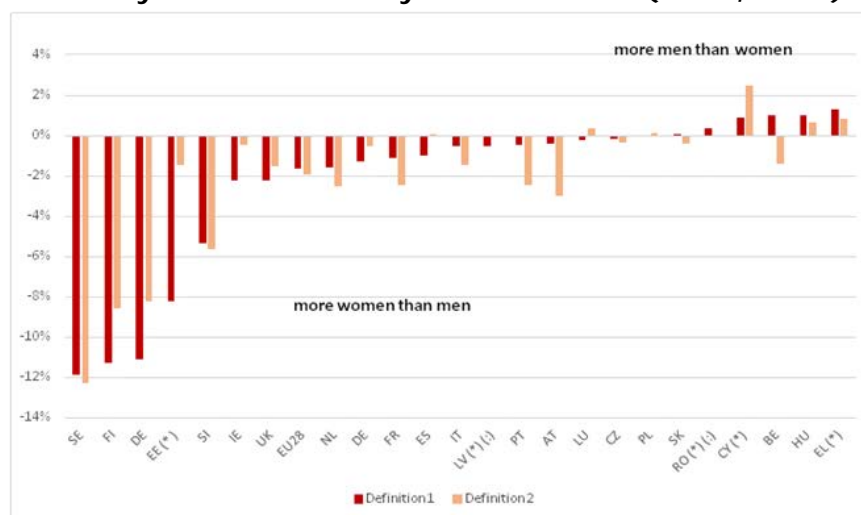
In the EU28 in 2011, 10.4 % of women aged 15–64 with a basic activity difficulty participated in education and training compared to 8.8 % of men with the same disability and 21.7 % of women without disability⁴⁰. While in all the Member States women with a basic difficulty activity participate less than women without, in six Member States (BE, EL, CY, HU, RO and SK) women with basic activity difficulty also present a lower participation in education and training than men with the same disability.

Similar disparities between women and men with disabilities as well as between women with and without disabilities are found at EU28 level when 'limitation in work caused by a health condition or difficulty in a basic activity' is considered. At country level, men with an employment disability participated in education and training (formal and non-formal education) more than women with a similar disability only in Greece, Cyprus, Luxembourg, Hungary and Poland⁴¹.

⁴⁰ Data about the participation in education and training of women with a basic activity difficulty are not available for three Member States (Bulgaria, Croatia and Malta), and are of low reliability for five Member States (Bulgaria, Croatia and Malta, plus Greece and Lithuania).

⁴¹ Data about the participation in education and training of women with an employment disability are not available for five Member States (Bulgaria, Croatia, Lithuania, Malta and Romania), while they are of low reliability for seven Member States (Bulgaria, Croatia, Lithuania, Malta and Romania plus Greece and Cyprus).

Figure 3.10: Gender gaps in participation in education and training (15–64), by disability definition and by Member State (EU28, 2011)



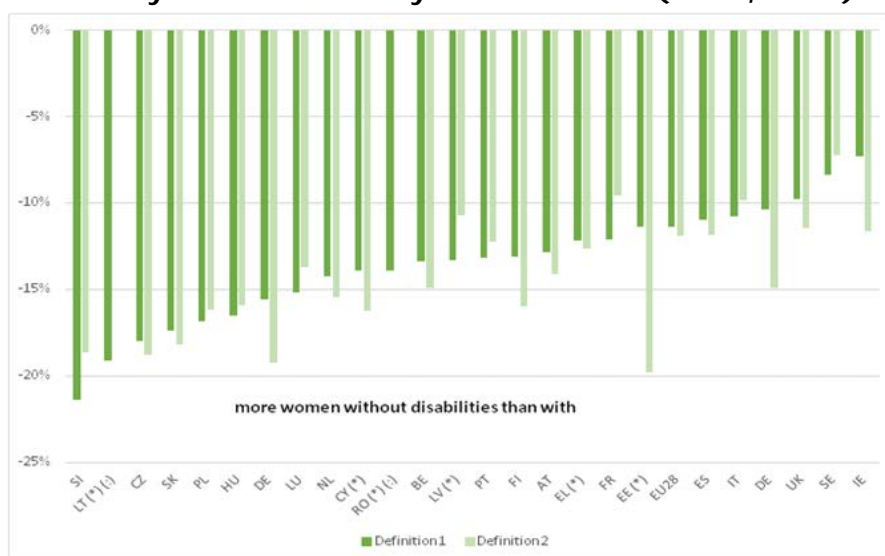
Notes: (*) Low reliability; (:) Not available with gender disaggregation.

Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an ‘employment disability’ (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD).

The **gender gap** is computed as the difference between the participation rate in education and training of men with disabilities and the participation rate of women with disabilities. A negative gender gap implies that the participation rate among women with disabilities is higher than among men with disabilities. The opposite is true when the gender gap is positive.

Source: 2011 EU LFS-AHM. See Tables 9a and 9b in Annex 2.

Figure 3.11: Disability gaps in participation in education and training (15–64), by disability definition and by Member State (EU28, 2011)



Notes: (*) Low reliability; (:) Not available

Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an ‘employment disability’ (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD). The **disability gap** is computed as the difference between the participation rate in education and training of women with disabilities and the participation rate in education and training of women without disabilities. A negative disability gap implies that the participation rate in education and training of women with disabilities is lower compared to women without disabilities. The opposite is true when the disability gap is positive.

Source: 2011 EU LFS-AHM. See Tables 9a and 9b in Annex 2.

3.3. Gender differences in labour market conditions

Most of the data on disability and the labour market come from the 2011 Ad Hoc Module of the LFS on the employment of working-age persons with disabilities. All data are disaggregated by gender, and cover different aspects, such as: employment and unemployment rates, inactivity rates, NEET rates, temporary work, reasons for not seeking employment and reasons for leaving the last job⁴².

People with disabilities, and particularly women with disabilities, face high attitudinal, physical and informational barriers to equal opportunities in the labour market. Compared to people without disabilities, they experience higher rates of unemployment and inactivity and are at greater risk of insufficient social protection that is a key to reducing extreme poverty. Women with disabilities suffer a double disadvantage due to the intersection between gender and disability compared to both men with disabilities and women without disabilities.

Generally, employment differences between women with and without disabilities are higher compared to gender differences among people with disabilities. More than half of the working-age population of women with disabilities, independently of the definition, in the EU28 were inactive in 2011. **Disability and health issues are the major reason for disabled women not seeking employment.** Similarly, most not-employed disabled women left their last job due to a health problem or disability, while the main reason for women without disability was for caring activities.

On average, women with disabilities are more likely to work part-time or in temporary jobs, than those with no difficulties, with marked differences across countries. In addition, on average, the proportion of people working from home (usually or sometimes) was higher among women with a disability than other women, irrespective of which of the two definitions of disability was used.

Labour market access of women with disabilities

Employment rates⁴³.

Disability represents a barrier, for both women and men, in accessing the labour market. Table 10a in Annex 2 compares the employment rates for women aged 15–64 with and without disabilities. At the EU level, only 43.9 % of women with difficulties in basic activities are employed and even less (36 %) among those with and employment disability, compared to 60.7 % and 61.5% respectively of women without disabilities. While the disability gap in employment rates among women was present in all Member States, there are differences across countries concerning the employment gender gap among people with disabilities.

The resulting employment disability gap⁴⁴ at the EU28 average reached 16.8 percentage points in 2011 when considering the first disability definition, and even higher (25 percentage points) when considering women with an employment disability. The disability gap appears to be 'underestimated' by the first definition in almost all Member States but France (see Table 10b in Annex 2), which also reported the lowest gap using second definition, at 5.6 percentage points.

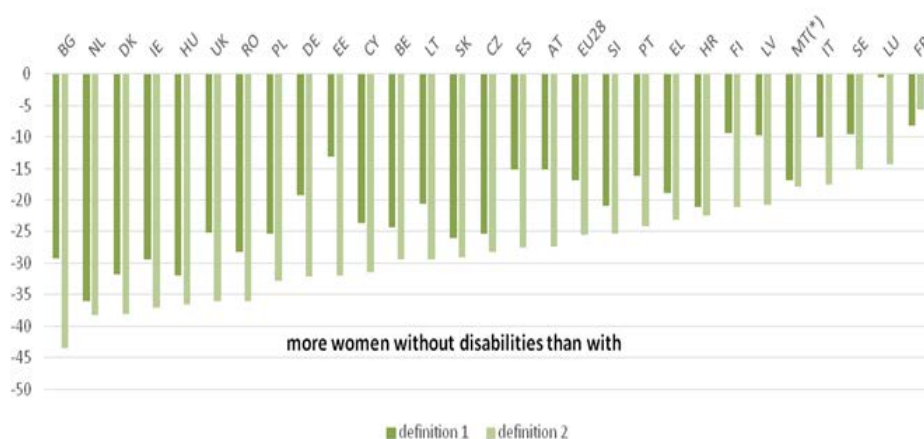
⁴² See 'Access to Labour Market Indicators – LFS' in Annex V of the Methodological Note and Additional Tables in Annex 2 of the present report.

⁴³ Data on employment rates, disaggregated by gender and by disability groups are reliable for all Member States but Malta.

⁴⁴ The disability gap in employment is computed as the difference between the employment rate of women with and without disabilities.

There is an employment disability gap between women with and without disabilities in all Member States. The countries with the lowest disability gaps are France, Sweden, Italy, Malta, Latvia and Finland. However, while the low disability gap registered in Sweden may be ascribed to the capacity of this country to ensure high employment rates for both women with and without disabilities, in the case of Italy and Malta the opposite is true, and the relatively low disability gaps result from the very low employment rates of women in general. Sweden presents the highest employment rates among the EU28 Member States for women with disabilities whatever the definition adopted (64.3 % and 74.9 % respectively), while the lowest employment rates are reported in Hungary (24.4%) for women with basic difficulty, and Bulgaria (16.1 %) when considering women with limitation in work. In addition, countries with similar employment rates for non-disabled women present large differences for women with disabilities. For example, while Romania and Luxembourg have similar employment rates for women without difficulties in basic activities (56.8 % versus 57 %), the disability gaps are 28.2 p.p. for Romania compared to 0.5 for Luxembourg.

Figure 3.12: Disability gaps in employment rates (age 15–64), by disability definition and Member State (EU28, 2011)



Notes: (*) Low reliability.

Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an 'employment disability' (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD).

The **disability gap** is computed as the difference between the employment rate of women with disabilities and the employment rate of women without disabilities. A negative disability gap implies that the employment rate of women with disabilities is lower than the employment rate of women without disabilities. The opposite is true when the disability gap is positive.

Source: 2011 EU LFS-AHM. See Table 10a and 10b in Annex 2.

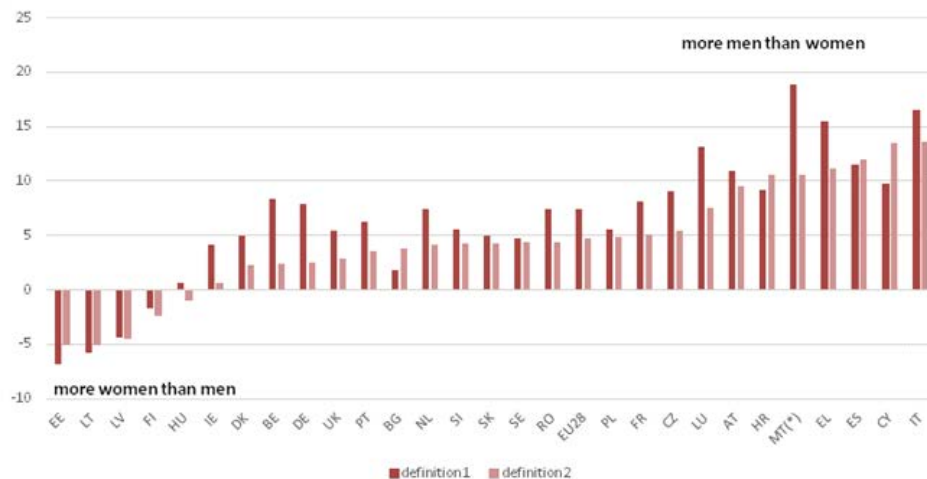
Women are in a disadvantaged position in accessing the labour market with respect to men. This is true on average for both women with and without disabilities and independently of the definition adopted. **Interestingly, the gender gap in employment rates⁴⁵ is higher among women and men without disabilities than among those with disabilities, due to the barriers to employment also faced by men with disabilities.**

At EU level in 2011 the employment rate of women with disability is 43.9 % (36 % using the second definition), while the male employment rate is 51.3 % (40.7 % with the second definition), thus the gender gap is only 7.4 percentage points (4.7 p.p. with the second definition), compared to a gender gap of 12.3 p.p. for people without disabilities, according

⁴⁵ The gender gap is computed as the difference between the employment rate of men and women with disabilities.

to both the definitions⁴⁶. Using the first definition, the employment rate of women with disabilities is significantly lower with respect to men (gender gap above 10 p.p.) in Malta, Italy, Greece, Luxembourg, Spain and Austria; when we use the second definition we observe a gender gap above 10 p.p. in Italy, Cyprus, Spain, Greece, Malta and Croatia. On the contrary, in Estonia, Lithuania, Latvia and Finland (and Hungary when considering the second definition), the employment rate of women with disabilities is higher compared to that of men with disabilities (i.e. the gender gap is negative).

Figure 3.13: Gender gaps (p.p.) in employment rate (age 15–64), by definition of disability and by Member State (EU28, 2011)



Notes: (*) Low reliability.

Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an 'employment disability' (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD).

The **gender gap** is computed as the difference between the employment rate of men with disabilities and the employment rate of women with disabilities. A positive gender gap implies that the employment rate of women with disabilities is lower than the employment rate of men with disabilities. The opposite is true when the gender gap is negative.

Source: 2011 EU LFS-AHM. See Table 10a and 10b in Annex 2.

Unemployment rates⁴⁷.

Women with disabilities are more likely to be unemployed than women without disabilities in almost all the EU Member States, but less likely compared to men with disabilities.

The EU28 unemployment rate of women aged 15–64 with basic activity difficulties (definition1) is 12 % compared to 9.8 % of women without disabilities. The unemployment rate of women with disabilities ranges from 23.1 % (Spain) to 5.9 % (Austria) (see Table 11a in Annex 2). As shown in Figure 3.14, the disability gap⁴⁸ is thus on average positive (2.2 p.p. for EU28), except in a few Member States – e.g. Greece (for both definitions) and Romania as well as Italy (for definition 1) – where the disability gap is negative, meaning that women with basic activity difficulties are less likely than women without disabilities to be unemployed.

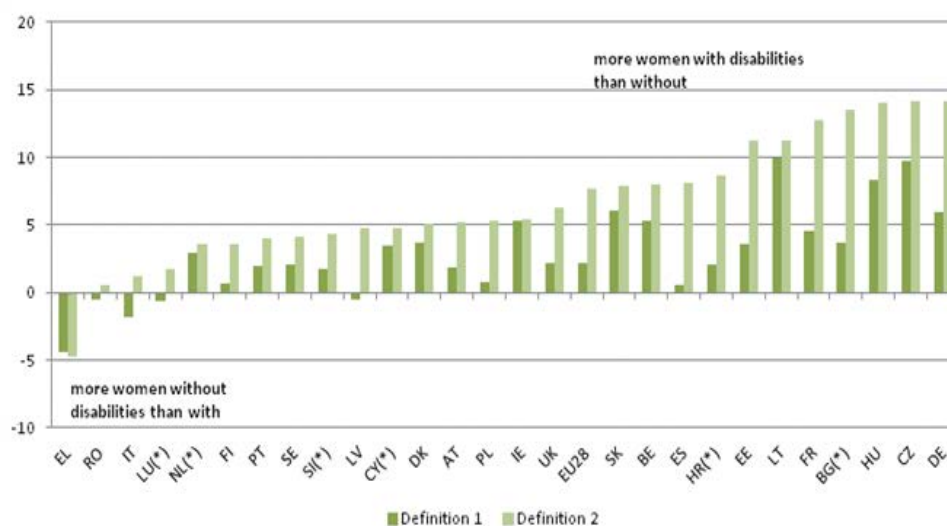
⁴⁶ See Tables 10a and 10b in Annex 2.

⁴⁷ Data about the unemployment rate of men and women with disabilities must be considered with caution, as they are characterised by a low reliability for six EU Member States (Bulgaria, Croatia, Cyprus, Luxembourg, the Netherlands, and Slovenia) and are missing for Malta (see Table 11a in Annex 2).

⁴⁸ The disability gap is computed as the difference between the unemployment rate of women with and without disabilities.

Using the second definition of disability, the unemployment rate for women limited in work because of LHPAD was 17.1 % in the EU28 in 2011, 7.7 percentage points higher than those without health problems or activity difficulties. The disability gaps are all positive – except for Greece (-4,7 p.p.). The highest gap was registered in Germany (14.2) while the lowest was in Romania (0.6).

Figure 3.14: Disability gaps (p.p.) in unemployment rate (age 15–64), by disability definition and by Member State (EU28, 2011)



Notes: (*) Low reliability. (:) Not available with gender disaggregation.

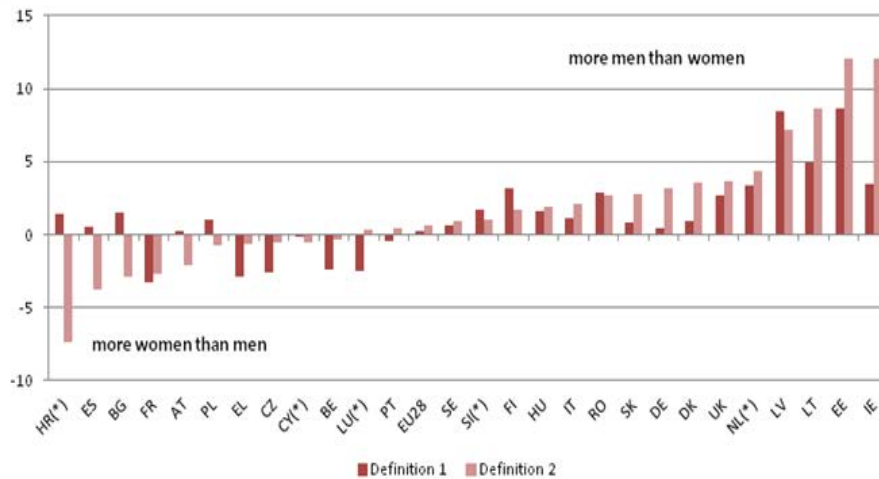
Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an 'employment disability' (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD).

The **disability gap** is computed as the difference between the unemployment rate of women with disabilities and the unemployment rate of women without disabilities. A positive disability gap implies that the unemployment rate of women with disabilities is higher than the unemployment rate of women without disabilities. The opposite is true when the disability gap is negative.

Source: 2011 EU LFS-AHM. See Tables 11a and 11b in Annex 2

Men with disabilities are slightly more likely to be unemployed than women with disabilities in most EU Member States. This is due in part to the fact that men participate in the labour market more than women (as shown by the inactivity rate). Women with disabilities, as their counterparts without disabilities, are more likely to exit the labour market and to be inactive rather than looking for a job: *'inactivity is a socially acceptable status for women but it remains hardly imaginable for men'* (Maruani, 2004). Moreover, inactive men are more liable to ask for an administrative recognition of their disability, because it makes their inactivity situation more acceptable (Bechrouri *et al.*, 2016).

The gender gap in unemployment rates among the disabled population is thus positive although very low for both definitions of disability. In the case of the first definition, at the EU average, the unemployment rate of men with disabilities is 0.2 percentage points higher than that of women with disabilities. There are however wide differences across EU countries, with Estonia (8.6) and Latvia (8.4) showing the highest positive gaps (e.g. men with disabilities showing much higher unemployment rates than women with disabilities), and France (-3.3) and Greece (-2.9) showing the highest negative gaps (meaning that women with disabilities are more likely to be unemployed than men with disabilities). As for definition 2, the average EU28 gender gap is 0.6. Across Member States gender gaps range from 12.1 p.p. in Estonia and Ireland, to -7.4 in Croatia.

Figure 3.15: Gender gaps (p.p.) in unemployment rate (age 15–64), by disability definition and by Member State (EU28, 2011)

Notes: (*) Not reliable data. (:) Data not available with gender disaggregation. Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an 'employment disability' (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD). The **gender gap** is computed as the difference between the unemployment rate of men with disabilities and the unemployment rate of women with disabilities. A negative gender gap implies that the unemployment rate of women with disabilities is higher than the unemployment rate of men with disabilities. The opposite is true when the gender gap is positive.

Source: 2011 EU LFS-AHM. See Tables 11a and 11b in Annex 2.

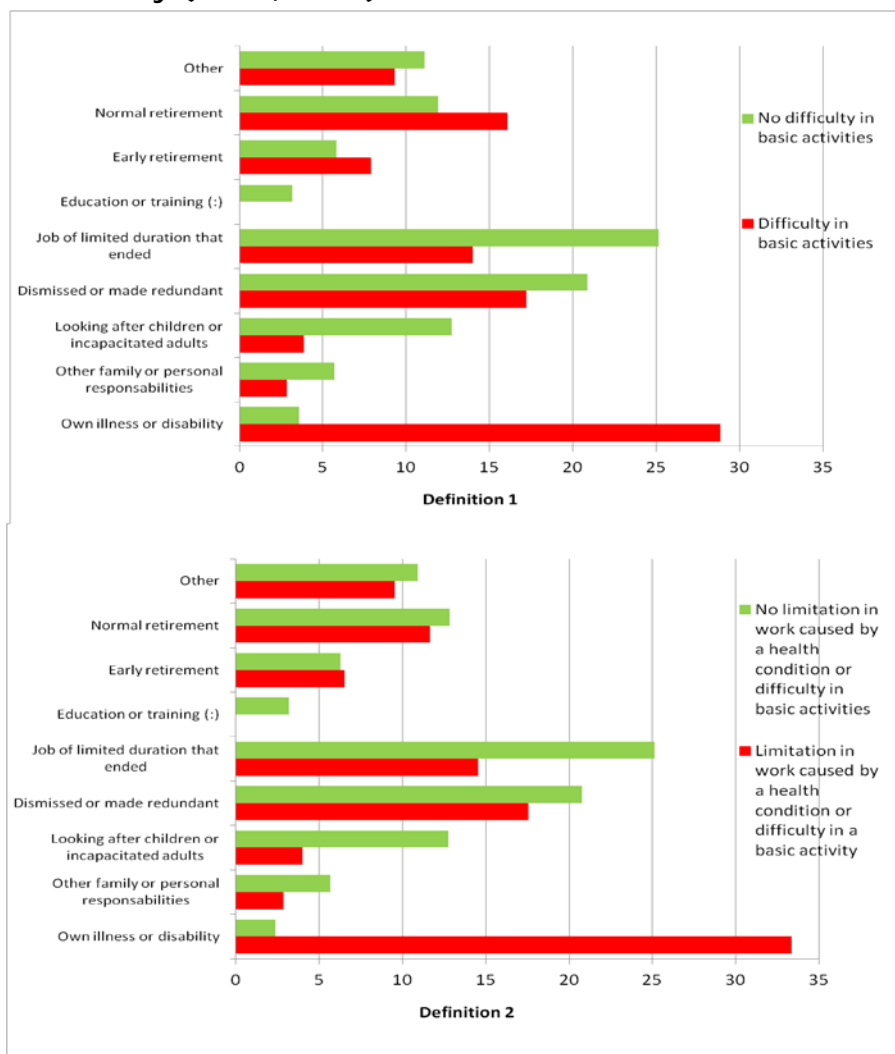
Reasons for leaving a job.

Disability is a common reason for people in employment to leave their occupations and women are not an exception. In 2011, most non-employed women with disabilities left their last job due to a health problem or disability, while the main reason for those without difficulties was the end to a limited-duration job and for caring activities (see Table 12a in Annex 2)⁴⁹.

In 2011, at European level, the percentage of women leaving their occupations mainly for own illness or disability was 25.2 p.p. higher among those with difficulties in basic activities than among those without. This disability gap reaches 30.9 p.p. when considering women with limitation in work caused by health problems/difficulties in basic activities.

⁴⁹ We consider the majority of women providing a reason; 'no response' answers are not included.

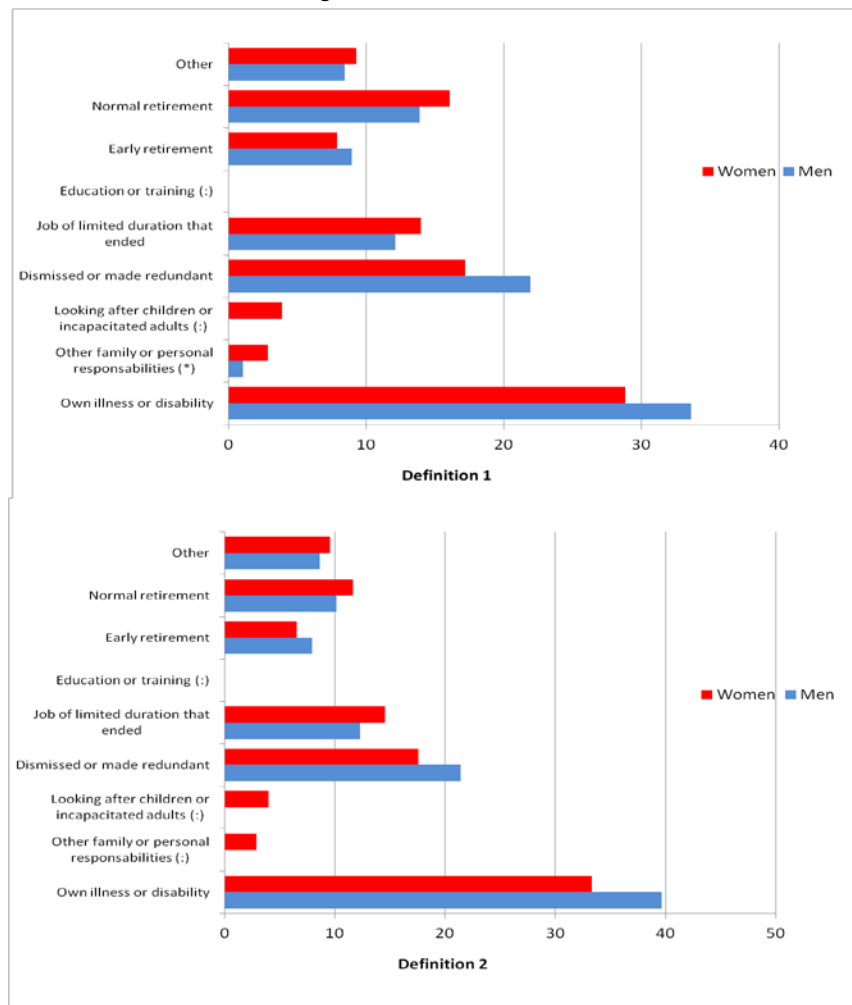
Figure 3.16: Main reasons for leaving the last job or business (in %; missing answers not included) for women not employed, by definition of disability (EU28, 2011)



Notes: (:) Not available with gender disaggregation. Women aged 15–64 not in employment.
Source: 2011 EU LFS-AHM. See Tables 12a and 12b in Annex 2.

As for gender differences among women and men with disabilities: **on average, men with disabilities leave their jobs for health problems more often than women with disabilities**, as shown in the following figure.

Figure 3.17: Main reasons for leaving the last job or business (in %; missing answers not included) for people not employed, by gender and by definition of disability (EU28, 2011)



Notes: (*) Low reliability. (:) Not available with gender disaggregation. People aged 15–64.

Source: 2011 EU LFS-AHM. See Tables 12a and 12b in Annex 2.

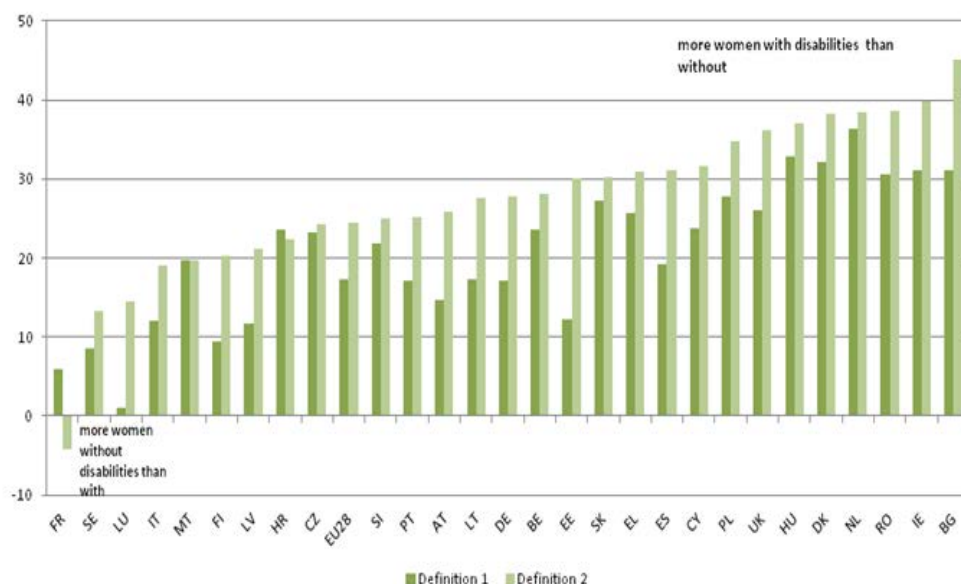
Inactivity rates and reasons for inactivity.

In the EU28, **more than half of the working-age population of women with disabilities, independently of the definition, were inactive**⁵⁰. Hence they are at a **higher risk of economic and social marginalisation compared to both women without disabilities and men with disabilities**.

There is a significant difference in the activity rates between women with and without disabilities across Member States. The disability gap is positive under both definitions and in all Member States, except for France which shows a negative gap with definition 2. In addition, we can observe that the disability gap is higher when we consider employment disability (definition 2) (24.5 p.p. versus 17.3). According to 2011 data, while with the first definition more than half of women with basic activity difficulties were inactive in 17 countries, with the second definition inactivity rates above 50% among women with disabilities were reached in 24 countries.

⁵⁰ See Table 10a in Annex 2.

Figure 3.18: Disability gaps (p.p.) in inactivity rate (age 15–64), by disability definition and by Member State (EU28, 2011)

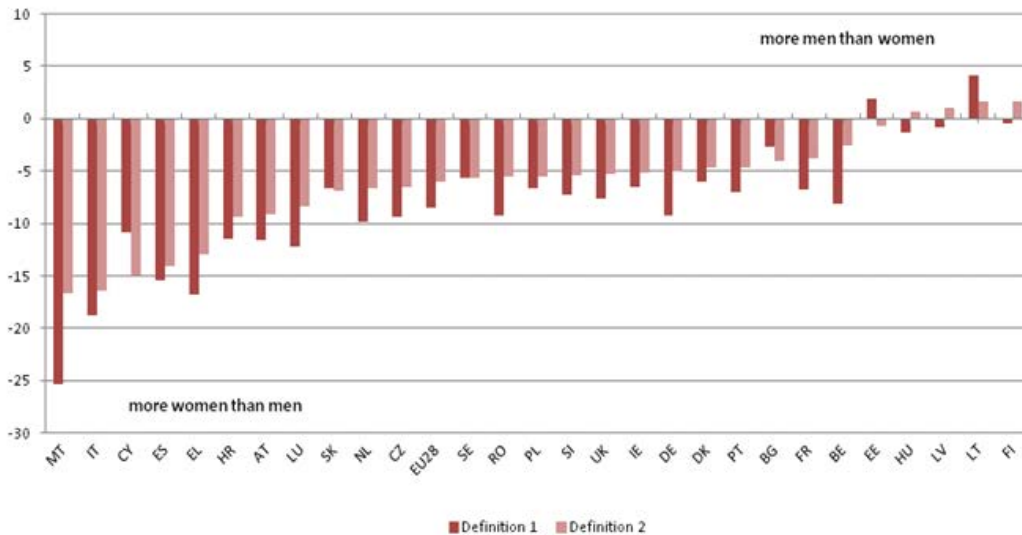


Notes: Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an ‘employment disability’ (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD). The **disability gap** is computed as the difference between the inactivity rate of women with disabilities and the inactivity rate of women without disabilities. A positive disability gap implies that the inactivity rate of women with disabilities is higher than the inactivity rate of women without disabilities. The opposite is true when the disability gap is negative.

Source: 2011 EU LFS-AHM. See Tables 14a and 14b in Annex 2.

Gender gaps are lower than disability gaps. At European level, men with difficulties in basic activities have an inactivity rate 8.5 p.p. lower than that of women. When using the second definition of disability the gender gap is 6 p.p. These gender gaps are lower than those reported for the population without disabilities (which reaches 13.5 p.p.).

Figure 3.19: Gender gaps (p.p.) in inactivity rate (age 15–64), by disability definition and by Member State (EU28, 2011)



Notes: Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an 'employment disability' (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD).

The **gender gap** is computed as the difference between the inactivity rate of men with disabilities and the inactivity rate of women with disabilities. A negative gender gap implies the inactivity rate of women with disabilities is higher than the inactivity rate of men with disabilities. The opposite is true when the gender gap is positive.

Source: 2011 EU LFS-AHM. See Tables 14a and 14b in Annex 2.

While among people without disabilities, men have lower inactivity rates than women in all Member States, results are more diversified among disabled individuals. As shown in the figure below, 23 Member States show negative gender gaps in activity rates independently of the definition adopted⁵¹, while with definition 2, Finland, Latvia, Hungary and, with definition 1, Estonia show a positive gap, meaning that men with disabilities have higher inactivity rates than women with disabilities. Lithuania presents a positive gender gap irrespectively of the definition used (1.7 p.p. and 4.2 p.p.).

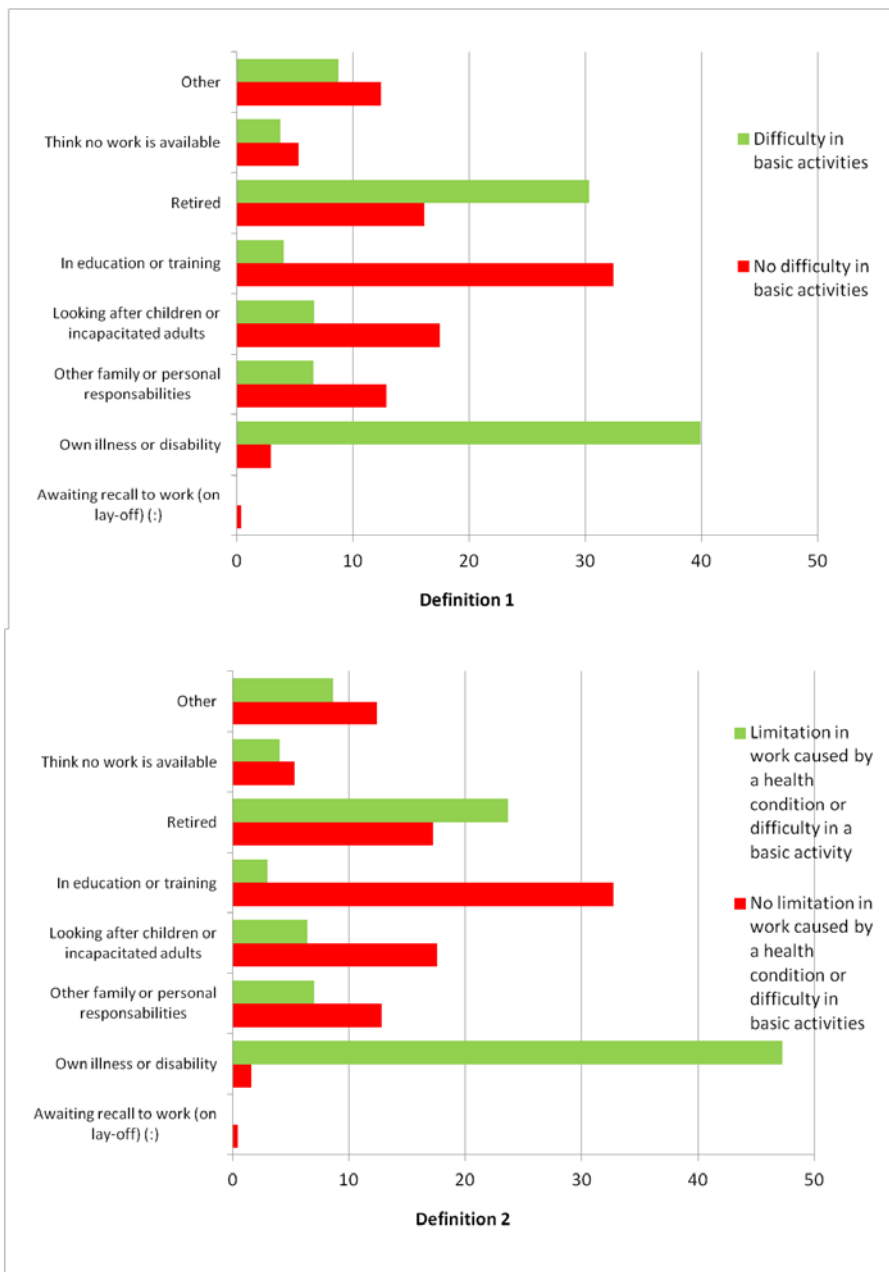
Reasons for inactivity⁵².

Unsurprisingly the majority of inactive women with disabilities are not seeking employment due to a health problem or disability: 39.9 % of women with difficulties in basic activities and 47.3 % of those with an employment disability. For women without disabilities, the main reason mentioned was instead 'education or training', followed by retirement and care duties (see Table 13a in Annex 2). The same patterns apply for men with disabilities. However, while the shares of disabled men inactive because of illness or disability, education or retirement is higher than that of women, the reverse holds for care duties and no availability of work (discouraged women).

⁵¹ Using the first definition, the gender gap, if negative, ranges from -25.4 p.p. (Malta) to -0.5 (Finland). Using the second definition, from -16.6 p.p. (Malta) to -0.7 (Estonia).

⁵² Note that gender disaggregated data for people inactive because of waiting for a recall to work (on lay-off) are not provided. 'No response' answers are not included.

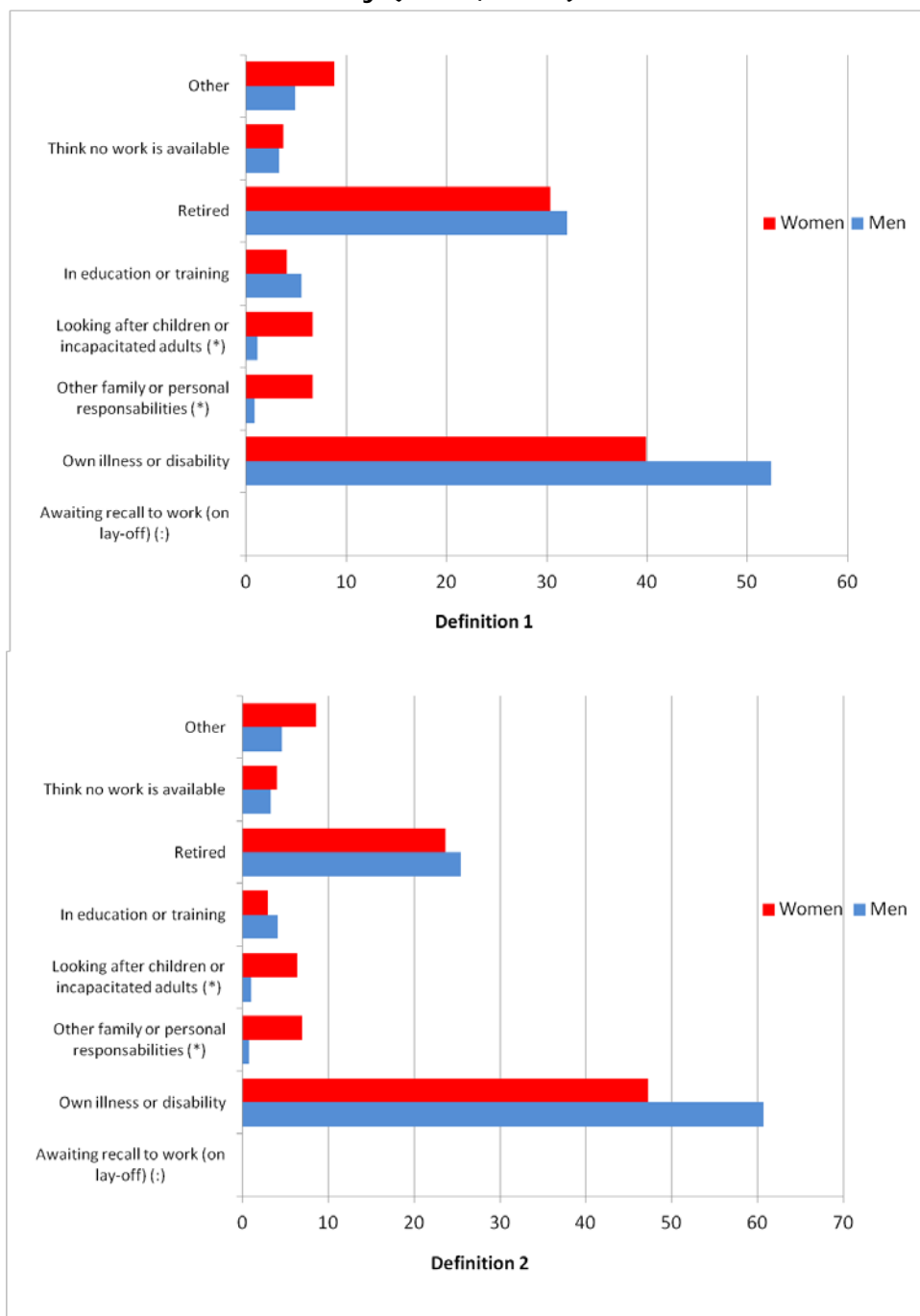
Figure 3.20: Main reason for not seeking employment business (in %; missing answers not included) for inactive women, by definition of disability (EU28, 2011)



Notes: (:) Not available with gender disaggregation. Women aged 15–64.

Source: 2011 EU LFS-AHM. See Tables 13a and 13b in Annex 2.

Figure 3.21: Main reason for not seeking employment business (in %; missing answers not included) for inactive people, by gender and by definition of disability (EU28, 2011)



Notes: (*) Low reliability. (:) Not available with gender disaggregation. People aged 15–64.

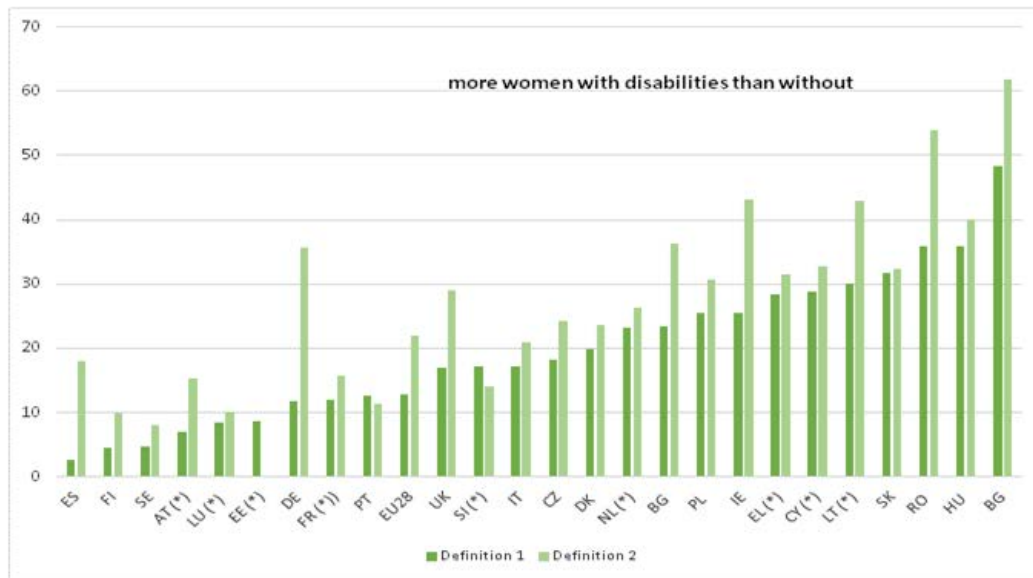
Source: 2011 EU LFS-AHM. See Table 13a and 13b in Annex 2.

NEET rates.

Young women with disabilities are more likely than men with and women without disabilities to be ‘not in education, employment or training’ (NEET).

Almost one-third (32.1 %) of young women aged 15–34 having a basic activity difficulty were neither in employment nor in any education or training (NEET) in the EU28 (2011), compared to 29.3 % of young men having a basic activity difficulty and 19.3 % of young

Figure 3.23: Disability gaps (p.p.) in in NEET rate of young people (15–34), by disability definition and by Member State (EU28, 2011)



Notes: (*) Low reliability; (:) Not available with gender disaggregation.

Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an 'employment disability' (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD).

The **disability gap** is computed as the difference between the NEET rate of women with disabilities and the NEET rate of women without disabilities. A positive disability gap implies that the NEET rate of women with disabilities is higher than the NEET rate of women without disabilities. The opposite is true when the disability gap is negative.

Source: 2011 EU LFS-AHM. See Tables 15a and 15b in Annex 2.

Employment patterns.

Women with disabilities are more likely to work part-time and from home than both women without and men with disabilities.

Part-time employment can be used as a way to increase the employment of women with disabilities, especially those suffering significant barriers and difficulties in the labour market (e.g., those with epilepsy, mental, emotional conditions and other progressive illnesses or having long-term disabilities) (Pagán-Rodríguez, 2009; Jones, 2006)⁵⁶.

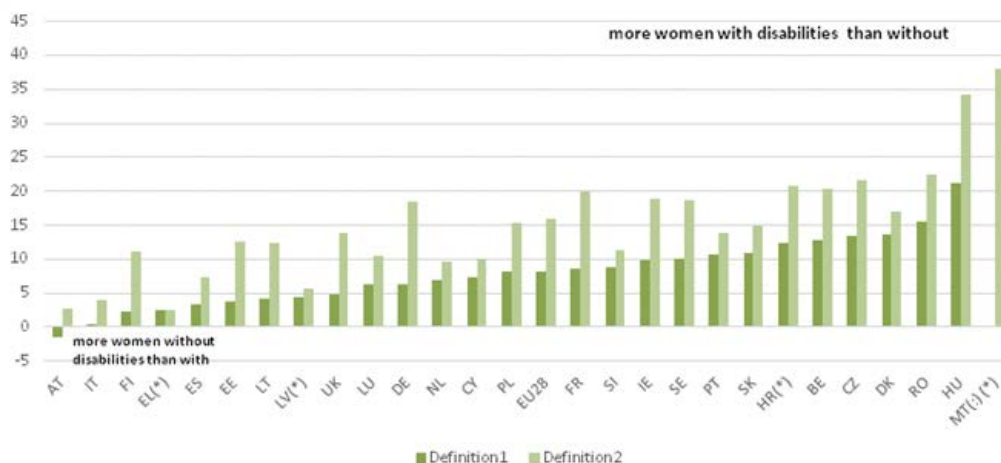
As to the disability gap, at the EU level, women who reported having a basic activity difficulty (i.e. definition 1) were more likely than those without to be employed part-time (38.6 % compared to 30.3 %). The proportion of EU women with a disability working part-time was even higher under the second definition of disability (45.8 %) (See Table 16a in Annex 2).

The same employment pattern can be found at country level, under both definitions⁵⁷. The disability gap in the proportion of women working part-time was highest in Hungary (21.2 p.p.) for definition 1, and in Malta (38.1 p.p.) for definition 2. Looking at gender differences, as for the overall population, **disabled men are far less likely to be employed in part-time jobs than women** (around 26 p.p. gap under both definitions).

⁵⁶ Pagán-Rodríguez, R. (2009), 'An empirical analysis on the incidence of part-time work among women with disabilities', *Disability and Rehabilitation*, Volume 31, 2009 - Issue 2. Jones, M. K. (2006), 'Does part-time employment provide a way of accommodating a disability?', IZA conference paper

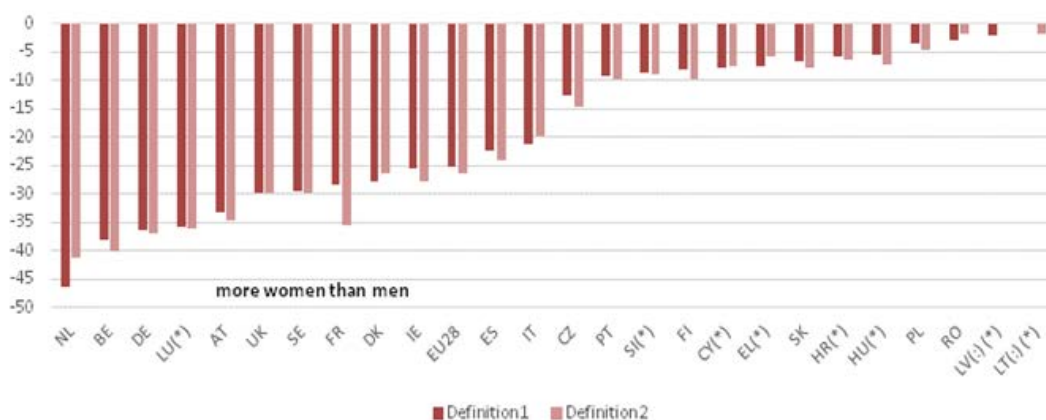
⁵⁷ Only in Austria the proportion of women without disabilities in part-time was higher than that of women with disabilities according to definition 1 of disability (- 1.5 p.p.).

Figure 3.24: Disability gaps (p.p.) in the share of part-time employment, by definition of disability and by Member State (EU28, 2011)



Notes: (*) Low reliability. (:) Not available with gender disaggregation.
 Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an ‘employment disability’ (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD).
 The **disability gap** is computed as the difference between the share of part-timers among women with disabilities and the share of part-timers among women without disabilities. A positive disability gap implies that the share of women with disabilities working part-time is higher compared to women without disabilities. The opposite is true when the disability gap is negative.

Figure 3.25: Gender gaps (p.p.) in the share of part-time employment, by definition of disability and by Member State (EU28, 2011)



Notes: (*) Low reliability. (:) Not available with gender disaggregation.
 The **gender gap** is computed as the difference between the share of part-timers among men with disabilities and the share of part-timers among women with disabilities. A negative gender gap implies that the share of women with disabilities working part-time is higher compared to men with disabilities. The opposite is true when the gender gap is positive.

Source: 2011 EU LFS-AHM. See Tables 16a and 16b in Annex 2.

In most EU Member States women with disabilities are slightly less likely than women without disabilities but slightly more likely than men with disabilities to have a temporary job⁵⁸ (see Tables 17a and 17b in Annex 2).

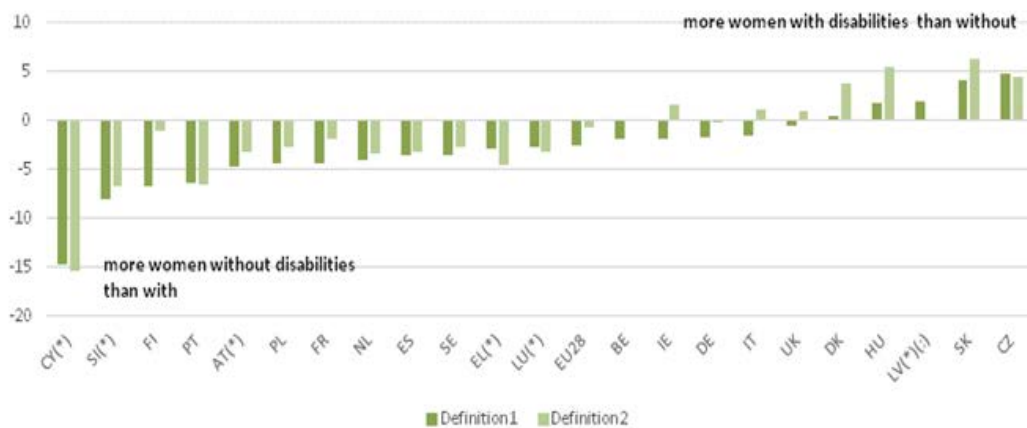
⁵⁸ The analysis of temporary jobs considers only employees (i.e. excluding the self-employed).

A possible explanation of the lower incidence of temporary work among people with disabilities is that employment contracts for people with disabilities (both men and women) are more frequently open-ended than those for people without disabilities. However, jobs at sheltered work centres usually have low salaries and reduced opportunities for career development, resulting in pay gaps and higher risks of poverty⁵⁹.

In most of the 21 Member States with gender-disaggregated data⁶⁰ a similar pattern emerges in disability gaps, i.e. **women with a basic activity difficulty were slightly less likely to have a temporary job than women without difficulty**. However, the opposite situation (i.e. a positive disability gap) was observed in the Czech Republic, Slovakia, Latvia, Hungary and Denmark.

Turning to the gender gap, **on average women with disabilities are slightly more likely than men to be employed in temporary occupations** (with a 1.1 difference in p.p.). This pattern is confirmed across all the Member States, with the highest gender gap in the Czech Republic (-7.1 p.p.). Only Belgium, Latvia, Hungary, Austria and Poland present the opposite situation (i.e. a positive gender gap).

Figure 3.26: Disability gaps (p.p.) in the share of temporary employees, by definition of disability and by Member State (EU28, 2011)



Notes: (*) Low reliability. (:) Not available with gender disaggregation.

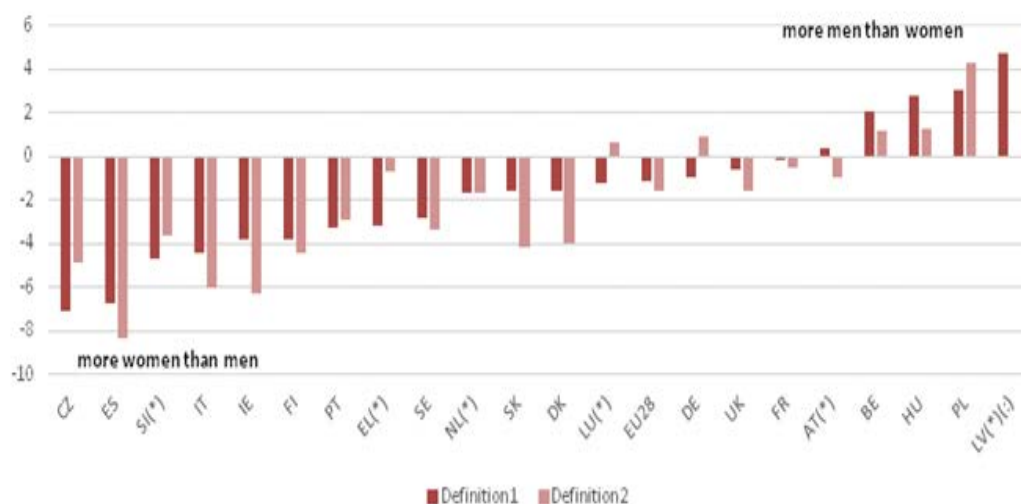
Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an 'employment disability' (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD). The **disability gap** is computed as the difference between the share of temporary employees among women with disabilities and the share of temporary employees among women without disabilities. A negative disability gap implies that the share of female employees with disabilities working with a temporary contract is lower compared to women without disabilities. The opposite is true when the disability gap is positive.

Source: 2011 EU LFS-AHM. See Table 17a and 17b in Annex 2.

Using the second definition of disability, the disability gap in temporary employment is lower at the EU28 level (0.7 p.p.), although Member States present wider differences (see Table 17b in Annex 2). **On the contrary, the gender gap slightly increases**, reaching a gap of 1.6 p.p. between women and men reporting a limitation in work because of an LHPAD. As shown in Figure 3.28, the gender gap is positive only in five (BE, DE, LU, HU, and PL).

⁵⁹ Verdugo M.A. et al. (2009), *Report on the employment of disabled people in European countries - Country: Spain*, Academic Network of European Disability experts (ANED).

⁶⁰ See Tables 17a and 17b in Annex 2.

Figure 3.27: Gender gaps (p.p.) in the share of temporary employees, by definition of disability and by Member State (EU28, 2011)

Notes: (*) Low reliability. (:) Not available with gender disaggregation.

Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an 'employment disability' (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD).

The **gender gap** is computed as the difference between the share of temporary employees among men with disabilities and the share of temporary employees among women with disabilities. A negative gender gap implies that the share of female employees with disabilities working with a temporary contract is higher compared to men with disabilities. The opposite is true when the gender gap is positive.

Source: 2011 EU LFS-AHM. See Table 17a and 17b in Annex 2.

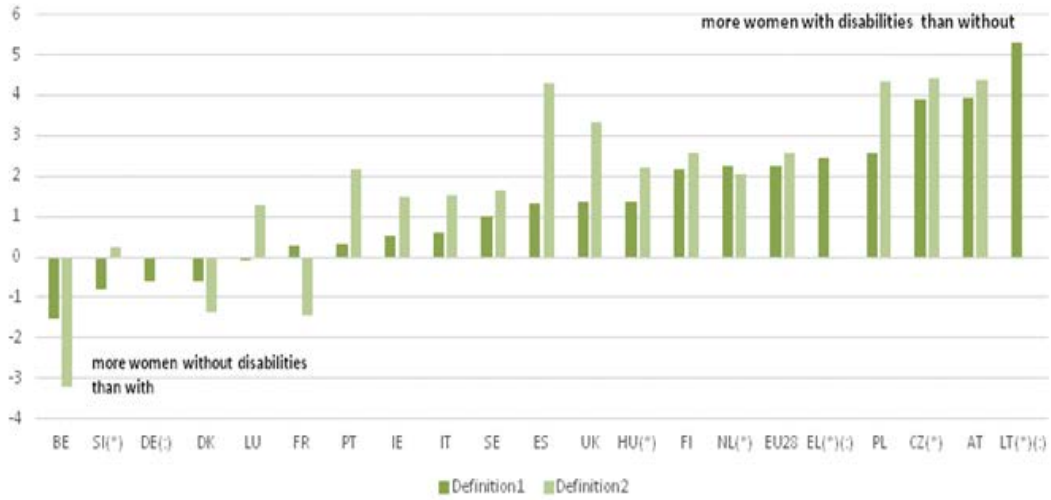
Working from home has become increasingly widespread among people with disabilities. In the EU as a whole, irrespective of which of the two definitions of disability is used, the proportion of women with disabilities usually working from home was higher than among women without disabilities and men with disabilities. However, women with disabilities experience some barriers to employment compared to men with disabilities even when the work is from home.

Around 7.6 % of employed women with difficulties in basic activities usually worked from home in 2011 compared to 5.4 % of those without difficulty. Similar rates apply to the second definition of disability: 8 % for women with disabilities compared to 5.5 % for women without⁶¹. The disability gaps vary considerably among countries (See Tables 18a and 18b in Annex 2), although these data have to be interpreted with caution, as most of them are unreliable or missing when we consider the gender disaggregation.

On average, the share of women with disability working usually at home is more than 1 percentage point higher than that of men with disability. However, as shown in Figure 3.29, the opposite is true in some Member States (FI, SE, BE, DK, NL, IE), where gender gaps are positive, meaning that the share of men with disabilities working from home is higher than that of women with disabilities. In particular, the gender gaps range from -5.2 p.p. (Czech Republic) to 6.2 (Ireland) when we use the first definition, and from -4.7 p.p. (Czech Republic) to 11.4 (Ireland) when we use the second one.

⁶¹ The slight difference in percentages is due to the different populations considered according to the two definitions of disability

Figure 3.28: Disability gaps (p.p.) in percentage of people working from home, by disability definition and by Member States (EU28, 2011)



Notes: (*) Low reliability. (:) Not available with gender disaggregation. Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an ‘employment disability’ (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD). The **disability gap** is computed as the difference between the percentage of people working from home among women with disabilities and the percentage of people working from home among women without disabilities. A positive gap implies that the percentage of people working from home among women with disabilities is higher compared to women without disabilities. The opposite is true when the gap is negative.

Source: 2011 EU LFS-AHM. See Table 18a and 18b in Annex 2.

Figure 3.29: Gender gaps (p.p.) in the percentage of people working from home, by disability definition and by Member States (EU28, 2011)



Notes: (*) Low reliability. (:) Not available with gender disaggregation. Definition of **disability (1)**: People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of **disability (2)**: People having an ‘employment disability’ (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD). The **gender gap** is computed as the difference between the percentage of people working from home among men with disabilities and the percentage of people working from home among women with disabilities. A negative gender gap implies that the percentage of people working from home among women with disabilities is higher than that of men with disabilities. The opposite is true when the gender gap is positive.

Source: 2011 EU LFS-AHM. See Table 18a and 18b in Annex 2.

Gender Segregation in employment

This is pervasive also among people with disabilities. The employment opportunities of women with disabilities are confronted with the same ‘double segregation’ women in general experience in the labour market. The horizontal and the vertical gender segregation confines them in a limited range of sectors and occupations.

One of the most commonly used gender segregation indexes, the **Index of Dissimilarity (ID)**⁶², shows that in the EU28 on average, in 2011, there are no significant differences in the extent of vertical and horizontal gender segregation between people with and without disabilities. As shown in Table 3.3, the Index of Dissimilarity shows a slightly lower horizontal gender segregation among people with disabilities compared with people without when using definition 2, and a slightly higher vertical gender segregation among people with disabilities, when using definition 1.

Table 3.3: Horizontal (by industry) and vertical (by occupation) gender segregation (15-64) both among people with and without disabilities in the EU-28, 2011 (Index of Dissimilarity)

		Horizontal Segregation (by industry)	Vertical Segregation (by occupation)
People with disabilities	Defintion 1	31.4	32.2
	Defintion 2	29.8	31.4
People without disabilities	Defintion 1	31.2	31.4
	Defintion 2	31.4	31.5

Notes: Definition of disability (1): People having a basic activity difficulty (such as sight, hearing, walking, communicating). Definition of disability (2): People having an ‘employment disability’ (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD).

The Index of dissimilarity (ID) is used to compute gender segregation in the population with and without disabilities.

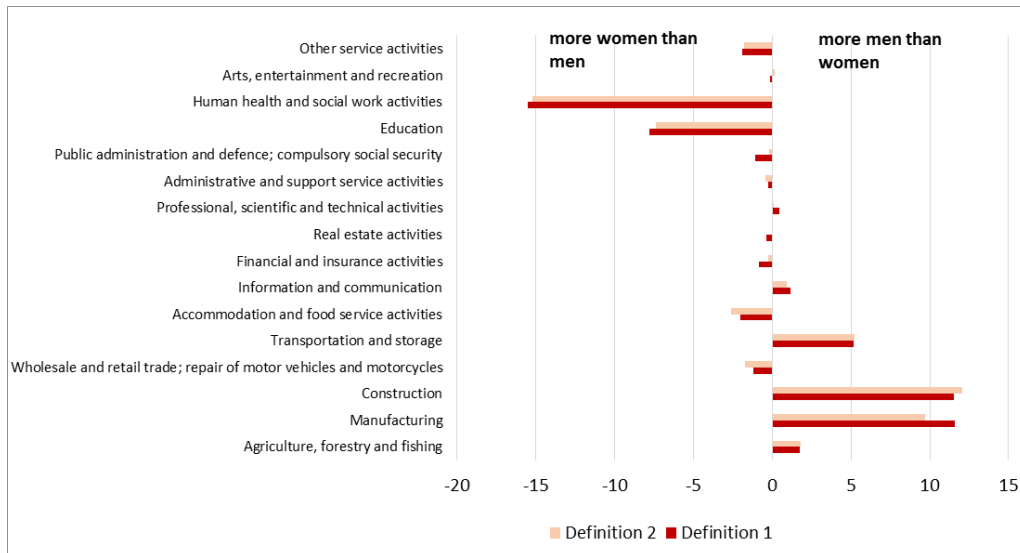
Source: elaboration on Eurostat data, EU LFS – AHM. See Tables 19 and 20 in Annex 2.

As for horizontal segregation, on average in the EU28⁶³ the highest share of women with disabilities (according to definition 1) is employed in human health and social work activities (20.8% compared to 5.3% of men with disabilities), while men with disabilities are employed especially in the manufacturing sector (21.2% compared to 9.6% of women with disabilities). The share of women with disabilities employed in human health and social work activities is also higher than that of women without disabilities (17.8%), while fewer are employed in the other ‘female’ sector of wholesale and retail trade sector (-2.3 p.p.). Similar results are found according to the definition 2 of disability.

⁶² The index of dissimilarity can be interpreted as “[...] the proportion of women (or men), who would have to change their occupations (or industries) in order for women to be evenly distributed in all occupations or industries (to achieve the same proportion as men in every occupation or industry)” (Anker 1998). The ID index has a minimum value of 0 (which represents no segregation i.e. there is the same percentage of women and men in each occupation/industry) and a maximum value of 100 (which represents complete segregation i.e. each occupation/industry is completely female or completely male). In this study, the index has been computed for the population with disabilities, comparing employed men and women with disabilities aged 15-64, and for the population without disabilities aged 15-64, in the NACE Rev.2 classification (horizontal segregation) and in the 1 digit, eight occupations (vertical segregation, Armed forces occupations have been excluded) of the ISCO-08 classification.

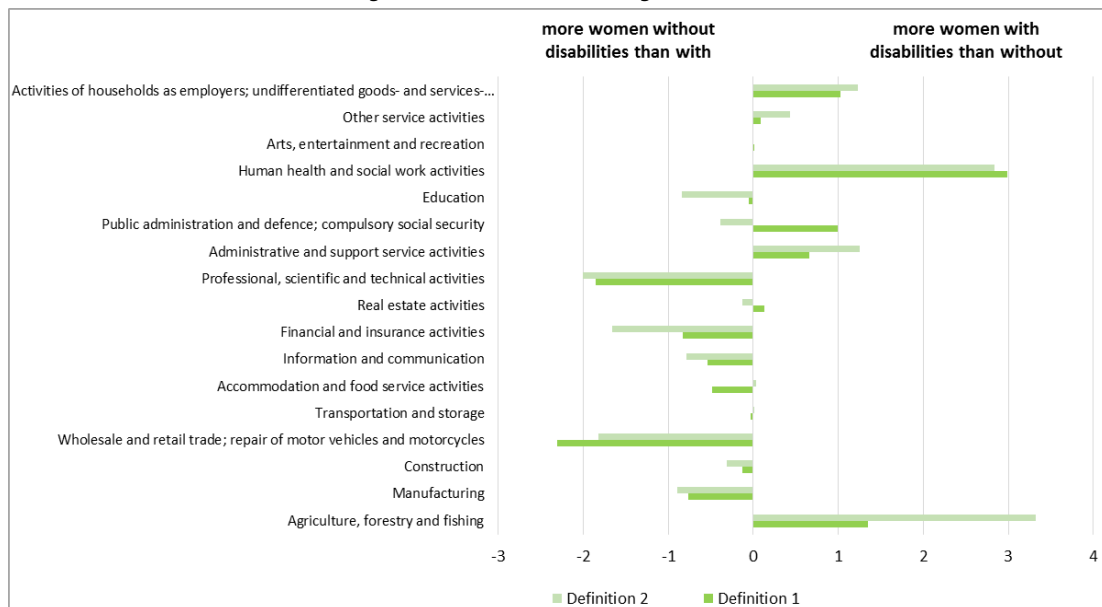
⁶³ The analysis of the employment of people with disabilities by gender and by economic activity is realised only at EU level, because in many EU Member States data on employment by gender and sector are not available and/or reliable only for a limited number of economic activities.

Figure 3.30: Gender gaps (p.p.) in the share of people employed, by disability definition and by economic activity (EU28, 2011)



Notes: **Disability (1):** People having a basic activity difficulty. **Disability (2):** People having an ‘employment disability’ (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD). The **gender gap** is computed as the difference between the share of men with disabilities and the share of women with disabilities employed in each sector. A negative gender gap implies that the share of women with disabilities is higher than that of men with disabilities. The opposite is true when the gender gap is positive.

Figure 3.31: Disability gaps (p.p.) in the share of people employed, by disability definition and by economic activity (EU28, 2011)



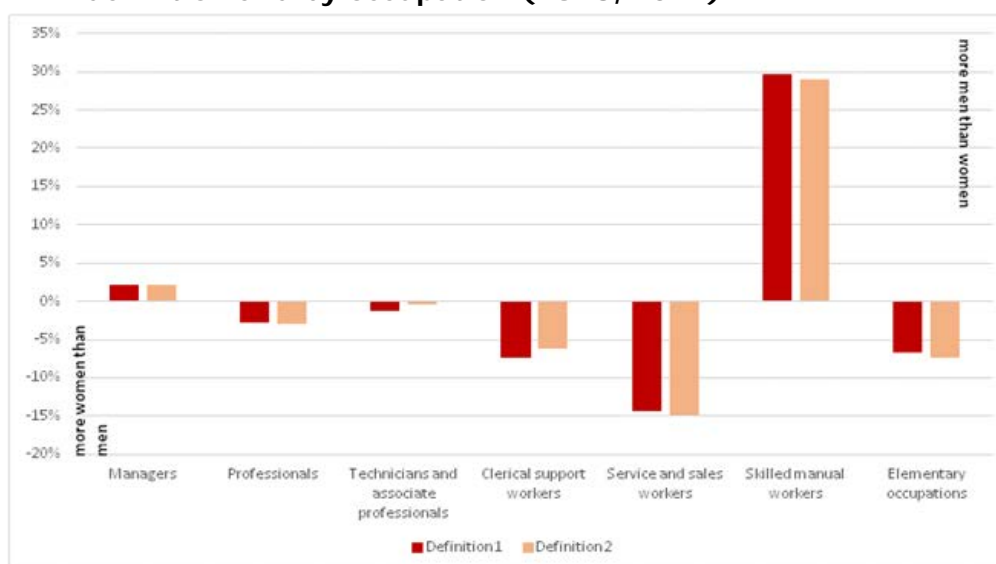
Notes: **Disability (1):** People having a basic activity difficulty (such as sight, hearing, walking, communicating). **Disability (2):** People having an ‘employment disability’ (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD). The **disability gap** is computed as the difference between the share of women with disabilities and the share of women without employed in each sector. A negative disability gap implies that the share of women with disabilities is lower than that of women without disabilities. The opposite is true when the disability gap is positive.

Source: 2011 EU LFS-AHM. See Table 19 in Annex 2.

The glass ceiling is particularly stringent for women with disabilities. They are less likely to be employed in high and medium skilled occupations compared to both men with disabilities and women without. On average, at the EU28 level⁶⁴ more than one-third of women with disabilities (38.5 % compared to 16.6 % of men with disabilities according to definition 1) are employed as clerical support workers or service and sales workers, while most men with disabilities work as skilled manual workers (40.8 % compared to 10.7 % of women with disabilities).

While both men and women with disabilities are very rarely employed in high and medium skilled occupations, the share of women with disabilities working as 'managers' is 2.2 p.p. lower than the share of men with disabilities, according to both definitions of disability. They are instead more likely than men to work as 'professionals' and 'technicians, and associate professionals', or in 'elementary occupations'.

Figure 3.32: Gender gaps (p.p.) in the share of people employed, by disability definition and by occupation (EU28, 2011)



Notes: Disability (1): People having a basic activity difficulty (such as sight, hearing, walking, communicating).

Disability (2): People having an 'employment disability' (limited in work activity because of a long-standing health problem and/or a basic activity difficulty – LHPAD).

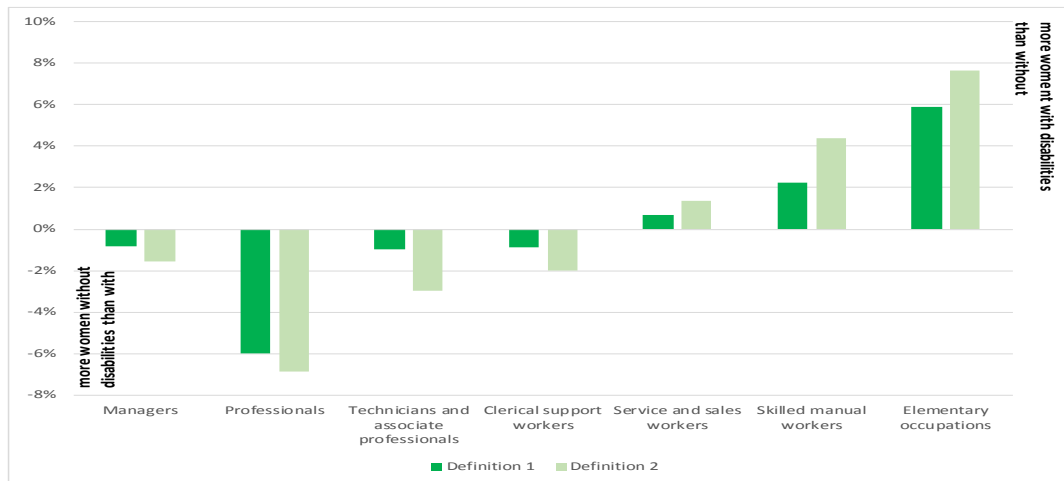
The **gender gap** is computed as the difference between the share of men with disabilities and the share of women with disabilities employed in each occupation. A negative gender gap implies that the percentage of women with disabilities is higher than that of men with disabilities. The opposite is true when the gender gap is positive.

Source: 2011 EU LFS-AHM. See Table 20 in Annex 2.

Vertical segregation is particularly evident when comparing women with disabilities with women without, as in Figure 3.33. Women with disabilities are more concentrated in low-skilled occupations and less likely to be employed in high and medium skilled ones even when compared to women without disabilities.

⁶⁴ As for the analysis by economic activity, the analysis by gender and occupations is conducted only at EU level, because in many EU Member States these data are available and/or reliable only for a limited number of occupations.

Figure 3.33: Disability gaps (p.p.) in the share of people employed, by disability definition and by occupation (EU28, 2011)



The **disability gap** is computed as the difference between the share of women with disabilities in each occupation and the share of women without disabilities employed in each occupation. A negative disability gap implies that the share of women with disabilities in the occupation is lower than that of women without disabilities. The opposite is true when the disability gap is positive.

Source: 2011 EU LFS-AHM. See Table 20 in Annex 2.

3.4. Poverty and income inequalities among women with disabilities

The impact of the economic crisis on the lives of people with disabilities shows that they have suffered much more from the crisis and the resulting austerity measures than non-disabled people. Budget cuts to welfare systems, social and health services and leisure activities have strongly affected people with disabilities (Kiss, 2016)⁶⁵.

Income is a key measure of the economic well-being of individuals. The EU-SILC database is the reference source for statistics on income, poverty and living conditions in the European Union. In EU-SILC, disability is approximated according to the concept of global activity limitation, which is defined as a 'limitation in activities people usually do because of health problems for at least the past six months'⁶⁶.

EU-SILC data show that generally **income, poverty and living conditions of women with an activity limitation are worse than both those of women with no such limitation and those of men with. The gender gap is generally lower than the disability gap, reflecting the difficult economic conditions of all the people with disabilities.**

Further elements should have been included in the analysis, as the the existence of a gender wage gap or a gender gap in pension for women with disabilities. Unfortunately, these have not been included due to the absence of data with gender disaggregation.

At risk of poverty or social exclusion rate.

In 2014, about one-third (31 %) of women aged 16 or more in the EU28 and having an activity limitation was **at risk of poverty or social exclusion**, compared to 28.8 % of men with an activity limitation, and to 22.4 % of women with no limitation.

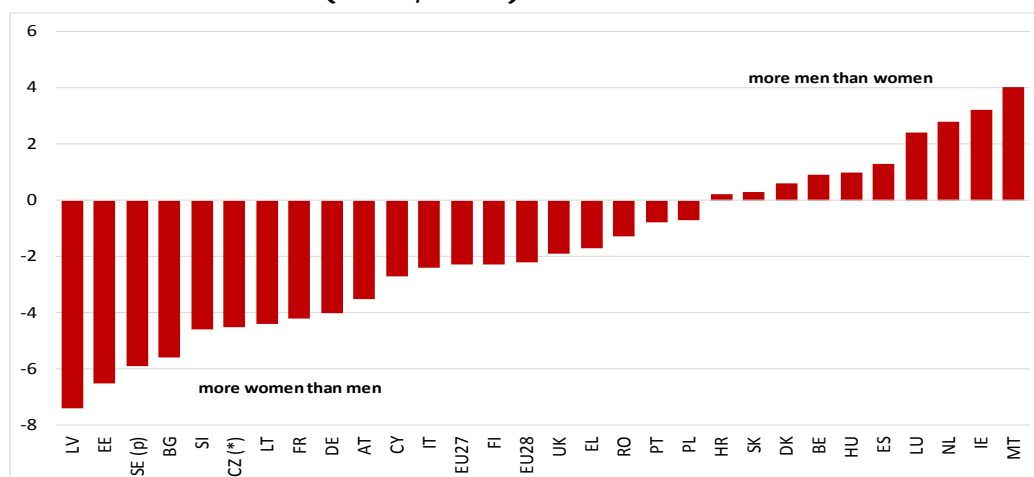
The highest disability gap is in Latvia (19.7 percentage points) and the lowest in Luxembourg (2.1 percentage points). Turning to the gender gap, some Member States

⁶⁵ Kiss, M (2016), Vulnerable social groups: Before and after the crisis, European Parliament Briefing.

⁶⁶ This concept represents an adequate proxy for disability, both according to the scientific community and to disabled persons' organisations.

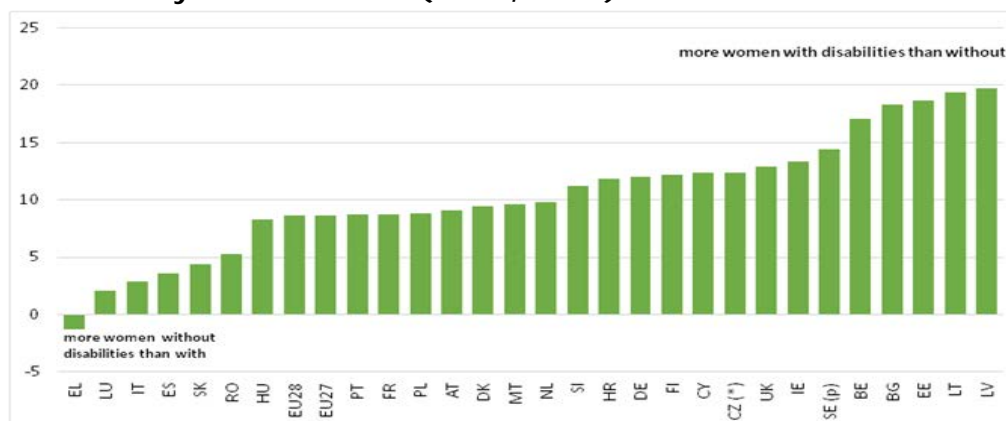
(Belgium, Denmark, Ireland, Spain, Croatia, Luxembourg, Hungary, Malta, the Netherlands, Slovakia), show positive gaps, with disabled men more exposed to the risk of poverty and social exclusion than disabled women.

Figure 3.34: Gender gaps (in p.p.) in the rate of people at risk of poverty or social exclusion (16 years and over), by level of activity limitation and by Member State (EU28, 2014)



Notes: (*) Low reliability data; (p) provisional data. The **gender gap** is computed as the difference between the at-risk of poverty or social exclusion rate of men with disabilities and the at-risk of poverty or social exclusion rate of women with disabilities. A negative gender gap implies that women with disabilities have a higher risk than men with disabilities. The opposite is true when the gender gap is positive.

Figure 3.35: Disability gaps (in p.p.) in the rate of people at risk of poverty or social exclusion (16 years and over), by level of activity limitation and by Member State (EU28, 2014)



Notes: (*) Low reliability data; (p) provisional data. The **disability gap** is computed as the difference between the at-risk of poverty or social exclusion rate of women with disabilities with that of women without disabilities. A positive disability gap implies that women with disabilities have a higher risk than women with disabilities. The opposite is true when the disability gap is negative.

Source: EU-SILC (2014). See Tables 21a and 21b in Annex 2.

Similar patterns, even if with lower gaps, relate to the at-risk-of-poverty rate (with a gender gap of 1.5 percentage points and a disability gap of 4.4 percentage points at the EU28 average, see Tables 22a and 22b in Annex 2) **and the severe material deprivation rate** (with a gender gap of 1.1 percentage points and a disability gap of 5.2 percentage points, see Tables 23a and 23b in Annex 2).

In most Member States, with the exceptions of Denmark, Greece, Romania and Slovakia, women with an activity limitation are on average more exposed to the **risk of poverty**

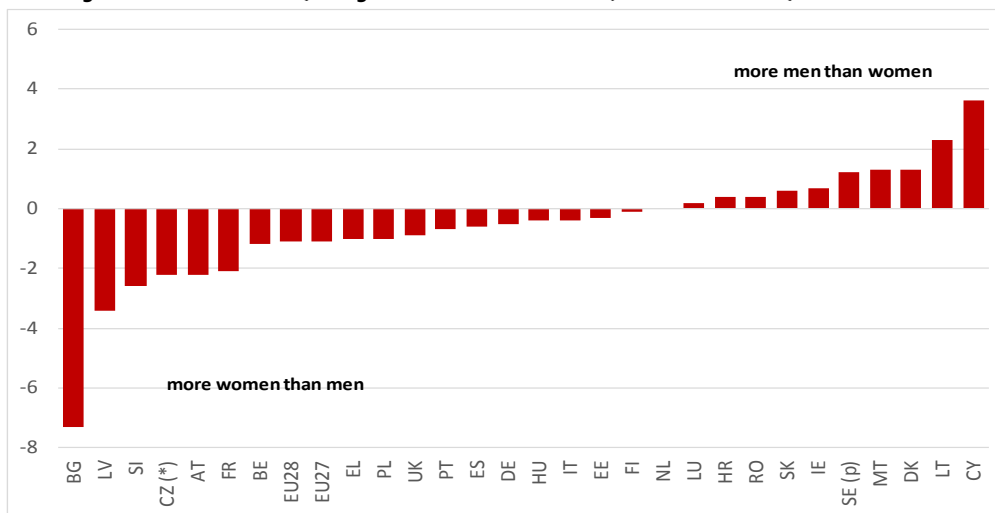
than women without; in eight Member States (Denmark, Ireland, Luxembourg, Malta, the Netherlands, Poland, Romania and Slovakia) men with activity limitations are at a higher risk of poverty than women.

Severe material deprivation rate.

In all Member States, the severe material deprivation rate is higher for women with, than for women without an activity limitation. The disability gap is particularly high in some Eastern European Member States: in Bulgaria, Latvia and Lithuania it is over 10 percentage points.

In most Member States, severe material deprivation is more frequent among women with disabilities than among men, with a gender gap ranging from 7.3 percentage points in Bulgaria to 0.1 percentage points in Finland. However, in ten Member States (Luxembourg, Croatia, Romania, Slovakia, Ireland, Sweden, Malta, Denmark, Lithuania, Cyprus) the opposite is true.

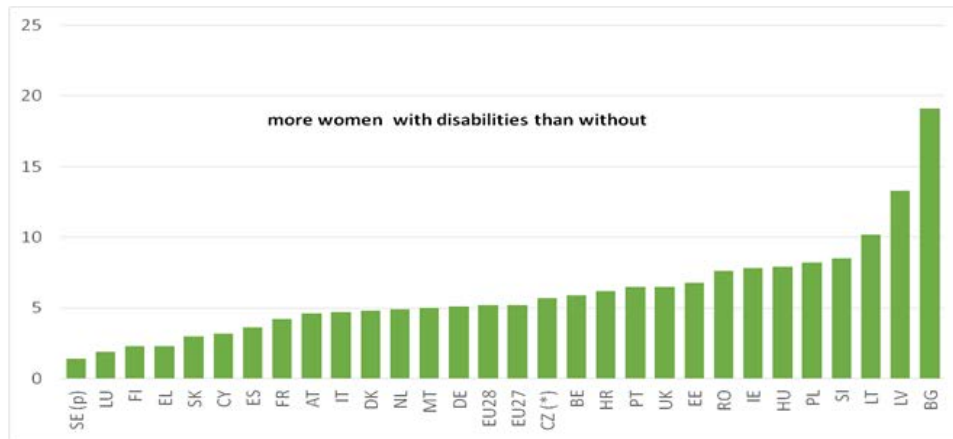
Figure 3.36: Gender gaps in the severe material deprivation rate (people with 16 years and over), by Member State (EU28, 2014)



Notes: (*) Low reliability data; (p) provisional data. The **gender gap** is computed as the difference between the severe material deprivation rate of men with disabilities and that of women with disabilities. A negative gender gap implies that women with disabilities have a higher risk than men with disabilities. The opposite is true when the gender gap is positive.

Source: EU-SILC (2014). See Tables 23a and 23b in Annex 2.

Figure 3.37: Disability gaps in the severe material deprivation rate (16 years and over), by Member State (EU28, 2014)



Notes: (*) Low reliability data; (p) provisional data

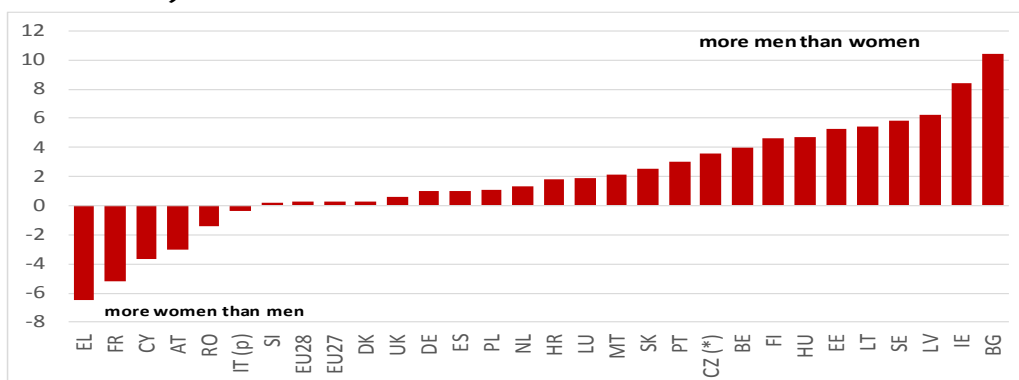
The **disability gap** is computed as the difference between the severe material deprivation rate of women with disabilities and that of women without disabilities. A positive disability gap implies that women with disabilities have a higher risk than women without disabilities. The opposite is true when the gender gap is negative.

Source: EU-SILC (2014). See Tables 23a and 23b in Annex 2.

Households with very low work intensity.

The share of individuals aged less than 60 and living in households with very low work intensity is also characterised by a very low gender gap (0.3 percentage points) and by a very high disability gap (15.6 percentage points), reflecting the difficult access to the labour market for both women and men with activity limitations. The disability gap ranges from 7.3 percentage points in Italy⁶⁷ to 25.8 percentage points in Belgium, and to 26.4 percentage points in Malta. The share of men with activity limitations living in households with very low work intensity is instead higher than that of women in most Member States, with the exceptions of Greece, France, Italy, Cyprus, Austria and Romania.

Figure 3.38: Gender gaps in the proportion of people (less than 60 years) living in households with very low work intensity, by Member State (EU28, 2014)



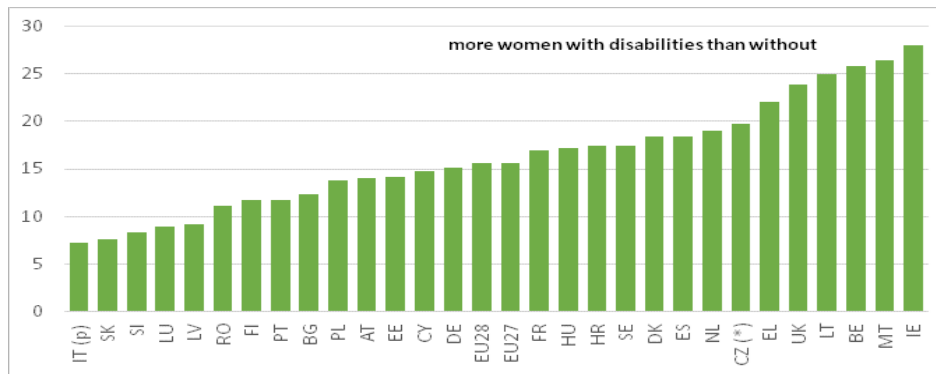
Notes: (*) Low reliability data; (p) provisional data.

The **gender gap** is computed as the difference between the share of men with disabilities (aged less than 60 years) living in households with very low work intensity and the share of women with disabilities (aged less than 60 years) living in households with very low work intensity. A positive gender gap implies a lower share of women with disabilities (aged less than 60 years) living in households with very low work intensity with respect to men with disabilities. The opposite is true when the gender gap is negative.

Source: EU-SILC (2014). See Tables 24a and 24b in Annex 2.

⁶⁷ Data related to 2014 for Italy are provisional.

Figure 3.39: Disability gaps in the proportion of people (less than 60 years) living in households with very low work intensity, by Member State (EU28, 2014)



Notes: (*) Low reliability data; (p) provisional data.

The **disability gap** is computed as the difference between the share of women with disabilities (aged less than 60 years) living in households with very low work intensity and the share of women without disabilities (aged less than 60 years) living in households with very low work intensity. A positive disability gap implies a higher share of women with disabilities (aged less than 60 years) living in households with very low work intensity with respect to women without disabilities. The opposite is true when the disability gap is negative.

Source: EU-SILC (2014). See Tables 24a and 24b in Annex 2.

In-work poverty rate.

In-work poverty (i.e. poverty among the employed population) is a key indicator of the quality of the labour market integration of people having an activity limitation. Being in employment reduces the risk of poverty, although employment does not make the risk of poverty disappear. On average, having a job appears to reduce the gender gap in the share of people with activity limitation at risk of poverty, although to a lower extent than for those with no limitations. Differences in working conditions and wages often translate in higher risk of poverty, even for those employed. Despite qualifications, women with disabilities have lower employment rates in higher skilled jobs and work fewer hours than women without disabilities. As a result, they have both low earnings and few opportunities to progress up the career ladder (APPG, 2017). A number of reasons, including multiple social and institutional barriers, count for the disabled women's rather more limited career options (Shaw Trust, 2017; APPG, 2017). For example, gender roles and socio-institutional stereotypes restrict the range of jobs open to women with disabilities. In addition, work experience and training opportunities for women with disabilities are limited when compared to those offered to their peers without disabilities (Shaw Trust, 2017; APPG, 2017).

In 2014 in the EU28, while the gender gap for in-work poverty was almost null at the EU28 average (12.2 % for women compared to 12.1 % for men), the disability gap between women with and without disability was relatively high, reaching on average 8.5 %. The in-work poverty rate is lower among women with activity limitation than among women without, in only six EU Member States: Ireland, Italy⁶⁸, Cyprus, Malta, Austria and Slovenia. It is instead lower than among men with activity limitations in more than half of the Member States, although to a different extent (Czech Republic⁶⁹, Denmark, Ireland, Greece, Spain, Croatia, Italy⁷⁰, Cyprus, Luxembourg, Hungary, Malta, Austria, Portugal,

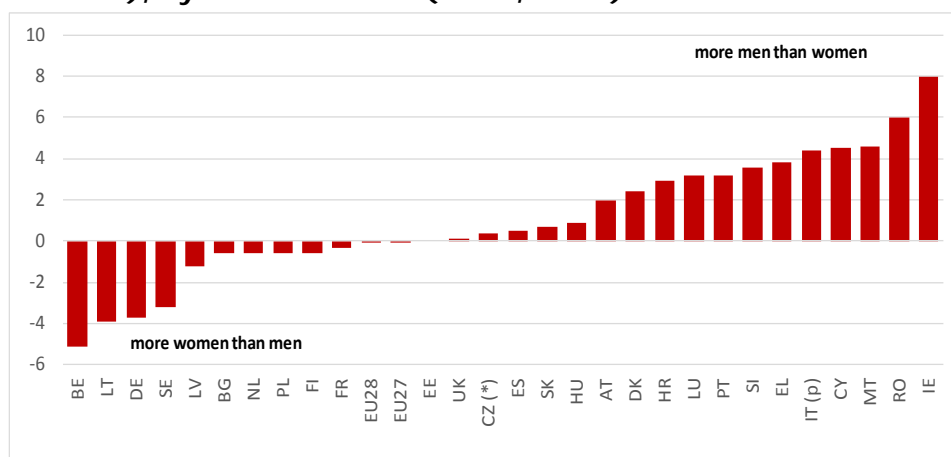
⁶⁸ Data related to 2014 for Italy are provisional.

⁶⁹ However, the reliability of data for Czech Republic is low.

⁷⁰ Data related to 2014 for Italy are provisional.

Romania, Slovenia, Slovakia, the UK), while in Estonia the in-work at-risk-of-poverty rate is the same among men and women with activity limitation.

Figure 3.40: Gender gaps in the ‘in-work at-risk-of-poverty’ rate (18 years and over), by Member State (EU28, 2014)

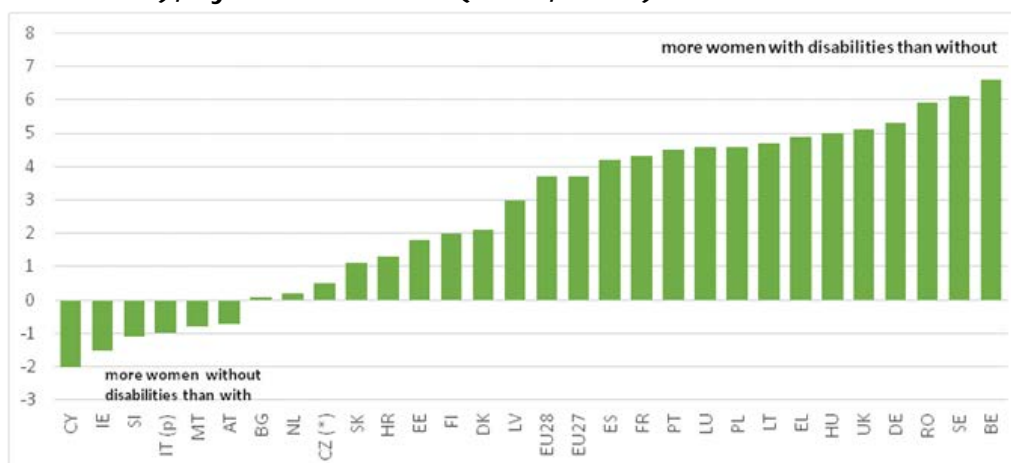


Notes: (*) Low reliability data; (p) provisional data.

The **gender gap** is computed as the difference between the in-work at-risk-of-poverty rate of men with disabilities and the in-work at-risk-of-poverty rate of women with disabilities. A negative gender gap implies that women with disabilities have a higher risk than men with disabilities. The opposite is true when the gender gap is positive.

Source: EU-SILC (2014) **Source:** EU-SILC (2014). See Tables 25a and 25b in Annex 2.

Figure 3.41: Disability gaps in the ‘in-work at-risk-of-poverty’ rate (18 years and over), by Member State (EU28, 2014)



Notes: (*) Low reliability data; (p) provisional data.

The **disability gap** is computed as the difference between the in-work at-risk-of-poverty rate of women with disabilities and the in-work at-risk-of-poverty rate of women without disabilities. A positive disability gap implies that women with disabilities have a higher risk than women without disabilities. The opposite is true when the gender gap is negative.

Source: EU-SILC (2014). See Tables 25a and 25b in Annex 2.

Inability to meet unexpected financial expenses.

On average, women with activity limitation are more likely to be affected by financial difficulties of this nature than men with activity limitation and women without limitation. As for the previous indicators, the disability gap is on average higher than the gender gap. In the EU28, in 2014, almost half (47.7 %) of women aged 16 years and over with activity limitation lived in households which would not be able to meet

unexpected financial expenses, compared to 43.7 % of men with an activity limitation, and to 36.2 % of women without activity limitations.

There is a significant variation across Member States. In only two, Luxembourg and the Netherlands, men with activity limitation are more exposed to the risk of being unable to meet unexpected financial expenses than women. In all the other Member States the gender gap ranges from 0.1 percentage points in Malta to 7.4 percentage points in France⁷¹.

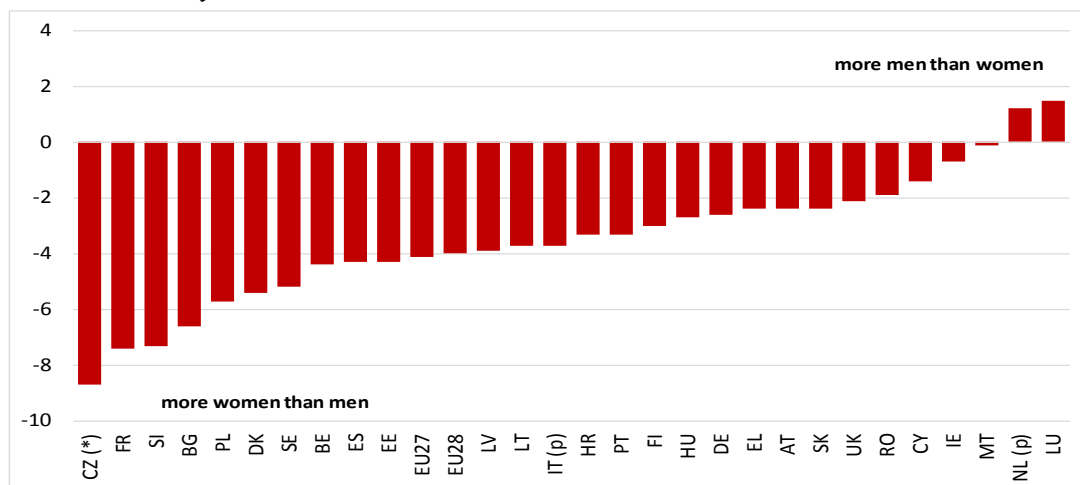
In all the EU Member States the share of women with an activity limitation unable to meet unexpected financial expenses is higher than that of women with no activity limitation. The disability gap is particularly high (over 20 %) in Bulgaria and Lithuania, and lowest in Hungary (3.5 percentage points).

Financial difficulties may leave households unable to service their debts or to pay their usual expenses such as utility bills. This seems to be particularly true for women with activity limitation, especially when compared with women with no limitation.

In 2014, in the EU28, 13.3 % of female adults with activity limitation in the EU lived in **households which had fallen behind with their payments** (for mortgage or rent, utility bills or hire purchase) in the last 12 months, compared with 11.4 % of the female adult population with no limitation. Gender gaps among women and men with activity limitation are instead negligible (0.2 percentage points). In most EU Member States, the share of women with activity limitation in these households were higher than the share of women without activity limitation. This was not the case of Greece, Croatia, Cyprus, Lithuania, Malta, Portugal and Slovakia, where the opposite was true.

In only nine EU Member States (Czech Republic⁷², Estonia, Ireland, Spain, France, Luxembourg, the Netherlands, Romania and the UK), the share of women with activity limitation in arrears was also higher than the share of men with activity limitation in the same conditions.

Figure 3.42: Gender gaps in the percentage of people (16 years and over) unable to face unexpected financial expenses, by Member State (EU28, 2014)



Notes: (*) Low reliability data; (p) provisional data.

The **gender gap** is computed as the difference between the share of men with disabilities unable to face unexpected financial expenses and the share of women with disabilities unable to face unexpected financial

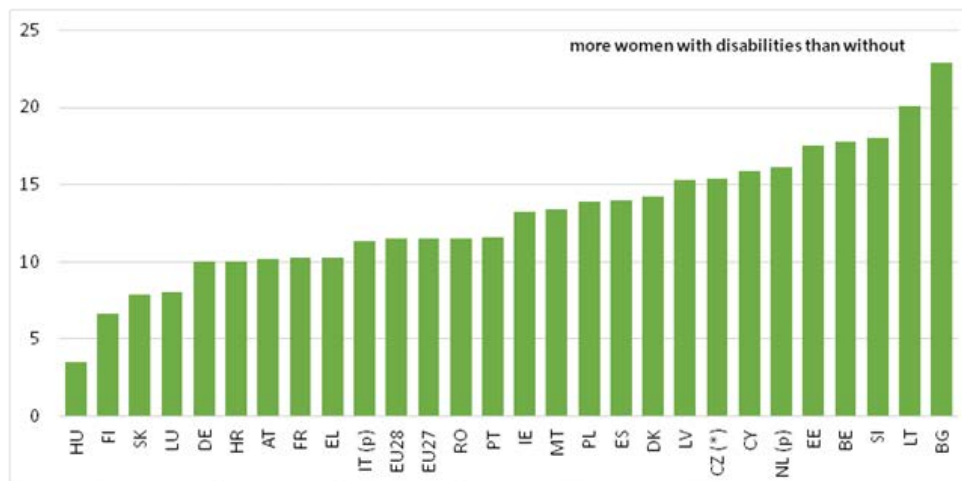
⁷¹ In the Czech Republic, the gender gap appears to be higher, 8.7 percentage points, but data are not reliable.

⁷² Data for Czech Republic are not reliable.

expenses. A negative gender gap implies a higher share of women with disabilities unable to face unexpected financial expenses with respect to men with disabilities. The opposite is true when the gender gap is positive.

Source: EU-SILC (2014). See Tables 26a and 26b in Annex 2.

Figure 3.43: Disability gaps in the percentage of people (16 years and over) unable to face unexpected financial expenses, by Member State (EU28, 2014)



Notes: (*) Low reliability data; (p) provisional data.

The **disability gap** is computed as the difference between the share of women with disabilities unable to face unexpected financial expenses and the share of women without disabilities unable to face unexpected financial expenses. A positive disability gap implies a higher share of women with disabilities unable to face unexpected financial expenses with respect to women without disabilities. The opposite is true when the disability gap is negative.

Source: EU-SILC (2014). See Tables 26a and 26b in Annex 2.

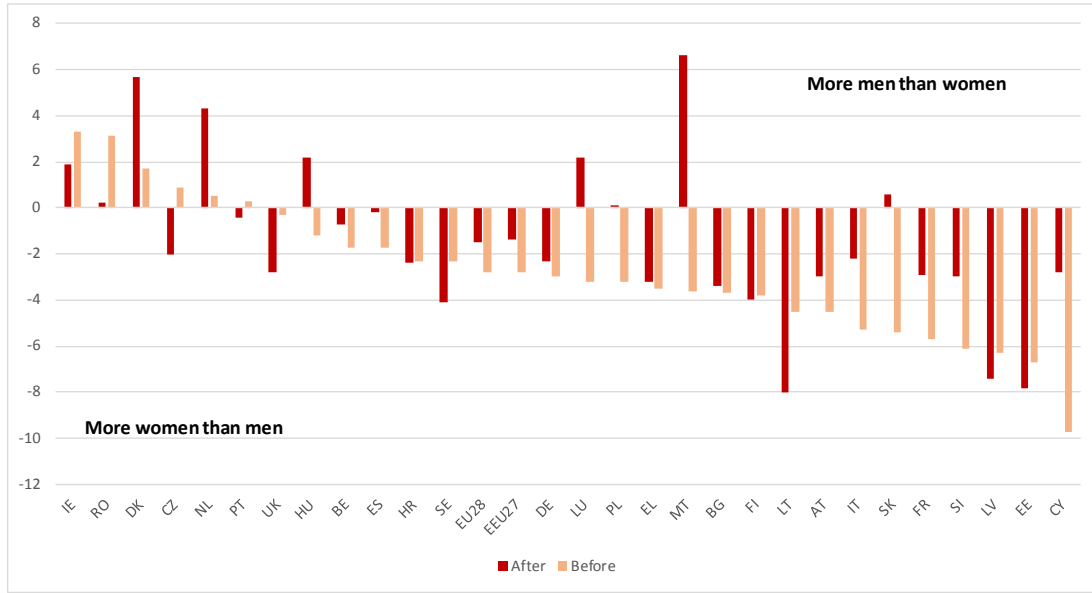
The importance of social transfers.

In EU countries social transfers (social benefits, allowances and pensions) are important measures to reduce the risk of poverty for people with activity limitations.

In 2014, a much higher share (60.9 % versus 19.6 %) of the EU28 male and female population aged 16 or more having an activity limitation would have been at risk of poverty if social transfers had not been available. The disability gap in the share of people at risk of poverty would have been 30.3 percentage points without social transfers, compared to the actual 4.4 percentage points. In most countries, social transfers appear to support women with disabilities more than men. The gender gap would also have been higher without social transfers: except for six Member States (the Czech Republic, Denmark, Ireland, the Netherlands, Portugal and Romania), where the share of people at risk of poverty before social transfers is higher for men than for women, in most EU Member States women with activity limitation are more at risk of poverty before social transfers than men.

As shown in Figures 3.44 and 3.45 in all EU countries **social transfers appear effective in reducing the disability gaps in poverty risks**. As for the gender gap, results are mixed. While in the majority of Member States gender gaps are lower after social transfers and in some cases social transfers even change the sign of the gap penalising men with disabilities, in seven countries the opposite is true and gender gaps become higher after social transfers (the Baltic and the Nordic countries).

Figure 3.44: Gender gaps in the rate of people (16 years and over) at risk of poverty before and after social transfers (pensions included in social transfers), by Member State (EU28, 2014)

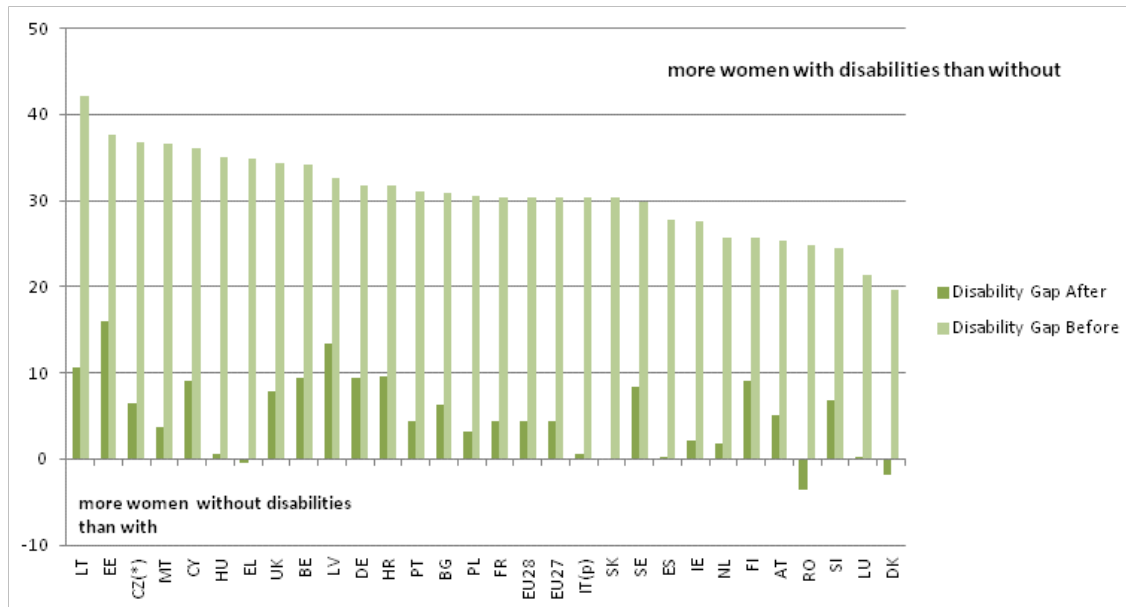


Notes: (*) Low reliability data; (p) provisional data.

The **gender gap** is computed as the difference between the at-risk-of-poverty rate of men with disabilities and the at-risk-of-poverty rate of women with disabilities. A negative gender gap implies that women with disabilities have a higher poverty risk than men with disabilities. The opposite is true when the gender gap is positive.

Source: EU-SILC (2014). See Tables 22a and 22b in Annex 2.

Figure 3.45: Disability gaps in the rate of people (16 years and over) at risk of poverty before and after social transfers (pensions included in social transfers), by Member State (EU28, 2014)



Notes: (*) Low reliability data; (p) provisional data.

The **disability gap** is computed as the difference between the at-risk-of-poverty of women with disabilities and the at-risk-of-poverty rate of women without disabilities. A positive gender gap implies that women with disabilities have a higher risk than women without disabilities (i.e. women with disabilities show a negative outcome with respect to men with disabilities). The opposite is true when the gender gap is negative.

Source: EU-SILC (2014). **Source:** EU-SILC (2014). See Tables 22a and 22b in Annex 2.

3.5. Conclusions

The assessment of the availability and quality of gender-disaggregated data on disability and employment' reported in the Annex 1 shows that, at EU level, the **available statistics and data sources adopt different definitions of disability**, making it almost impossible to make a comparison across data sources.

European data on disability, in general, and on women and girls with disabilities in particular, have not been gathered in a consistent way. There are countries which define disability in terms of the level of performance in employment/the labour market or other social activities, while other countries define disability based only on medical or rehabilitation-based terms.

These definitions are also inconsistent across policy sectors in the same country. Within the employment sector, for example, European policies have been undermined by the lack of comparable data on the prevalence of disability and the employment of people with disability.

Therefore, across Europe there is an evident **need for measurement methods in the health and disability sector towards a common understanding of the distribution and types of impairments of individuals and populations**, as well as of **levels of disability** (Leonardi et al., 2014)⁷³.

This implies the need to adopt a **common and shared theoretical framework and definition of disability**. The International Classification of Functioning, Disability and Health, known as ICF⁷⁴, could represent a starting point for a common definition of disability (Leonardi, 2014)⁷⁵. With regard to women with disabilities as well as the need to have gender-oriented data (as suggested by the UN Convention on the Rights of Persons with Disabilities (UN CRPD) and recommended by the Council of Europe to Member States)⁷⁶, the ICF biopsychosocial model is suitable for collecting data, measuring disability and acting as the basis for effective employment and social policies, since information on all levels of the situation of women with disabilities is essential for policy purposes. As a consequence, more work should be done to collect gender-oriented data in accordance with the consistent and complete underlying conception of disability included in the ICF.

Eurostat makes available a number of data and indicators on disability at EU and national level, in some cases disaggregated by gender and age, and provided by different statistical sources.

Table 3.4 summarises the gender and disability gaps observed for women with disabilities according to the indicators considered in this chapter for the policy fields of interest. **These gaps underline the double discrimination women with disabilities face due**

⁷³ Leonardi M, Koutsogeorgou E, Quatrini A, and Covelli V., (2014), 'Women with disability across Europe: issues on updated and available data', *J Women's Health Care* Vol. 3, p. 175.

⁷⁴ ICF is a classification of health and health-related domains. ICF is the WHO framework for measuring health and disability at both individual and population levels. ICF was officially endorsed by all 191 WHO Member States in the Fifty-fourth World Health Assembly on 22 May 2001 (resolution [WHA 54.21](#)) as the international standard to describe and measure health and disability. ICF is operationalized through the WHO Disability Assessment Schedule (WHODAS 2.0) developed through a collaborative international approach with the aim of developing a single generic instrument for assessing health status and disability across different cultures and settings. As the functioning and disability of an individual occurs in a context, ICF also includes a list of environmental factors

⁷⁵ Leonardi M., (2010), 'From measuring health and disability: supporting policy development. The European MHADIE project', *Disabil Rehabil*, 32, S1-S8.

⁷⁶ Committee of Ministers, Council of Europe (2012) Recommendation CM/Rec(2012)6 of the Committee of Ministers to member States on the protection and promotion of the rights of women and girls with disabilities; United Nations (2006) Convention on the rights of persons with disabilities. New York, United Nations; World Health Organization (2001) International Classification of Functioning, Disability and Health. World Health Organization, Geneva.

to the intersection of gender and disability. When for the same indicator, the outcome of women with disabilities is worse than both the outcome of men with disabilities and the outcome of women without disabilities, women with disabilities face a double disadvantage (i.e. gender and disability).

As shown in the table, **disability gaps are generally higher than gender gaps in the dimensions considered** (except for the incidence of part-time and sector-occupational segregation), and particularly in the labour market and income conditions. In addition, **even among the population with disabilities, there are gender gaps that should be specifically addressed in disability policies.** In detail:

- **Eurostat data do not show a double disadvantage (i.e. gender and disability) in the access to education and training.** Women with disabilities are disadvantaged with respect to women without disabilities but not with respect to men with disabilities. In fact, on average, women with disabilities are more highly educated, more likely to participate in education and training, and less likely to leave school early than men with disabilities. However, they have a lower education attainment, lower participation rates in education and training, and higher drop-out rates than women without disabilities. Gender and disability gaps in drop-out rates are higher when considering people with an employment disability than those with difficulties in basic activities.
- **Disability represents a barrier, for both women and men, in accessing the labour market.** For most of the considered indicators, disability gaps (between women with and without disabilities) are greater than gender gaps between men and women with disabilities. Most workers with disabilities (more men than women) left their last job due to a health problem or disability. Similarly, disability and health issues are the major reason for both men and women with disabilities not seeking employment.
- At EU level, the main labour market indicators (employment, unemployment and inactivity rates as well as NEET rates) show that **women with disabilities are also disadvantaged with respect to men with disabilities:** on average, they are more likely than men to be inactive and unemployed, and less likely to be employed. Moreover, on average in Europe, women with disabilities are more likely than men with disabilities to work part-time, and from home.
- **Women with disabilities are particularly penalised in terms of poverty risks and social exclusions** compared both to women with no such limitation and men with disabilities, although there are wide differences across Member States. Gender gaps are again lower than disability gaps, reflecting the difficult economic conditions of all the people with disabilities. **Having a job** appears to reduce the gender gap in the share of people with activity limitation at risk of poverty, although to a lower extent than for those with no limitations. **Conversely, social transfers appear to be effective in reducing both disability and gender gaps in poverty risks.**

Table 3.4: EU28 – Gender and disability gaps (p.p.) in the main education and training, labour market and poverty indicators

MAIN INDICATORS	2011 – EU LFS-AHM Definition 1*		2011 – EU LFS-AHM Definition 2**		EU-SILC (2014) Activity limitation***	
	Gender gaps	Disability gaps	Gender gaps	Disability gaps	Gender gaps	Disability gaps
EDUCATION AND TRAINING						
<i>Early school leaving rate (18–24)</i>	5.1	11.8	7.4	17.3		
<i>Tertiary education attainment rate (30–34)</i>	-7.5	-12.1	-8.6	-13.6		
<i>Participation rate in education and training (15–64)</i>	-1.6%	-11.3	-1.9	-11.9		
LABOUR MARKET						
<i>Employment rate (15–64)</i>	7.4	-16.8	4.7	-25.5		
<i>Unemployment rate (15–64)</i>	0.2	2.2	0.6	7.7		
<i>Inactivity rate</i>	-8.5	17.3	-6.0	24.5		
<i>NEET rate (15–34)</i>	-2.8	12.8	-1.5	22.0		
<i>Part-time employment share (15–64)</i>	-25.3	8.3	-26.4	16.0		
<i>Temporary employment share (15–64)</i>	-1.1	-2.6	-1.6	-0.7		
<i>Share (%) of people usually working at home</i>	-1.4	2.3	-1.2	2.6		
Horizontal gender segregation						
<i>among people with disabilities</i>	31.4		29.8			
<i>among people without disability</i>	31.2		31.4			
Occupational gender segregation						
<i>among people with disabilities</i>	32.2		31.4			
<i>among people without disability</i>	31.4		31.5			
POVERTY AND INCOME						
<i>At risk of poverty and social exclusion rate (16 and over)</i>					-2.2	8.6
<i>At-risk-of-poverty rate (16 years and over)</i>					-1.5	4.4
<i>Severe material deprivation rate (16</i>					-1.1	5.2

MAIN INDICATORS	2011 – EU LFS-AHM Definition 1*		2011 – EU LFS-AHM Definition 2**		EU-SILC (2014) Activity limitation***	
	Gender gaps	Disability gaps	Gender gaps	Disability gaps	Gender gaps	Disability gaps
years and over)						
Share of people (under 60 years) living in households with very low work intensity					0.3	15.6
Before social transfers risk-of-poverty rate (16 years and over)					-2.8	30.3
In-work at-risk-of-poverty rate (18 years and over)					-0.1	3.7
Share of people (16 years and over) unable to face unexpected financial expenses					-4.0	11.5
Share of people (16 years and over) in arrears (mortgage or rent, utility bills or hire purchase)					-0,2	1,9

Notes: *Definition (1): People having a basic activity difficulty (such as sight, hearing, walking, communicating).

Definition (2): People limited in work activity because of a long-standing health problem and/or a basic activity difficulty (LHPAD). * 'The EU-SILC definition of activity limitations refers to people limited in activities for health problems for at least the past six months. **Gender Gap:** difference between disabled men and women.

Disability Gap: difference between women with and without disabilities.

Sources: 2011 EU LFS-AHM and EU-SILC (2014)

4. THE LEGAL AND POLICY FRAMEWORK: A WIDESPREAD POLICY BLINDNESS

KEY FINDINGS

- At EU level, disability has generally been treated as part of the anti-discrimination strategy (TFEU, Articles 10 and 19). For many years resolutions of the European Parliament and the European Council as well as Commission's Communications addressing disability have not paid any attention to the intersection of disability and gender.
- It was only in 2003 that the Commission (COM 2003/16) explicitly recognised that people with disabilities can be victims of multiple discrimination, including on the grounds of sex. In 2008 also the Council of the European Union (2008/C 075/01) recognised the cumulative negative effects of gender and disability. More recently, in 2016 the European Parliament underlined the need for the EU institutions and the Member States to incorporate the perspective of women with disabilities into their policies and programmes on gender equality as well as the gender mainstreaming in their strategies on disability.
- In January 2011 the European Union adopted the 2006 UN Convention on the Rights of Persons with Disabilities (UNCRPD) which recognises the discrimination on the basis of gender and disability (Article 6). Building on the UNCRPD, in 2010, the EU adopted the European Disability Strategy (EDS) 2010–2020. Notwithstanding the EDS potential, the European Union has neither mainstreamed a disability perspective in all its gender policies and programmes, nor adopted a gender perspective in its disability strategies.
- The country case studies show that the national debate on the intersection between disability and gender is still weak, or even totally absent in some countries. National legislations and policies on disability and employment do not usually adopt an intersectional approach in a gender perspective, or when they do they do not translate this approach in concrete actions.
- As for gender equality policies, the Beijing Declaration and Platform for Action recognises that women with disabilities face additional barriers to achieving gender equality and calls for action at all levels to address and take into consideration their concerns.
- However, according to the European Disability Forum both the EU 2011–2020 Gender Equality Pact and the EU Plan of Action on Gender Equality and Women's Empowerment (2010–2015) do not mainstream the rights of women and girls with disabilities and specific actions to enhance their rights have not been sufficiently undertaken.
- Structural Funds investments must comply with EU law, including the Convention on the Rights of Persons with Disabilities (CRPD), since its ratification by the EU. Disability is mentioned in Article 7 of the Common Provisions of the European Structural and Investment Funds - 'ESI Funds', and, for the first time, the Funds regulations include an explicit reference to disability-related issues mentioning the transition from institutional care to community living. However, gender and disability-related issues when present are usually tackled separately or disabled women are simply mentioned as a specific disadvantaged group with no specific actions carried out.

People with disabilities are a heterogeneous group and may experience different forms of discrimination. The gender difference is a significant additional factor for discrimination. Gender should be considered specifically when the legal framework for the protection of people with disabilities is set out and/or policies are designed to support the social inclusion and employment of people with disabilities. In addition, disability issues should be considered in the legal and policy framework dealing with gender equality.

This section provides an overview of the existing European legal and policy framework on disability and employment issues and their effectiveness in tackling multiple discrimination for women with disabilities in the labour market and social protection.

The first part is focused **on international and European law and policies on disability** in order to verify whether gender has been taken into account, with measures specifically addressed to disabled women and aimed to combat multiple discrimination in access to employment.

The second part considers **the legal and policy framework on gender issues** in order to verify if the mainstreaming of disability matters in these documents.

Finally, the third part shows **whether and to what extent the European Structural and Investment Funds play a role in improving the employment and socio-economic chances of female workers with disabilities.**

Descriptive fiches providing more information on the (potential) direct and indirect effects in terms of employment for disabled women are presented in Annex 4 for the main documents issued since 2007.

4.1. The international and European legal and policy framework on disability in a gender perspective

The European legal framework dedicated to people with disabilities has developed a progressive evolution over the years and today is very articulate.

The table below presents the main legal and policy documents on disability distinguishing between those that do address disability issues with attention to disabled women and/or multiple discrimination (intersection of gender and disability) and those that do not. For both types of documents, the area of intervention is specified, distinguishing between the employment and the social inclusion policy fields.

Table 4.1: Main International and European legal and policy documents on disability

Legal and Policy Document	Employment	Social inclusion
Legal and policy document on disability (only anti-discrimination provision or definition of multiple discrimination without reference to intersection between disability and gender)		
<i>1996 Resolution of the Council of 20 December 1996 on equality of opportunity for people with disabilities (97/C 12/01)</i>	X	X
<i>1996 Communication of the Commission on equality of opportunity for people with disabilities, COM (96) 406</i>	X	X
<i>1997 Amsterdam Treaty (Article 13, now Art. 19 TFEU)</i>		X
<i>The Charter (2000) of Fundamental Rights of the European Union (art. 26)</i>	X	X

Legal and Policy Document	Employment	Social inclusion
Legal and policy document on disability (only anti-discrimination provision or definition of multiple discrimination without reference to intersection between disability and gender)		
<i>EC Communication Towards a barrier-free Europe for people with disabilities" COM (2000) 284</i>	X	X
2000 The Charter of Fundamental Rights of the European Union (art. 26)		X
2000 Directive 2000/78/CE <i>Establishing a general framework for equal treatment in employment and occupation</i>	X	
2001 Council Decision of 3 December 2001 (2001/903/EC) that designated the year 2003 as the European Year of People with Disabilities		X
Council Conclusions (15206/03) <i>on the follow-up to the European Year of People with Disabilities</i>		X
<i>EC Communication COM/2003/0650) Equal opportunities for people with disabilities: An European Action Plan (Disability Action Plan - DAP)</i>	X	
2016 Directive 2016/2102 on the accessibility to the websites and mobile applications of public sector bodies		X
Proposal for Directive (Accessibility Act) on the approximation of the laws, regulations and administrative provisions of the Member States as regards the accessibility requirements for products and services (COM 2015/615)		X
<u>Legislative documents on rights of disabled people when travelling:</u> Regulation (EC) No 1107/2006 of the European Parliament and of the Council of 5 July 2006 concerning the rights of disabled persons and persons with reduced mobility when travelling by air; Regulation (EC) No 1371/2007 of the European Parliament and of the Council of 23 October 2007 on rail passengers' rights and obligations; Regulation of the European Parliament and of the Council (adopted on 11 October 2010) <i>concerning rights of passengers (including PRM) when travelling by sea and inland waterways;</i> Commission Decision 2008/164/EC of 21 December 2007 concerning the technical specification of interoperability relating to persons with reduced mobility in the trans-European conventional and high-speed rail system; Directive 2001/85/EC of the European Parliament and of the Council of 20 November 2001 relating to special provisions for vehicles used for the carriage of passengers comprising more than eight seats in addition to the driver's seat, amending Directives 70/156/EEC and		X

Legal and Policy Document	Employment	Social inclusion
Legal and policy document on disability (only anti-discrimination provision or definition of multiple discrimination without reference to intersection between disability and gender)		
97/27/EC.		
Legal and policy document on disability (gender references or definition of multiple discrimination with reference to the intersection between disability and gender)		
2003 EC Communication (COM/ 2003/0016) <i>Towards a United Nations legally binding instrument to promote and protect the rights and dignity of persons with disabilities</i>		X
<i>Situation of disabled people in the enlarged European Union: The European Action Plan 2006-2007 (COM/2005/0604)</i>		X
<i>Communication on situation of disabled people in the European Union: the European Action Plan 2008-2009, COM (2007) 738</i>		X
2006 UN Convention on the Rights of Persons with Disabilities (UCRPD)	X	X
2008 Council (2008/C 075/01) Resolution on the situation of persons with disabilities in the European Union	X	X
2010 European Disability Strategy 2010–2020: A Renewed Commitment to a Barrier-Free Europe	X	X
2010 European Disability Strategy 2010–2020: Accompanying document (SEC (2010) 1323)	X	X
2010 European Disability Strategy 2010–2020 – Accompanying document – Initial Plan to implement the European Disability Strategy 2010–2020 – List of Actions 2010–2015 (SEC (2010) 1324)	X	X
2015 Concluding Observations of the Committee on the Rights of Persons with Disabilities (CRPD/C/EU/1) 2015	X	X
European Parliament Resolution of 7 July 2016 on the implementation of the UN Convention on the Rights of Persons with Disabilities, with special regard to the Concluding Observations of the UN CRPD Committee (2015/2258(INI))	X	X

Disability has generally been treated as part of the anti-discrimination strategy, which has assumed a universal character with the inclusion in the Amsterdam Treaty of **Article 13 EC Treaty** (now **Art. 19 TFEU**). The Treaty included the fight against discrimination among European competencies and provided for the first time a reference to disability. The Treaty on the Functioning of the EU (TFEU) requires the Union to combat discrimination based on disability when defining and implementing its policies and activities (Article 10) and gives it the power to adopt legislation to address such discrimination (Article 19).

As for employment, **the Charter of Fundamental Rights of the European Union** adopted in 2000 (assuming the same legal status as the Treaties with the Lisbon Treaty), besides prohibiting discrimination on the grounds of disability (Article 21), states that 'the EU recognises and respects the right of persons with disabilities to benefit from measures

designed to ensure their independence, **social and occupational integration and participation in the life of the community**' (Article 26).

Multiple discrimination was for the first time mentioned in the preamble of **Directive 2000/78/CE⁷⁷, Establishing a general framework for equal treatment in employment and occupation**, even if the recitals are not binding. This directive affirms that '*in implementing the principle of equal treatment, the Community should aim to eliminate inequalities, and to promote equality between men and women, especially since women are often the victims of multiple discrimination*'. The combined provisions of this recital and Article 1 of the directive prohibiting any discrimination on the grounds of disability (as well as religion, belief, age or sexual orientation), indirectly provides a **first potential attention to the intersection between disability and gender**. Except for this reference, no direct attention to the situation of women with disabilities has been mainstreamed in this directive. However, this legislative document on disability and employment is very important because it recognises that the failure to provide reasonable accommodation in the workplace (e.g. adapting the premises and equipment, as well as working time etc. in order to facilitate access to employment), can constitute a discrimination for disabled people. In addition, **it may have high indirect effects** on disabled women's employability by addressing discrimination in areas where women face more disadvantages than men (below Box 4.2).

According to a 2010 EDF Report⁷⁸ on the implementation of the Council Directive 2000/78/EC, the provisions of this directive are often not applied in many countries⁷⁹.

Many resolutions of the European Parliament and the European Council as well as Commission's Communications addressing disability do not provide any attention to multiple discrimination and more specifically to the intersection of disability and gender⁸⁰. For example, in the **Council Decision of 3 December 2001 (2001/903/EC)**⁸¹ that designated the year 2003 as the **European Year of People with Disabilities** to raise awareness on the rights of people with disabilities, there is only a generic reference to the multiple discrimination faced by people with disabilities and no attention to gender. In the same way, the Council Conclusions on *the follow-up to the European Year of People with Disabilities (15206/03)*⁸² present only a reference to the reconciliation of work and family life (however referring to families with disabled children, and not to mothers with disabilities) and generically to gender equality.

It is only in 2003 that the Commission in its **Communication – Towards a United Nations legally binding instrument to promote and protect the rights and dignity of persons with disabilities**⁸³ explicitly affirms that in *dealing with discrimination, it is*

⁷⁷ http://europa.eu.int/comm/employment_social/socdial/labour/78ec/ad_it.pdf

⁷⁸ European Disability Forum Report "Ten years on: practical impact of the Employment Directive on persons with disabilities in employment EDF Analysis of Council Directive 2000/78/EC (2010), See: <file:///C:/Users/Daniela%20Loi/Downloads/EDF.pdf>

⁷⁹ In some countries, the companies prefer to pay a one-off fine (the amount of which is rarely dissuasive), than take steps to hire and retain a worker with a disability. More in general, more information campaigns and training targeting persons with disabilities and employers' organizations about the right and the practical implementation of reasonable accommodation are needed as well as employers should be informed about the existing fiscal incentives for hiring persons with disabilities.

⁸⁰ Resolution of the Council of 20 December 1996 on equality of opportunity for people with disabilities, see: <http://eur-lex.europa.eu/legal-content/en/txt/pdf/?uri=celex:41997x0113&from=it> ; Communication of the Commission on equality of opportunity for people with disabilities, COM (96) 406, see: http://europa.eu.int/comm/employment_social/soc-prot/disable/com406/406-it.pdf ; Communication Towards a barrier-free Europe for people with disabilities, COM (2000) 284, see: http://europa.eu.int/comm/employment_social/equ_opp/com284f/com_284f_it.pdf ;

⁸¹ <http://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex:32001D0903>

⁸² See : http://europa.eu/rapid/press-release_PRES-02-354_en.htm

⁸³ COM/2003/0016 final, see: <http://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:52003DC0016>

necessary to take into account the diversity of people with disabilities (...) as well as it is worth noting that people with disabilities can be victims of multiple discrimination, including on the grounds of sex.

However, these indications were not internalised in the **Disability Action Plan (DAP)** for 2003 - 2010⁸⁴. The DAP supported a dual approach, combining both the mainstreaming of the disability dimension in all EU policies, and concrete actions in crucial areas for the integration of people with disabilities (e.g. employment⁸⁵, active inclusion and accessibility)⁸⁶, however without a specific attention to disabled women. Some reference to the situation of disabled women can be found only in the 2006-2007 Plan for Active inclusion, when the Commission promoted the collection of comparable statistical data on disability and on multiple discrimination; and in the 2008-2009 Plan for accessibility, which refers to the greater exclusion from the labour market faced by women with disabilities compared to men.

Particularly important is instead the **Resolution of the Council of the European Union of 17 March 2008 on the situation of persons with disabilities in the European Union (2008/C 075/01)**⁸⁷. The Resolution recognises that *the cumulative effect of gender and disability implies that women with disabilities often face multiple forms of discrimination, have less independence, less access to education, training, employment and health services, and therefore often face a greater risk of exclusion as well as poverty*. It also invites the Commission to address the issue of multiple discrimination of women with disabilities and facilitate their full development, advancement and empowerment (d).

The Commission responded to this invitation only partially, as shown by the actions implemented so far.

In January 2011, the European Union adopted to the **2006 UN Convention on the Rights of Persons with Disabilities (UNCRPD)**⁸⁸ **which recognises the discrimination on the basis of gender and disability (Article 6)**. This is the first legally binding international human rights instrument for people with disabilities. The EU and all of the EU Member States have signed it, and 27 have ratified it⁸⁹, including the countries covered in this study.

The UN Convention requires State Parties to protect and safeguard all human rights and fundamental freedoms of persons with disabilities. With reference to **women with disabilities affected by multiple discrimination** it requires that appropriate measures to ensure the full development, advancement and empowerment of these women be taken

⁸⁴ Communication from the Commission to the Council, the European Parliament, the European Economic and Social Committee and the Committee of the Regions - Equal opportunities for people with disabilities: An European Action Plan (COM/2003/0650)
<http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=COM:2003:0650:FIN:EN:PDF>

⁸⁵ Access to, and retention in, employment including the fight against discrimination; lifelong learning to support and increase employability, adaptability, personal development and active citizenship; new technologies to empower people with disabilities and therefore facilitate access to employment; accessibility to the public built environment to improve participation in the work place and integration into the economy and society.

⁸⁶ Communication from the Commission to the Council, the European Parliament, the European Economic and Social committee and the Committee of the Regions - **Situation of disabled people in the enlarged European Union: the European Action Plan 2006-2007 (COM/2005/0604)**, [http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=SPLIT_COM:2005:0604\(01\):FIN:EN:PDF](http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=SPLIT_COM:2005:0604(01):FIN:EN:PDF); **Communication on situation of disabled people in the European Union: the European Action Plan 2008- 2009**, COM(2007) 738, <http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=COM:2007:0738:FIN:EN:PDF>

⁸⁷ <http://eur-lex.europa.eu/legal-content/EN/TXT/HTML/?uri=OJ:C:2008:075:FULL&from=en>

⁸⁸ <https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html>

⁸⁹ See; https://treaties.un.org/Pages/ViewDetails.aspx?src=TREATY&mtdsg_no=IV-15&chapter=4&clang=en

by States parties for the purpose of guaranteeing them the full and equal enjoyment of all human rights and fundamental freedoms set out in the Convention (art. 6)⁹⁰.

Building on the UNCRPD, in 2010, the EU adopted the **European Disability Strategy 2010–2020: A Renewed Commitment to a Barrier-Free Europe**⁹¹ (EDS). The Commission focuses on five policy fields in which these general principles can find specific applications:

- employment;
- education and training;
- social protection;
- health;
- external action of the EU.

This Strategy can be considered as the main policy tool at European level. An initial recognition of multiple discrimination faced by people with disabilities is present only under the health area, in which the Strategy affirms that attention will be paid **to the cumulative impact of discrimination that people with disabilities may experience on other grounds including sex**. The Strategy also recognises that people with disabilities are entitled to equal access to quality health and rehabilitation services, which should take their needs into account, including **gender-based needs**.

However, the key actions for 2010–2015, included in the Initial Plan to implement the European Disability Strategy 2010–2020 (SEC (2010) 1324)⁹² **do not provide for specific actions addressed to women with disabilities**, although the Strategy accompanying document (SEC (2010) 1323) describes the disabled women situation in the specific section dedicated to particularly vulnerable groups (Articles 6 and 7), even if with no reference to the employment issue. This document also addresses gender differences under the area of social protection, *promoting cooperation, peer review and good practice exchange on disability issues, with attention to gender differences*.

A greater attention to the gender perspective can instead be found in the **Concluding Observations of the Committee on the Rights of Persons with Disabilities (CRPD)** of 2 October 2015 (CRPD/C/EU/1) on the initial report on the measures taken by the European Union under the UNCRPD⁹³. The CRPD observations underline the measures that should be taken by the European Union to give effect to its obligation under the UN Convention, also with reference to disabled women.

In particular, the Committee underlines that notwithstanding the Strategy's potential for mainstreaming disability across EU policy and legislative initiatives, the **European Union has neither mainstreamed a disability perspective in all its gender policies,**

⁹⁰ Article 6 'women and disability' states that:

"1. States Parties recognise that women and girls with disabilities are subject to multiple discrimination, and in this regard shall take measures to ensure the full and equal enjoyment by them of all human rights and fundamental freedoms;

2. States Parties shall take all appropriate measures to ensure the full development, advancement and empowerment of women, for the purpose of guaranteeing them the exercise and enjoyment of the human rights and fundamental freedoms set out in the present Convention.

⁹¹ <http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=COM:2010:0636:FIN:en:PDF>

⁹² Commission staff working document entitled *Initial plan to implement the European Disability Strategy 2010–2020 – List of Actions 2010–2015* (SEC(2010)1324).

⁹³ This report has been prepared in accordance with the UN Convention by which each State Party is required to submit to the Committee a comprehensive report on measures taken to give effect to its obligations under the present Convention and on the progress made in that regard, within two years after the entry into force of the present Convention. Report on the implementation of the UN Convention on the Rights of Persons with Disabilities (CRPD) by the European Union (SWD (2014) 182), See: http://ec.europa.eu/justice/discrimination/files/swd_2014_182_en.pdf

programmes and strategies, nor adopted a gender perspective in its disability strategies. With regard to **work and employment**, the Committee is particularly concerned about the high unemployment rates for women with disabilities and recommends that the European Union mainstreams a disability perspective in its forthcoming gender equality strategy and policies, as well as a gender perspective in its disability strategies. The Committee also recommends that **the European Union develops affirmative actions to improve the rights of women and girls with disabilities**, monitor progress, fund data collection on this target, and develop a data collection system with data disaggregated by gender.

Also the **European Parliament in the Resolution of July 2016 on the implementation of the UNCRPD**⁹⁴ “endorses the conclusions and recommendations of the CRPD and stresses the need for the EU institutions and the Member States to incorporate the perspective of women and girls with disabilities into their policies, programmes and strategies on gender equality, and gender mainstreaming in their strategies on disability and it calls, further, for mechanisms to be put in place for a regular review of the progress made” (principle no. 6).

This not binding legislative document calls on the Commission to maximise synergies between the EU Disability Strategy 2010-2020 and the provisions of the UN Convention on the Elimination of All Forms of Discrimination Against Women in order to ensure that recognised rights are substantially enjoyed and effectively exercised (principle no. 23)

Among rights, the European Parliament calls on the Member States and the Commission to take steps to combat all forms of discrimination, including **multiple discrimination, discrimination by association and intersectional discrimination based on disability**, with special regard to women and children with disabilities, older persons and individuals who have complex support needs (no. 27).

With specific reference to employment, the EU Parliament underlines the high rates of unemployment among persons with disabilities, especially among women and calls on the Member States to ensure a policy framework for participation of women with disabilities in the labour market, including those with hidden disabilities, chronic conditions or learning disabilities (no. 110). In the same way, the EU Parliament also highlights the need to support disabled migrant women in developing skills that would help them to obtain employment (no. 32).

In particular, in order to achieve autonomous living for persons with disabilities, especially women, it stresses that **(personal or public) assistance is a means that would enable them to access workplace, educational and vocational training institutions** and support them in the event of pregnancy and motherhood (no. 33).

Women with disabilities must also be enabled and empowered to participate in decision-making processes in order to ensure that their interests and rights are expressed and protected and the Member States have to provide services that empower their active involvement and participation and invest in assistive and adaptive technologies and e-inclusion (no. 35).

Finally, this document intends to promote the accessibility to healthcare and services provided to women with disabilities (no. 98) and it reconfirms the need to provide

⁹⁴ European Parliament Resolution of 7 July 2016 on the implementation of the UN Convention on the Rights of Persons with Disabilities, with special regard to the Concluding Observations of the UN CRPD Committee (2015/2258(INI)), see: <http://www.europarl.europa.eu/sides/getDoc.do?type=TA&language=EN&reference=P8-TA-2016-0318>

specialised support, including childcare assistance, to women in order to enable them to enjoy motherhood to the full (no. 100).

Other relevant stakeholders are also critical of the Strategy implementation as regards the failure to adopt a gender perspective. In particular, in the **European Disability Forum (EDF) Response**⁹⁵ to the public consultation launched in 2016 by the Commission on the impact of the Strategy, **the gender dimension is underlined as a cross-cutting element that should be fully reflected in the Strategy**. Women with disabilities are considered as more discriminated against than other women since they face multiple discrimination. According to the EDF response, women face **additional obstacles to combine their work and private life**. The organisation of the labour market, its practices and policies do not take into account their specific problems. Women with disability face **discrimination with regards to hiring procedures, salary and social security payments**, they have difficulty in obtaining **flexible working hours or teleworking**, and **they have high disability-associated expenses**. The EDF also underlines that employment and social services should thus implement suitable measures to support mothers with disabilities in their search for employment and efforts to retain employment. Suitable training to meet the demands of the labour market should be provided as well. Moreover, under the Disability Strategy, specific measures both from the national perspective (National Reform Programmes) and from the European perspective (Country Specific Recommendations) should be taken to solve gender inequalities.

A very recent (February 2017) Commission Progress Report⁹⁶ on the achievements up to 2016 of the strategy and of the Implementation of the UN Convention confirms the need for a European strategy to continue to deliver on its objectives, taking into account the UN Concluding Observations. In particular, actions over the past five years have made progress in all the eight areas of intervention. However, no action addressed to women with disabilities was achieved in the employment, education, and training fields.

Major progress of the EU with reference to the reinforcement of disability policies was achieved especially in the area of **accessibility** with the adoption of the Directive 2016/2102 **on the accessibility to the websites and mobile applications of public sector bodies** and the proposal for a European Accessibility Act.

This directive aims to ensure that the websites and mobile applications of public sector bodies are made more accessible to users, and in particular to the 80 million people with disabilities, on an equal basis with others.

The proposal of the European Accessibility Act⁹⁷ aims to improve the functioning of the internal market for accessible products and services by removing barriers created by divergent legislation. It covers the **products and services**⁹⁸ that have been identified as

⁹⁵ The European Disability Forum is an umbrella organisation that comprises 85 NGOs representing different groups and interests on disability and 27 national Councils composed of all members of the European Union and EEA; <http://www.edf-feph.org/disability-strategy-europe-2020>

⁹⁶ European Commission, *Progress report on the implementation of the European Disability Strategy (2010–2020)*, Commission Staff Working Document SWD (2017) 29 final, See : <http://ec.europa.eu/social/BlobServlet?docId=16995>

⁹⁷ Proposal for a directive of the European Parliament and of the council on the approximation of the laws, regulations and administrative provisions of the Member States as regards the accessibility requirements for products and services (COM 2015/615), See:

<http://eur-lex.europa.eu/legal-content/EN/TXT/?uri=COM:2015:0615:FIN>

⁹⁸ Computers and operating systems, ATMs, ticketing and check-in machines; smartphones; TV equipment related to digital television services; telephony services and related equipment; audiovisual media services such as television broadcast and related consumer equipment; services related to air, bus, rail and waterborne passenger transport, banking services, e-books, e-commerce.

having the highest risk of being concerned with diverging accessibility requirements across the EU countries.

In general, improving accessibility prevents or removes barriers to the use of products and services and it allows the perception, operation and understanding of products and services by persons with functional limitations, including people with disabilities, on an equal basis with others. In this way, this proposal also benefits disabled people by decreasing barriers for accessing education and the open labour market. The EU accessibility act, when it will be adopted, may have high indirect effects on disabled people's employability, especially women, by improving the accessibility to ITC, transport, e-commerce, audiovisual media services etc. that may also facilitate work-life balance and flexible work practices.

Other important legislation⁹⁹ adopted in the area of **accessibility (transport and ICT)**, including **Directive 2016/2102 on the accessibility to the websites and mobile applications of public sector bodies** contributes to improving the living conditions of disabled people, including women, and their chances to work. Again, however, no specific reference to women with disabilities, gender issues or multiple discrimination is present. To conclude, all the legislative documents on accessibility mentioned above as well as most of the other legislative and policy documents on social and work inclusion show the *gender-blindness of disability policy*, given the little or no attention to the different needs of men and women with disabilities¹⁰⁰.

Although not specifically addressing women or covering the intersection of gender and disability, this legislation may however have important **indirect effects** on disabled

⁹⁹ Regulation (EC) No 1107/2006 of the European Parliament and of the Council of 5 July 2006 concerning the rights of disabled persons and persons with reduced mobility when travelling by air.

Regulation (EC) No 1371/2007 of the European Parliament and of the Council of 23 October 2007 on rail passengers' rights and obligations.

Regulation of the European Parliament and of the Council concerning rights of passengers (including PRM) when travelling by sea and inland waterways (adopted 11 October 2010, pending publication).

Commission Decision 2008/164/EC of 21 December 2007 concerning the technical specification of interoperability relating to persons with reduced mobility in the trans-European conventional and high-speed rail system.

Directive 2001/85/EC of the European Parliament and of the Council of 20 November 2001 relating to special provisions for vehicles used for the carriage of passengers comprising more than eight seats in addition to the driver's seat, amending Directives 70/156/EEC and 97/27/EC.

Directive 1999/5/EC of the European Parliament and of the Council of 9 March 1999 on radio equipment and telecommunications terminal equipment and the mutual recognition of their conformity.

Directive 2002/21/EC of the European Parliament and of the Council of 7 March 2002 on a common regulatory framework for electronic communications networks and services (Framework Directive).

Directive 2002/22/EC of the European Parliament and of the Council of 7 March 2002 on universal service and users' rights relating to electronic communications networks and services (Universal Service Directive).

Directive 2007/65/EC of the European Parliament and of the Council of 11 December 2007 amending Council Directive 89/552/EEC on the coordination of certain provisions laid down by law, regulation or administrative action in Member States concerning the pursuit of television broadcasting activities.

¹⁰⁰ For example:

Mobility and transportation policies addressed to disabled people do not usually consider the intersection of disability and gender.

Digitalisation policies could not be as effective in improving job opportunities and working conditions for women with disabilities as for men with disability.

Reasonable accommodation policies aimed at disabled people are usually implemented according to a neutral approach, without taking into account the specific needs and lower income of women with disabilities;

interventions to support women's access to employment or training, including those for disabled people, often do not provide specific attention to measures facilitating the work-life balance for disabled women with caring roles, such as childcare facilities, incentives to working time flexibility, etc.

Healthcare and rehabilitation services are not designed taking into account the specific needs of women with disabilities who, particularly those with learning disabilities, are more likely to access services of lower quality, (Emerson and Baines, 2011).

women's employment. As shown in Box 4.1 below, accessible goods, services and infrastructures (mainly ITC and transport) are essential to sustain the social and labour market participation of disabled people. They also can improve many aspects of everyday life as well as reduce barriers to access education/training and the labour market. These potential effects may be enhanced by removing the current gender blindness of these measures.

Box 4.1: Some examples of the potential effects of legislation on disability and disabled women's employment

Directive 2000/78/CE, *Establishing a general framework for equal treatment in employment and occupation* combating discrimination on the grounds of disability (as well as religion, or belief, age or sexual orientation) as regards employment, may have high indirect effects on disabled women's employability. The Directive addresses discriminations in areas where women are more disadvantaged than men (as in the case of conditions for access to employment or to self-employment, including selection criteria and recruitment conditions, as well as working conditions, including dismissals and pay). In addition, the reasonable accommodations in the workplace that according to the directive shall be provided to disabled people may also cover a shorter and more flexible working time, which is particularly important for women as it may favour a better work-life balance.

Directive 2016/2102 on the *accessibility to the websites and mobile applications of public sector bodies* mentioned above, although not specifically addressing women, may have high indirect effects on women's employability. The trend towards a digital society provides users with new ways of accessing information and services. In this context, the directive aims to make websites and mobile applications more accessible to users and in particular to improve the accessibility for persons with disabilities.

Accessibility can improve the chances for disabled people to be active in the labour market, reducing dependence on social assistance. Improving access to public services indirectly strengthens the employability of women (including women with disabilities), as they are employed mainly in the service sector and more frequently than men they use public services to solve family and reconciliation problems, a crucial factor that limits women's participation in the labour market. In this last respect, the directive underlines that essential online administrative functions of schools, kindergartens or nurseries should be made accessible on line. According to the Directive, its application should also be extended by Member States to private service providers in the healthcare, childcare, social inclusion and social security areas, and in the transport sector, the electricity, gas, water, electronic communication and postal services.

ITC technologies may also facilitate work-life balance and flexible work practices, for example allowing disabled people to work from home. In the same way, the European Accessibility Act may have high indirect effects on disabled people's employability, especially women, by improving the accessibility to ITC, transport, e-commerce, audiovisual media services, etc.

The provisions in the **European Disability Strategy 2010-2020** although not specifically addressing women, may have medium-high indirect effects on women's employability as well. In particular, the Strategy underlines the importance of addressing and improving working conditions and career advancement and promotes diversity management practices. These fields offer intervention areas in which the specific needs of women in the workplace can be taken into account. In the same way, the actions aiming at removing organisational barriers for people with disabilities in education and lifelong learning could have high indirect effects on women's employability, especially when personalised learning is supported.

Furthermore, the EU **social protection systems and poverty reduction programmes**, as well as **public housing programmes and disability-related assistance**, may have high indirect effects on the economic situation of women with disabilities (although not in terms of employability), given their higher poverty risks and longer life expectancy than men. More in general, the elimination of discrimination against women, especially when addressing vulnerable women like those who are disabled, requires to take into account and improve their specific socio-economic context.

Awareness raising measures, data collection and monitoring activities, as well as the governance mechanisms required by the UN Convention and included in the Strategy, without any specific attention to women with disabilities, can also have positive indirect effects on the situation of disabled women if they are implemented in a gender perspective. For example, awareness raising activities can be addressed to women with disabilities, data collection can support the development of sex disaggregated data and gender-specific indicators, and disabled women could be involved in the governance/coordination mechanisms requested by UN Convention.

4.2. The International and European legal and policy framework on gender equality in a disability perspective

Gender equality is one of the European Union's founding values, a fundamental right, a common principle and a fundamental condition for the achievement of the domestic, EU and international objectives of growth, employment and social cohesion.

Since 1957 the principle of equal pay between women and men is mentioned in the Treaties and, over the years, the commitment of the EU in promoting gender equality throughout Europe has been reinforced and since 2000 it is also enshrined in the Charter of Fundamental Rights of the European Union.

Over the years, numerous texts have been added to an ever-growing body of directives, recommendations, reports, opinions focused on maternity leave, income equality, fighting against domestic violence and many other topics related to gender equality.

At the international level, two cornerstones in the development of gender equality have been developed. The **Convention on the Elimination of All Forms of Discrimination Against Women** was adopted in 1979 by the UN General Assembly and is considered an international bill of rights for women; and the **Beijing Declaration and Platform for Action**, which was adopted on 15 September 1995 at the end of the Fourth World Conference on Women in 1995. This outlines 12 areas of concern with strategic objectives and actions to be taken to promote and protect women's rights – as an inalienable, integral and indivisible part of all human rights and fundamental freedoms – by the international community, the national governments and the civil society as a whole.

The Beijing Platform for Action was followed by a political declaration (Resolution S-23/2 of 10 June 2000) and an outcome document entitled **Further actions and initiatives to implement the Beijing Declaration and Platform for Action**¹⁰¹ which recognises that women with disabilities face additional barriers to achieving gender equality and calls for action at all levels to address and take into consideration their concerns.

¹⁰¹ During its twenty-third Special Session held in New York from 5–10 June 2000, entitled *Women 2000: gender, equality, development and peace for the 21st century*, the General Assembly reviewed the progress in the implementation of the Nairobi Forward-looking Strategies for the Advancement of Women and the Beijing Declaration and Platform for Action adopted by the Fourth World Conference on Women (4–15 September 1995).

General Assembly resolution S-23/3, of 10 June 2000, annex, paragraph 5.
<http://www.un.org/womenwatch/daw/followup/reports.htm>

In its introduction, the Resolution states: 'The Platform for Action recognises that women face barriers to full equality and advancement because of such factors as their race, age, language, ethnicity, culture, religion or **disability**, because they are indigenous women or of other status'¹⁰². In addition, in Section II, discrimination against women with disabilities is identified as an obstacle to the full enjoyment of their human rights and as a barrier to the implementation of the Beijing Declaration and Platform for Action: 'Gender discrimination and all other forms of discrimination ... and related intolerance continue to cause threat to women's enjoyment of their human rights and fundamental freedoms ... Some women and girls continue to encounter barriers to justice and the enjoyment of their human rights because of such factors as their race, language, ethnicity, culture, religion, **disability** or socio-economic class, or because they are indigenous people, migrants, including women migrant workers, displaced women or refugees'¹⁰³.

Section IV, on actions and initiatives to overcome obstacles and to achieve the full and accelerated implementation of the Beijing Platform for Action, highlights the fact that '**girls and women of all ages with any form of disability are generally among the more vulnerable and marginalised of society**. There is therefore a need to take into account and to address their concerns in all policymaking and programming. Special measures are needed at all levels to integrate them into the mainstream of development'¹⁰⁴.

Suggested actions with specific reference to women with disabilities include the following:

- 'Adopt and promote a holistic approach to respond to all forms of violence and abuse against girls and women of all ages, including **girls and women with disabilities**, as well as vulnerable and marginalised women and girls, in order to address their diverse needs, including education, provision of appropriate healthcare and services, and basic social services'¹⁰⁵.
- Design and implement policies and programmes **to address fully the specific needs of women and girls with disabilities**, to ensure their equal access to education at all levels, including technical and vocational training, and adequate rehabilitation programmes, healthcare and services, and employment opportunities, to protect and promote their human rights and, where appropriate, to eliminate existing inequalities between women and men with disabilities¹⁰⁶.
- The Resolution also makes various references to **mental health** as an integral part of the well-being of women and calls for action in this area.

References to multiple discrimination, including disability, are also present in the **Communication COM (2005) 224, Non-Discrimination and Equal Opportunities for All – A Framework Strategy**¹⁰⁷, which recognises the importance for the EU to consider how its experience of combating sex discrimination and promoting gender equality may be transferable to other grounds of discrimination. In line with the principle of gender mainstreaming, the different ways in which women and men experience discrimination on the grounds of racial or ethnic origin, religion or belief, disability, age and sexual orientation should be considered. In some areas, it may be appropriate to consider the development of an integrated approach to the promotion of non-discrimination and gender

¹⁰² Ibidem, par. 5

¹⁰³ Ibidem, par. 27

¹⁰⁴ Ibidem, par. 63

¹⁰⁵ Ibidem, par. 69 (j)

¹⁰⁶ Ibidem, par. 83 (d)

¹⁰⁷ COM(2005)81 of 8.3.2005

equality. This integrated approach should take into account the fact that some people may experience multiple discrimination on several grounds.

With regard to the specific European policies for gender equality, the first European Pact for Gender Equality was adopted by the European Council in 2006¹⁰⁸. The Pact emphasised the importance of utilising women's untapped potential in the labour market, including by promoting women's empowerment in economic and political life, and of the need to close gender gaps, combat gender stereotypes and to promote better work/life balance for women and men.

In 2010 the European Commission strengthened its commitment in promoting gender equality and presented the **Women's Charter** with its five priority areas¹⁰⁹. The Charter shows the commitment of the Commission in making gender equality a reality in the EU and a guarantee that a strong gender dimension is embedded in the Europe 2020 Strategy¹¹⁰. On the basis of the Women's Charter, a new five-year **Strategy for Equality between Women and Men for the period 2010–2015** was adopted in 2010¹¹¹. The Strategy built on the experience of the *Roadmap for equality between women and men (2006–2010)*. It is a comprehensive framework committing the Commission to integrate gender equality into all its policies. The strategy highlights the contribution of gender equality to economic growth and sustainable development, and supports the implementation of the gender equality dimension in the *Europe 2020 Strategy*, following the dual approach of gender mainstreaming and specific measures¹¹². The Strategy does not explicitly refer to multiple discrimination. Disabled women are mentioned together with other disadvantaged women (such as migrant women and elderly women) who experience low employment rates and greater gender imbalances. In addition, in the accompanying document **Actions to Implement the Strategy for Equality between Women and Men 2010–2015**¹¹³, within the key actions for an improved governance, the promotion of a 'better knowledge of gender dimension in disability policy' is mentioned; and among the outputs to be achieved: 'Ensure availability of data broken down by sex in the collection of data related to disability statistics in relation to employment and social participation' is also mentioned.

A revision of the first Pact on Gender Equality was prepared under the Hungarian Presidency in the first half of 2011 to provide fresh impetus and to reaffirm and support the close link between the Pact and Europe 2020 Strategy, and the European Commission's *Strategy for Equality between Women and Men 2010–2015*. The draft Council Conclusions on the renewed European Pact for Gender Equality 2011–2020 were adopted by the EPSCO Council in March 2011. The new **European Pact for Gender Equality (2011–2020)** is closely related to the five-year Strategy for Equality between men and women, with the aim to reaffirm and support the close link between the Strategy and Europe 2020. With the Pact, the Council urges the Member States and the Union to adopt measures to close gender gaps and combat gender segregation in the labour market, to promote a better work-life balance for women and men, and to tackle all forms

¹⁰⁸ European Council Conclusions, March 2006, 7775/1/06.

¹⁰⁹ COM (2010) 78 final (<http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=COM:2010:0078:FIN:EN:PDF>).

¹¹⁰ <http://ec.europa.eu/eu2020/pdf/COMPLET%20EN%20BARROSO%20%20%20007%20-%20Europe%202020%20-%20EN%20version.pdf>.

¹¹¹ COM(2010) 491 final (<http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=COM:2010:0491:FIN:EN:PDF>).

¹¹² SEC(2010) 1079 final (<http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=SEC:2010:1079:FIN:EN:PDF>).

¹¹³ European Commission (2011), Strategy for equality between women and men 2010-2015, Document drawn up on the basis of COM(2010) 491 final, SEC(2010) 1079 and SEC(2010) 1080, Luxembourg: Publications Office of the European Union
http://ec.europa.eu/justice/gender-equality/files/documents/strategy_equality_women_men_en.pdf

of violence against women, while reaffirming its commitment to reinforcing governance. This is through gender mainstreaming by integrating the gender perspective into all policy areas, including external EU actions¹¹⁴.

According to the **European Disability Forum** both the EU 2011–2020 Gender Equality Pact and the EU Plan of Action on Gender Equality and Women’s Empowerment (2010–2015) do not mainstream the rights of women and girls with disabilities and specific actions to enhance their rights have not been sufficiently undertaken¹¹⁵.

The EP Resolution 2152/2014 calls on the Commission to draw up and adopt a new strategy for gender equality between women and men in Europe, aimed at eliminating discrimination against all women and men in their diversity (ethnicity, class, sexual orientation, gender identity, disability, religion, nationality and age).

However, instead of formulating a new strategy, the EC in December 2015 drafted the **Strategic Engagement for Gender Equality 2016–2019**¹¹⁶. Although compared to the previous strategy for equality between women and men 2010–2015 this is a downgraded internal document with a limited duration of action, it identifies more than thirty key actions to be implemented in five priority areas, with timelines and indicators for monitoring. It also mentions among its priorities and key actions for 2016–2019, that ‘particular attention will be paid to the specific needs of groups facing multiple disadvantages, e.g. single parents and older, migrant, Roma and disabled women’, but it does not take specific steps forward.

4.3. The role of the European Structural and Investment Funds in improving the chances of female workers with disabilities to have equal opportunities

Since the 1994–1999 programming period, the European Commission has been taking action to ensure the promotion of equality between women and men in Cohesion policy funds.

Following the Amsterdam Treaty¹¹⁷ which strengthened focus on the achievement of equal opportunities, a dual approach was promoted for mainstreaming gender within Cohesion policy funds. The dual approach implies the use of vertical priorities – that is, a priority which is essentially contained within the aims and activities of a specific programme – and horizontal priorities specifically integrating equality objectives into all general policies and measures. This approach characterised both the 2000–2006 and the 2007–2013 programming periods¹¹⁸. With the adoption of the 2014–2020 regulations, the European

¹¹⁴ Council conclusions on the European Pact for gender equality for the period 2011–2020, http://www.consilium.europa.eu/uedocs/cms_data/docs/pressdata/en/lisa/119628.pdf

¹¹⁵ www.edf-feph.org/sites/default/files/2015_03_04_edf_proposals_of_questions_for_list_of_issues_-_final.doc

¹¹⁶ The Commission will continue to promote gender equality with a focus on all the five priority areas of the Strategy. This *Strategic engagement for gender equality 2016–2019* is a reference framework to keep on increasing effort at all levels (European, national, regional or local). See:

https://ec.europa.eu/anti-trafficking/sites/antitrafficking/files/strategic_engagement_for_gender_equality_en.pdf

¹¹⁷ <http://www.europarl.europa.eu/topics/treaty/pdf/amst-en.pdf>

¹¹⁸ Council Regulation (EC) No. 1260/1999 of 21 June 1999 laying down general provisions on the Structural Funds. http://ec.europa.eu/regional_policy/sources/docoffic/official/regulation/content/en/02_pdf/00_1_sf_1_en.pdf; Regulation (EC) No 1784/1999 of the European Parliament and of the Council of 12 July 1999 on the European Social Fund.

http://ec.europa.eu/regional_policy/sources/docoffic/official/regulation/content/en/02_pdf/00_3_esf_en.pdf; Commission Regulation (EC) No. 1828/2006 of 8 December 2006 setting out rules for the implementation of Council Regulation (EC) No 1083/2006 laying down general provisions on the European Regional Development Fund, the European Social Fund and the Cohesion Fund and of Regulation (EC) No 1080/2006 of the European Parliament and of the Council on the European Regional Development Fund, <http://eur-lex.europa.eu/legal-content/EN/ALL/?uri=CELEX:32006R1828>; Regulation (EC) No 1080/2006 of the European Parliament and of

Commission has taken further action to consolidate gender equality in the Cohesion policy funds. Indeed, in order to ensure a proper mainstreaming of the gender perspective, the Advisory Committee on Equal Opportunities for Women and Men drafted an Opinion on Gender Equality in the Cohesion Policy 2014–2020, identifying shortcomings and priorities to guide the definition of the new Cohesion policy regulations¹¹⁹.

Besides maintaining the commitment to gender equality through targeted measures and gender mainstreaming, the ESI funds regulations for the programming period 2014–2020 also **reflect the entry into force of the UNCRPD** and contain new indications to enhance the promotion of equality, non-discrimination, inclusion and accessibility for persons with disabilities through the ESI Funds actions¹²⁰.

The main provisions on gender equality in the 2014–2020 Cohesion policy are included in **Article 7 of the Common Provisions of the European Structural and Investment Funds – ‘ESI Funds’**¹²¹, which foresees that ‘Member States and the Commission shall ensure that equality between men and women and the integration of gender perspective are taken into account and promoted throughout the preparation and implementation of programmes, including in relation to monitoring, reporting and evaluation’¹²². **Disability is mentioned in the same article** stating that ‘Member States and the Commission shall take appropriate steps to prevent any discrimination based on sex, racial or ethnic origin, religion or belief, **disability**, age or sexual orientation during the preparation and implementation of programmes’¹²³.

Equality between men and women and non-discrimination are among the horizontal priorities in the programmes, aimed at optimising impacts by preventing discrimination and supporting specific actions, providing expertise and paying special attention to employment.

Another important horizontal principle addressing the needs of people with disability is the **accessibility** principle, targeted to people with disabilities, and especially regarding physical environment, transport and ICT. The new Common Provisions require that the Member States and the Commission take appropriate steps to prevent any discrimination based on disability and that accessibility for persons with disabilities is taken into account throughout the preparation and implementation of programmes. Managing authorities must ensure that all products, goods, services and infrastructures supported by the ESI Funds, are accessible to all citizens including those with disabilities. Actions may include

the Council of 5 July 2006 on the European Regional Development Fund and repealing Regulation (EC) No. 1783/1999, <http://eur-lex.europa.eu/legal-content/EN/ALL/?uri=CELEX:32006R1080>; Regulation (EC) No 1081/2006 of the European Parliament and of the Council of 5 July 2006 on the European Social Fund and repealing Regulation (EC) No. 1784/1999.

<http://eur-lex.europa.eu/legal-content/EN/ALL/?uri=CELEX:32006R1081>

¹¹⁹ http://ec.europa.eu/justice/gender-equality/files/opinions_advisory_committee/opinion_on_gender_equality_in_the_cohesion_policy_2014-2020_en.pdf

¹²⁰ See: European Commission Implementation Guidance 2014-2020 Mainstreaming of Gender Equality and Non-Discrimination Version 2 – 24/03/2014

http://ec.europa.eu/regional_policy/sources/docgener/informat/2014/implementation_gender_equality.pdf.

¹²¹ The European Regional Development Fund (ERDF), the European Social Fund (ESF), the Cohesion Fund, the European Agricultural Fund for Rural Development (EAFRD) and the European Maritime and Fisheries Fund (EMFF) operate under a common framework (the European Structural and Investment Funds - ‘ESI Funds’).

¹²² Regulation (EU) No 1303/2013 of the European Parliament and of the Council of 17 December 2013 laying down common provisions on the European Regional Development Fund, the European Social Fund, the Cohesion Fund, the European Agricultural Fund for Rural Development and the European Maritime and Fisheries Fund, and laying down general provisions on the European Regional Development Fund, the European Social Fund, the Cohesion Fund and the European Maritime and Fisheries Fund, and repealing Council Regulation (EC) No 1083/2006.

<http://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:32013R1303>

¹²³ see footnote 43

ERDF supported investments to improve accessibility in existing buildings and established services.

Gender equality, non -discrimination and accessibility are mentioned also under specific provisions as regards for instance monitoring, reporting and evaluation. Member States must also ensure the participation of the relevant bodies responsible for promoting gender equality and non -discrimination in the partnership, and ensure adequate structures in accordance with national practices to advise on gender equality, non-discrimination and accessibility in order to provide the necessary expertise in the preparation, monitoring and evaluation of the ESI Funds.

Moreover, for the first time, the Structural Funds regulations also include an explicit reference to disability-related issues mentioning the transition from institutional care to community living, which falls within the thematic objective of 'Promoting social inclusion and combating poverty and any discrimination'¹²⁴.

The increased relevance of gender equality and non-discrimination in the 2014–2020 programming period can also be noted from their inclusion among the ex ante conditions laid down in the Partnership Agreement between the Commission and Member States, and upon whose fulfilment accession to Cohesion policy funds depends. Accordingly, the **gender equality ex ante conditionality** requires the existence of administrative capacity for the implementation and application of Union gender equality law and policy in the field of ESI Funds. The criteria to be respected for its fulfilment are:

- i) arrangements in accordance with the institutional and legal framework of Member States for the involvement of bodies responsible for gender equality throughout the preparation and implementation of programmes, including the provision of advice on gender equality in ESI fund-related activities;
- ii) arrangements for training of staff with the authorities involved in the management and control of the ESI Funds in the fields of Union gender equality law and policy as well as on gender mainstreaming¹²⁵.

The ex ante conditionality also asks that the **involvement of organisations of people with disabilities** is ensured in drafting the Partnership Agreements and Operational Programmes, as well as in the Monitoring Committees for the projects funded by the Structural Funds.

In addition, the implementation of the United Nations Convention on the Rights of Persons with Disabilities must be promoted and supported 'with regard inter alia to education, work, employment and accessibility'.

The **ESF** should also promote the transition from institutional to community-based care; and should not support any action that contributes to segregation or to social exclusion¹²⁶. Moreover, for the thematic objective 'Promoting social inclusion and combating poverty and any discrimination', Member States must demonstrate the 'existence and implementation' of a 'national strategic policy framework for poverty reduction'. The criteria for fulfilling this condition refer specifically to 'the transition from institutional to community-based care'. If such needs are identified, Member States must include 'measures for the shift from institutional to community-based care' when acting under this objective.

¹²⁴ Article 9 of the Common Provisions Regulation on the use of Structural Funds.

¹²⁵ http://ec.europa.eu/regional_policy/sources/docgener/informat/2014/eac_guidance_esif_part2_en.pdf

¹²⁶ See Article 9, Common Provisions Regulations and the general ex ante conditionalities, Annex XI, Area 3 Disability.

The **ERDF regulations** do not explicitly mention specific gender equality and non-discrimination objectives, although they could be addressed in all the ERDF thematic objectives and investment priorities, and particularly in the following:

- TO 1: strengthening research, technological development and innovation;
- TO 2: enhancing access to, and use and quality of, ICT;
- TO 3: enhancing the competitiveness of SMEs;
- TO 6: promoting sustainable transport and removing bottlenecks in key network infrastructures;
- TO 9: promoting social inclusion, combating poverty and any discrimination, by:
 - (a): investing in health and social infrastructure through improved access to social, cultural and recreational services and the transition from institutional to community-based services;
 - (b): providing support for physical, economic and social regeneration of deprived communities in urban and rural areas;
 - (c): providing support for social enterprises;
 - (d): undertaking investment in the context of community-led local development strategies.

In particular, investment in Community living makes for a better and more cost-efficient use of Structural Funds. 'Transition from institutional to community-based care' has been identified as one of the priorities in the European Disability Strategy 2010–2020, with Structural Funds and the Rural Development Fund identified as key to supporting 'the development of community-based services and raising awareness of the situation of people with disabilities living in residential institutions'¹²⁷. In the Social Investment Package¹²⁸, which provides guidance to the Member States on how to reach the Europe 2020 targets, the EC asks for Structural Funds to be used for 'human capital development, including employment, social inclusion [...] accessibility of social, education and health services' and for the needs of disadvantaged groups to be addressed with 'coordinated action' by Structural Funds.

Most importantly, **Structural Funds investments must comply with EU law, including the Convention on the Rights of Persons with Disabilities (CRPD)**, since its ratification by the EU¹²⁹. Article 19 of the CRPD requires that people with disabilities have access to community services that support their social inclusion and 'prevent isolation or segregation from the community'. Large long-stay residential facilities, common across Central and Eastern Europe, including the six countries covered in this study, isolate residents from society, and are often in remote locations. Compliance with Article 19 requires the development of community-based services that obviate the need

¹²⁷ European Disability Strategy 2010–2020: *A renewed commitment to a barrier-free Europe*, COM(2010) 636 final, page 5.

¹²⁸ Towards social investment for growth and cohesion – including the implementing of European Social Fund 2014–2020, COM(2013) 83 final, p.17.

¹²⁹ See for example, Open Society Foundations, *The European Union and the right to community living*, 2012 and the United Nation Office of the High Commissioner for Human Rights, *Getting a life – living independently and being included in the community*, 2012.

for such institutions. Since Structural Funds investments must be CRPD¹³⁰ compliant; they cannot be invested in institutional care¹³¹.

In their programming documents Member States show considerable attention to the horizontal principles (EC, 2016)¹³². In particular, social inclusion and non-discrimination appears to be well integrated into Member States' programming practices, while accessibility receives less attention.

In addition:

- In the non-discrimination category, the group most frequently referred to are women, followed by the disabled. However, reference to women with disabilities is very limited.
- About two-thirds of Member States intend to promote horizontal principles through mainstreaming, while more than half of programmes also referred to specific actions in one or more policy area(s). However only a few programmes have selected specific actions to promote gender equality (9 %) and even fewer (5 %) to combat all forms of discrimination and promote equal opportunities. The results of a survey carried out on the main stakeholders of the ESI Funds also show that the regulatory improvements in the areas of non-discrimination and accessibility are expected to strengthen the practical application of these horizontal principles only for a limited number of stakeholders (11 %).

Despite gender equality being formally mentioned, several evaluations¹³³ of the 2000–2006 and 2007–2013 programming periods reveal that **gender equality has not been integrated in the ESI Funds coherently and systematically at all stages of the policy cycle**. According to these evaluations, the integration of a gender perspective in the context analysis is carried out unevenly among the Member States; in some cases, regional Operational Programmes include a specific gender analysis in the part dedicated to the analysis of the context, while in other cases no reference to specific gender inequalities and their possible causes are presented. In the programming phase, gender equality is generally present as a broad principle, but it is rarely broken down into gender-specific objectives, or objectives that include a gender equality perspective. If it is, this is only in an ad hoc manner. Furthermore, gender equality is often present in objectives that are immediately associated with gender inequalities (e.g. the labour market, childcare or elderly care). It is very seldom in those that are not 'immediately' related to women (e.g. energy, transport, ICT, waste). Moreover, the allocation of financial resources to gender equality is rather limited. According to a European Parliament study, during the period of

¹³⁰ See Article 6, Common Provisions Regulations and the general ex ante conditionalities, Annex V, Area 3 Disability.

¹³¹ See Open Society Foundations, The European Union and the Right to Community Living, 2012 and the United Nations Office of the High Commissioner for Human Rights, *Getting a life – living independently and being included in the community*, 2012.

¹³² EC-DG Regio (2016), The use of new provisions during the programming phase of the European Structural and Investment Funds edited by Heil Péter and Tétényi Tamás, European Union, May 2016.

¹³³ European Parliament, *Gender mainstreaming in the use of structural funding, 2007*, http://www.europarl.europa.eu/meetdocs/2004_2009/documents/dv/675/675221/675221en.pdf; European Commission, Study on the translation of Article 16 of Regulation (EC) No.1083/2006, on the promotion of gender equality, non-discrimination and accessibility for disabled persons, into cohesion policy programmes 2007–2013 co-financed by the ERDF and the Cohesion Fund, 2009, http://ec.europa.eu/regional_policy/en/information/publications/evaluations/2009/study-on-the-translation-of-article-16-of-regulation-ec-n10832006-on-the-promotion-of-gender-equality-non-discrimination-and-accessibility-for-disabled-persons-into-cohesion-policy-programmes-2007-2013-co-financed-by-the-erdf-and-the-cohesion-fund; CES, Evaluation study of the integration of the gender perspective within structural funds during the programming period 2007–2013, 2013, http://www.ces.uc.pt/myces/UserFiles/livros/1097_Est%20IG%20FE%20-%20SUM%20EXEC%20Junho%202013%20EN.pdf

2007–2013 across the Member States on average only 3.7 % of the total ESF resources was allocated to specific gender equality actions. The study underlines that,

“despite the official declarations that the EU 2020 Strategy was conceived as an opportunity to reform the economy in a gender equality perspective and the intention to make gender mainstreaming the pivotal strategy for gender equality, [...] the gender perspective is far from being assumed in all policies, at all levels and at every stage of the policymaking process.”¹³⁴

The same appears for the intersectional approach, as gender and disability-related issues when present are tackled separately or disabled women are simply mentioned as a specific disadvantaged group with no specific actions carried out.

Although in the 2014-2020 programming period the ESI funds regulations for gender equality, disability and non-discrimination are relatively robust, these are not thematic objectives on their own, with dedicated resources (technical, human and financial) and requirements to explicitly mainstream attention to gender and disability into all the programmes’ planning, implementation, monitoring and evaluation phases are lacking.

The extent to which the implementation of ESI Funds will effectively address gender equality and disability will have to be carefully monitored. It will have to be evaluated whether outcomes have been different in the actual programming period. According to the Opinion on Gender Equality in the Cohesion Policy 2014–2020 by the Advisory Committee on Equal Opportunities for Women and Men¹³⁵, even if common provisions include a number of references to the promotion of gender equality, in the 2014–2020 funding period, the role of the Cohesion Policy in promoting equality between women and men must be strengthened. This is necessary in order to reach the Europe 2020 targets and to redress the negative gendered impact of the economic crisis and the ensuing austerity measures across Europe.

In particular it will have to be evaluated how the priority objective of ‘promoting social inclusion, combating poverty and any discrimination’ is effectively implemented within the OPs especially with regard to ESF, as the main European Commission gender equality priorities in regional policy are included in the ESF Regulation:

- increasing the sustainable participation and progress of women in employment;
- combating the feminisation of poverty;
- reducing gender-based segregation;
- combating gender stereotypes in the labour market and in education and training;
- promoting the reconciliation of work and personal life for all as well as the equal sharing of care responsibilities between men and women in the case of ESF;
- reducing inequalities in terms of educational attainment and health status;
- facilitating the transition from institutional to community-based care, in particular for those who face **multiple discrimination** (e.g. disabled women)¹³⁶.

¹³⁴ European Parliament, *The multi-annual financial framework 2014–2020 from a gender equality perspective*, 2012, http://www.europarl.europa.eu/RegData/etudes/note/join/2012/462426/IPOL-FEMM_NT%282012%29462426_EN.pdf

¹³⁵ http://ec.europa.eu/justice/gender_equality/files/opinions_advisory_committee/opinion_on_gender_equality_in_the_cohesion_policy_2014-2020_en.pdf

¹³⁶ Regulation (EC) No 1784/1999 of the European Parliament and of the Council of 12 July 1999 on the European Social Fund. http://ec.europa.eu/regional_policy/sources/docoffic/official/regulation/content/en/02_pdf/00_3_esf_en.pdf

Indeed, Structural Funds, and in particular, ESF and ERDF, can fund many initiatives for people with disabilities (including women), for example, transition from large residential institutions to community-based living services; accessibility regarding public services, workplaces, physical environment, transport and ICT; vocational training to assist disadvantaged populations (including people with disabilities) to get a job; training for professionals and staff in organisations of people with disabilities and services; as well as technical support to reform the legislative and financial frameworks related to disability.

5. COMPARATIVE ANALYSIS OF THE COUNTRY CASE STUDIES

KEY FINDINGS

- The selected case studies ensure geographical coverage and a comprehensive picture of the different national approaches to welfare, labour market regulations/policies, and gender policies for people with disabilities.
- The concept of multiple discrimination remains essentially out of the public and political debate, and the intersectional approach remains mostly a field for researchers and academic debate. This has been confirmed by interviews with relevant national stakeholders.
- The only exception is Germany where attention to multiple discrimination is formalised in laws and acts, and the debate on women with disabilities started in the mid-1980s. In some of the other countries (e.g. Italy, Spain, and to a lower extent France) the debate about multiple and intersectional discrimination against women with disabilities has only recently emerged.
- The recent move towards a greater attention to the gender perspective in the legislation on disability is slowly changing the legislative framework in some of the considered countries (e.g. Spain, Italy and Germany). However, in all of them, the legislative and policy frameworks on disability and employment remain too generic, or neutral from a gender perspective. The policy framework of the seven selected countries does not explicitly mention multiple discrimination, except for some measures in Germany and Spain.
- The socio-economic conditions of women with disabilities in the country case studies show similar patterns to those described in Chapter 3. The picture provided by Eurostat data is confirmed by national data with a few exceptions. This is probably due to the fact that different sources adopt different definitions of disability.
- Overall, the European Structural and Investment Funds are not much used to promote the integration of women with disabilities into employment. Nevertheless, people with disabilities and women are among the most relevant targets of thematic objectives 8 and 9 of the programming period 2014–2020. Moreover, the issue of disability and gender is included among the horizontal principles.
- With reference to the intersection between gender and disability, and its effect on access to employment for female workers with disabilities, the national stakeholders interviewed have stressed the importance of certain key issues. These are: designing and implementing comprehensive strategies; improving the information and data systems; raising social awareness on multiple discrimination affecting women with disabilities; and ensuring a greater political representation of women with disabilities.

In order to complement the information resulting from the literature review and the statistical analysis, we have selected seven country case studies. These are representative of the different labour market conditions of women with disabilities compared to men and women without disabilities in the EU, and of the different policy approaches adopted in the respective policy frameworks.

The **selection of the country case studies** has been driven by representation according to: geographical coverage, welfare and employment regulations models, different traditions in disability/gender policies, and incidence in GDP of national expenditure for labour market policies aimed at people with disabilities¹³⁷.

The following countries have been selected for the structured in-depth country studies:

- one Nordic country (Denmark)
- one Anglo-Saxon country (the UK)
- two continental countries (France and Germany)
- two Mediterranean countries (Italy and Spain)
- one Eastern European country (Poland).

Denmark, representative of the universal Nordic welfare model, is characterised by family policies based on the dual earner/carer model. The Danish support to carers with parental leave and universal and extensive childcare facilities has supported women's high labour market participation. For 2014, Denmark also shows a very high incidence on the GDP of the expenditure for 'supported employment and rehabilitation' (0.67 %) and according to the ANED report (2015), in the last few years a number of reforms have been implemented with a double aim: at the one hand, to support inclusion and integration of people with disabilities; on the other hand, to reduce costs. However, the impact of these reforms on the conditions of people with disabilities has not been investigated yet. In addition, there is a need to get a clearer picture of the development of poverty in Denmark, as well as of the consequences of poverty for people with disabilities. Finally, the Danish Flex Jobs programme is an example of good practice as it extends to people with disabilities the measures provided to the non-disabled. As shown in Chapter 3, Denmark shows a high share of women with disabilities participating in education and training, and high employment rates with a low gender gap, compared to the EU28 average.

France, one of two selected countries representative of the continental welfare model, presents labour market regulations, policies and programmes still largely gender blind and that tend to reproduce labour market segmentation. In addition, its labour market is characterised by a relevant presence of fixed-term contract and precarious workers as well as a dual employment protection system that particularly affects women and contributes to worsening their working conditions. Conversely, many measures have been taken in order to promote the employment of disabled people (companies are subject to compulsory quotas) and recently, government policies have increased their attention on disability issues. In particular, in 2013 at the Interministerial Disability Committee, the government decided to include a specific section on disability for each new law and currently it is developing joint training programmes to consolidate cooperation between professionals. These measures have supported a high employment rate for people with

¹³⁷ The differences between Europe's social and welfare models have led to a number of categorisations, taking into account the level of income support for those outside the labour market, the effects of welfare policies on social mobility, and the differences in welfare providers (i.e. public or private). See Ebbinghaus, B. (2012), *Comparing welfare state regimes: Are typologies an ideal or realistic strategy?* ESPAnet Conference, Edinburgh, UK, September 6–8, 2012; Sapir A. (2005), *Globalisation and the reform of European social models*, Bruegel Policy Contribution; Begg, I. et al. (2008), "Is Social Europe Fit for Globalisation? A study of the social impact of globalization in the European Union". Brussels: European Commission, Centre for European Policy Studies. ; Ferrera M. (1996) 'The southern model of welfare in social Europe' in *Journal of European Social Policy*, 6(1), 17-37; Esping-Andersen G. (1990), *The three worlds of welfare capitalism*, New Jersey, Princeton University Press.

disabilities, although the gender gap is still high and the share of disabled men and women participating in education and training is low.

Germany, in the framework of the continental welfare model, presents a relatively high gender segregation, a high gender wage gap, and a high share of women working with part-time and fixed-term contracts and in low-income jobs (mini-jobs), especially for married women and mothers. Regarding disability, people with disabilities have lower employment and education levels, as well as higher poverty risks due to their lower income and high disability-related costs. In recent years many Länder have developed specific action plans for the improvement of the situation of disabled people in access to education and employment, and reduction of poverty. From a gender perspective, the National Disability Report documents wide gender gaps in employment, with disabled women far less often working full-time¹³⁸, and in lower positions than men. Recently, the new National Disability Action Plan 2015 introduced some new measures supporting the inclusion in education and employment of people with disabilities and, in particular, a new 'budget for employment' to support free choice of the workplace within or outside the sheltered workshops, and greater financial contributions to support inclusive companies.

Italy, representative of the Mediterranean welfare model, is characterised by female participation and employment rates well below EU averages. Also, the employment rates and participation in education and training for men and women with disabilities are well below the EU28 averages, especially for women. In Italy the policy approach for the disabled is focused on targeted measures, like targeted placement measures (*collocamento mirato*) and quotas, local plans for employment and disability benefits. The Italian Parliament has recently approved a law on the reform of employment legislation (Legislative Decree 151/2015) that introduced some adaptations of the legislation in favour of people with disabilities (a digital data collection system) and transferred the competence on employment policies for people with disabilities from the provinces to the National Agency on Employment.

Spain, in the framework of the Mediterranean welfare model, presents employment rates lower than European averages, both for men and women with and without disabilities. As in the Italian case, employment rates and participation in education and training for men and women with disabilities are well below the EU28 averages, especially for women. However, in contrast to the Italian case, gender mainstreaming is a key national strategy and gender equality a transversal goal for all policies. The institutional framework around gender equality policies has been progressively strengthened at the national level mainly around the balance of work and family life, considered necessary in order to improve women's employability. The Spanish government is currently implementing specific measures to satisfy the rights and needs of people with disabilities in different fields, but there are still important challenges to face, mainly related to the open labour market. Sheltered employment has increased even during the economic crisis because most policies and investments, supported by the government and the main NGOs, have focused only on supporting this option while there were no important initiatives to increase employment in the open market.

¹³⁸ Of all occupied men, 88 % of disabled men (vs. 50 % of occupied disabled women) and 92 % of non-disabled men (vs. 58 % of occupied non-disabled women) are full-time-workers.

The **United Kingdom** represents the Anglo-Saxon liberal welfare model, combining private and public service delivery. In recent years there has been an increased policy focus on the labour market activation of inactive groups, including women. This new policy development has led to considerable innovation in gender-related policies, and put the issue of women's participation in the labour market at the centre of the UK public policy discourse. According to the ANED report (2015), in August 2015 the Secretary of State for Work and Pensions announced a new government target to halve the employment gap between disabled and non-disabled people, equivalent to 'getting 1 million more disabled people into work'¹³⁹. In addition, in the 2015 spending review¹⁴⁰ the government announced that from 2017 a new work and health programme is going to be implemented with a specific health and work innovation fund to pilot new ways to link the health and employment systems. Finally, the UK has implemented a specific 'New deal for disabled people and pathways to work' involving dedicated consultants and 'job coaches', and programmes in Public Employment Services to support the employment of people with disabilities. While the employment rates for disabled women are in line with the EU28 average, participation in education and employment are higher than the EU average, although still much lower than in Denmark.

Poland, representative of the Eastern welfare model, demonstrates employment rates and participation in education and employment of women (and men) with disabilities much lower than the EU28 average. These are even lower than those for Italy and Spain, although gender gaps among the disabled are less relevant than for the Mediterranean countries. People with disabilities are also at a disproportionate risk of poverty and social exclusion. Poland in recent years has been characterised by an increasing and extensive support to childcare infrastructures (nurseries and preschools) and the introduction of a new parental benefit that may support the presence of women (including women with disabilities) in the labour market. Poland is the greatest receiver of ESI funds for health (EUR 2.95 billion), which can be used to support investments in healthcare and community care centres providing care services to vulnerable groups. In 2015 amendments were introduced to the legislation on disability and employment (the 2007 Rehabilitation Act), although the legislation subsidising employers who employ people with disabilities was recently changed again¹⁴¹.

5.1. The evolution of the national debate on 'multiple discrimination' in relation to women with disabilities

In most of the countries analysed in the case studies **multiple discrimination remains out of the public and political debate**, and the intersectional approach remains mostly a field for researchers and academic debate.¹⁴² The multiple discrimination faced by women with disabilities is **also not a priority in the agenda** of associations of people with disabilities; even when it has been incorporated in the discourse, it has not been embraced by lawmakers and policymakers.

According to the country experts, the debate on the intersection between disability and gender is still weak or even in some countries totally absent (**Denmark, Poland, UK**).

¹³⁹ <http://www.reform.uk/publication/rt-hon-iain-duncan-smith-mp-speech-on-work-health-and-disability/>

¹⁴⁰ <https://www.gov.uk/government/publications/spending-review-and-autumn-statement-2015-documents>

¹⁴¹ Act of 28 November 2014 Amending the Act on Vocational and Social Rehabilitation and Employment of Persons with Disabilities (Dz. U. [Journal of Laws] of 2014, Item. 1873).

¹⁴² This section is built on the analysis made by the country experts on the national debate on multiple/double discrimination in relation to women with disabilities. See Annex 5.

Particularly in **Poland**, it seems that the current government is not willing to discuss the topic of disabilities in the context of gender as it is officially recognised as unjustified and even harmful on the basis of ideological premises. The reason for this approach is related to the Church's hierarchy and conservative politicians who consider 'gender' as an ideological concept designed to ruin the traditional Polish family¹⁴³. The fragmentation among the associations of people with disabilities, each one representing the specific interests of a particular type of disability is another obstacle. Even in **Denmark**, according to the Danish expert, the intersection between disability and gender is not an issue touched upon in the literature available, and neither does it seem to be an issue in the national debate. Part of this might reflect the limited number of people involved for some types of disabilities. It might also reflect the relatively high degree of social and economic integration guaranteed by the Nordic welfare systems both through income support and active inclusion measures for the integration of people with disability in society, and employment (Denmark Case Study p.7).

In the other considered countries, the **gender perspective has been considered only in recent years**, although still marginally, in the public, political and institutional debate about disability discrimination. **Spain, Italy and Germany** have started to pay some attention to the intersectional discrimination against women with disabilities, although they are not yet ensuring a systematic integration of the gender perspective in their legislation and policies on disability. Legislation and policies on disability and employment often remain generic, or neutral from a gender perspective.

The main change with respect to the past in these countries is the **adoption of a 'double perspective'** concerning discrimination, leaving the **traditional treatment of disability and gender as separated issues**. The focus of policymakers, associations and the media was primarily on single-axis strategies and there was often no cooperation between the issues addressed by associations of people with disabilities and women's associations.

In **France**, for example, the 2016 report of the Defender of Rights (Bechrouri et al., 2016) has explored the definition of multiple discrimination as a first attempt to put this question in the public debate (p. 9). In **Spain**, according to Spanish expert (p. 9), the needs and specific conditions of women with disabilities had only rarely been a concern for Spanish women's associations. However, in recent years the debate about multiple discrimination and intersectional discrimination against women with disabilities has emerged within the associations of people with disabilities, even if it is not yet a priority on their agenda. In **Germany** (p. 10), the debate on women with disabilities started much earlier, in the mid-1980s.¹⁴⁴ In **Italy** (p.p. 7-8), the issues promoted by local and national associations of people with disabilities in recent times, although still very rarely, have been dealing with gender issues and/or have referred to theories and models on gender differences.

The move from a unilateral to a multiple perspective has translated, in some cases, to an **increasing number of local and national associations of women with disabilities**, or groups of women within the associations of people with disabilities. In **Germany**, for example, networks of women with disabilities are now quite widespread and in 2007 a **European Network of Women with Disabilities** was founded in Berlin.

¹⁴³ <http://www.niedziela.pl/artukul/78160/nd/%E2%80%9EGender%E2%80%9D--nowa-niebezpieczna>

¹⁴⁴ Ewinkel, C., Hermes, G., Boll, S., Degener, T., Kroll, B., Lübbers, S., et al. (Eds.) (1985). *Geschlecht Behindert – Besonderes Merkmal Frau. Ein Buch von behinderten Frauen*. AG SPAK: Munich.

The change of perspective is also **changing the type of issues** the debate is addressing with respect to women and disability, with strong differences across the considered Member States, as showed in Table 5.1. While in some countries, as Poland, the focus is still on medical intervention and rehabilitation, in others it has moved to employment and training opportunities (e.g. Spain), to the gender pay gap (e.g. UK), to the intersection of gender and ethnicity (e.g. France), to vulnerability (e.g. Italy), to motherhood and the sexual identity of women with disabilities (e.g. Germany).

To conclude, it is relevant to underline that even if double, and in some case multi, discrimination, has been partially introduced in the national discussion, **the debate is still mostly driven by European institutions**, such as the European Parliament. In addition, according to different experts, the major impulse to the debate on multiple discrimination was the **2006 UN Convention on the Rights of Persons with Disabilities** (UN, 2006), ratified by 27 EU Member States, including those covered in this study.

Table 4.2: The National Debate in the Country Case Studies

Country	Multiple/double discrimination in the national debate	Groups, networks, associations	Issues addressed by the debate
Germany	Debate since mid-1980s and formalisation of multiple discrimination laws and acts	Local and national groups of women with disabilities; networks on the federal states level; European Network of Women with Disabilities	Motherhood, sterilisation, socialisation, education, rehabilitation, sexual identity, sexual abuse of girls and women with disabilities, selective abortion
Spain	<ul style="list-style-type: none"> - Only recently in the debate and not an agenda priority - Both gender and disability have been treated as 'isolated' elements - Focus is usually only on double discrimination and not on multiple discrimination - Concept not being embraced by lawmakers and policymakers yet 	No integration between associations of people with disabilities and women's associations	Equal opportunities, employment, training and working-life balance
France	<ul style="list-style-type: none"> - The debate is mostly driven by the work of European institutions such as the European Parliament - 2016 report of the Defender of Rights 	n.a.	Intersection of gender and ethnicity, invisibility, role of gender stereotypes in everyday life (e.g. recognition of disabilities due to accidents at work)
Italy	<ul style="list-style-type: none"> - Marginal in the debate, but increasing focus mainly on a local basis - Disability and gender treated in separated academic fields 	Associations of people with disabilities, groups of women within associations	Vulnerability, invisibility, risk of violence, isolation and social exclusion

Poland	<ul style="list-style-type: none"> - No debate for a long period and focus just on medical considerations; currently very marginal - Groups are disintegrated and represent different interests 	Specialised NGOs and scientific communities	Medical intervention and rehabilitation, changing of the definition of people with disabilities and alleviating of institutional hurdles
United Kingdom	<ul style="list-style-type: none"> - Focus primarily on single-axis strategies - Need for more research with emphasis on intersectionality - Intense policymaking activity and lively debate in the media, among key stakeholders - Equality, fairness and anti-discrimination perspective 	Third sector organisations such as disabled people's organisations (DPOs), women's associations and networks	Disability employment gap and the associated costs of disability-induced economic inactivity, gender pay gap, disability benefits (negative coverage)

5.2. The socio-economic conditions of women with disabilities

The comparison of the socio-economic conditions of women with disabilities in the seven considered countries is based on the indicators illustrated in Chapter 3 and on national data reported by the country experts, when available.

Overall, the considered countries present similar patterns to those described in Chapter 3. However, they show **large differences in the overall incidence of disability in the labour market and socio-economic conditions of women with disabilities**, probably due to the different perceptions of disability in the national culture and the different types of disability acknowledged. This also affects the employment opportunities of men and women with disabilities and the nature of the discrimination, stereotypes and other barriers that they are confronted with. Unfortunately, due to a lack of gendered data, the experts have not been able to consider this issue.

As shown in Table 5.2 below, Denmark shows the highest share of men and women with a disability in employment (14.0 % and 19.8 % respectively) and of people facing barriers to participation (16.3 % and 20.1 % respectively), as well as the highest gender gap. France shows the highest share of men and women with a basic activity difficulties or disability with 18.4 % and 23.7 % respectively. Italy has the lowest incidence of disability among men, independently of the definition adopted while among women the lowest share is recorded in Spain (9.1 %) using definition 1 and in Italy (7.7 %) with definition 2. Italy also presents a relatively low gender gap.

The share of people with disabilities is higher among women than men in most of the selected countries. The exceptions are **Germany** with a higher share of men having difficulties in basic activities than women (+0.8 p.p.), and **Poland** with men having more disability in employment than women (+0.3 p.p.).

Table 4.3: EU28 and Case Study Countries – Population (15-64) with Disability by Gender and Gender Gaps (p.p.) in the Population (15-64) with Disability

INDICATOR		2011 – EU LFS AHM Definition 1			2011 – EU LFS AHM Definition 2			2012 – EHSIS		
		A Men (%)	B Women (%)	Gap A-B (p.p.)	A Men (%)	B Women (%)	Gap A-B (p.p.)	A Men (%)	B Women (%)	Gap A-B (p.p.)
Share (%) of people aged 15–64 with basic activity difficulties or disability	EU28	12.9	15.1	-2.2	10.0	11.9	-1.9	11.7	14.0	-2.3
	DK	12.9	17.4	-4.4	14.0	19.8	-5.8	16.3	20.1	-3.8
	DE	15.3	14.5	0.8	10.0	10.4	-0.4	16.2	17.6	-1.4
	ES	7.0	9.1	-2.2	7.6	10.9	-3.3	9.7	12.9	-3.2
	FR	18.4	23.7	-5.2	9.6	11.5	-1.9	10.1	11.9	-1.8
	IT	7.8	9.5	-1.7	6.2	7.7	-1.5	5.2	7.0	-1.8
	PL	13.7	14.7	-1.0	11.6	11.3	0.3	10.8	12.5	-1.7
	UK	15.4	18.0	-2.6	12.0	13.7	-1.7	16.3	19.3	-3.1

Sources: LFS – AHM, 2011. EHSIS, 2012 – The EHSIS data for the EU27 exclude not only Croatia (which was the 28th Member State of the EU) but also Ireland. For this reason the EU27 data are considered as estimates.

The results from national data sources provided in the French case study (p. 13) confirm the fact that **the adopted definition of disability is important from a gender perspective**. Although women are less liable than men to benefit from an administrative recognition of disability (1.11 million versus 1.27 million men), they more often declare health troubles limiting their routine activities (2.89 million women versus 2.65 million men)¹⁴⁵.

Participation in education and training.

Eurostat data on participation rates in education and training for people aged 15–64 with difficulties in basic activities show that **women with disabilities invest more than men**, in all the selected countries (see Table 5.3). The highest gender gap is in **Denmark** with men with disabilities showing a participation in education and training 11.1 p.p. lower than women with disabilities. In Poland the gap is null, according to Eurostat data. Gender gaps are also negative for people with limitation in work caused by a health condition, or difficulty in basic activities (see Table 5.3), indicating a robustness of the patterns to changes in the definitions. Denmark has the highest gender gap (-8.2 p.p.) while in **Spain** it is null; Denmark has also the highest disability gap (-9.3 p.p.) while **France** has the lowest (-9.6 p.p.).

National data sources when available show however a somewhat different picture: for example the **Polish** Census data (2011) show that men with disabilities are, on the whole, better educated than women with disabilities. The Spanish 'Employment of persons with disabilities' survey (INE, 2015), also registers higher percentages of women

¹⁴⁵ Source: Insee, Employment survey, 2013, DARES, Ministry of Employment's treatment.

with disabilities among the illiteracy and primary education groups than men with disabilities. Compared to their counterparts without disabilities, women with disabilities show a greater difficulty in accessing and participating in education and training. The disability gaps are much higher than the gender gaps in all the selected countries, from -16.9 p.p. in **Poland** to -9.8 p.p. in the **UK**.

As in the case of women without disability, **early drop out** from education and training is **lower among young women** with a disability than among young men (see Table 5.3), with Italy registering the highest gender differences.

Young women aged 18–24 reporting a basic activity difficulty **are however much more likely than their counterparts without disability to leave education and training** with only a lower secondary education, independently of the definition of disability adopted. The highest disability gap according to Eurostat data is in **Poland**, although data have a low reliability. According to the Polish expert (p. 12), it is worth noting that the probability of a person with disability continuing education is also related to the accessibility of schools, which is much higher in the cities than in the countryside. Eurostat does not provide data for **France**, however national data from the French Labour force survey (Bahroum and Chabanon, 2015) show that women with disabilities (as well as men with disabilities) are more at risk of having at best the certificate of secondary education than their able-bodied counterparts.

In all the considered countries, women with disabilities aged 30–34 are more likely than men to have attained a **tertiary education**, but less likely than women without disabilities. Eurostat data report the highest gender difference in **Poland** (+10.7 p.p.) when considering difficulties in basic activities, and in **Spain** (+17.6 p.p.) when focusing on disability in employment.

Eurostat data for the considered countries also report a lower share of women with disabilities with tertiary education compared to women without disabilities, with **Denmark** showing the highest gap independently of the definition adopted (+25.1 p.p. and +25.5 p.p.).

Table 4.4: EU28 and Case Study Countries – Main Education and Training Indicators Disaggregated by Gender and by Disability Definition and Gender Gaps (p.p.) and Disability Gaps by Disability Definition

INDICATOR		2011 – EU LFS AHM Definition 1						2011 – EU LFS AHM Definition 2					
		A	B	C	D	Gender	Disability	A	B	C	D	Gender	Disability
		Men with disabilities (%)	Women with disabilities (%)	Men without disabilities (%)	Women without disabilities (%)	Gap A-B (p.p.)	Gap B-D (p.p.)	Men with disabilities (%)	Women with disabilities (%)	Men without disabilities (%)	Women without disabilities (%)	Gap A-B (p.p.)	Gap B-D (p.p.)
<i>Early school leaving rate (18–24) (%)</i>	EU 28	27.7	22.6	14.1	10.8	5.1	11.8	35.3	27.9	14.0	10.6	7.4	17.3
	DK	24.8 (*)	(:)(*)	10.0	6.5	(:)(*)	(:)(*)	27.3 (*)	(:)(*)	9.7	6.0	(:)(*)	(:)(*)
	DE	(:)(*)	(:)(*)	11.0	9.9	(:)(*)	(:)(*)	(:)(*)	(:)(*)	10.7	9.5	(:)(*)	(:)(*)
	ES	46.2	39.9	28.6	21.7	6.3	18.2	43.3	40.3	28.6	21.5	3.0	18.8
	FR	(:)(*)	(:)(*)	11.6	8.6	(:)(*)	(:)(*)	(:)(*)	(:)(*)	11.9	8.4	(:)(*)	(:)(*)
	IT	45.6	28.8	20.2	14.1	16.8	14.7	44.9	28.8	20.3	14.2	16.1	14.6
	PL	28.3 (*)	26 (*)	6.6	3.2	2.3 (*)	22.8 (*)	27.2 (*)	24.4 (*)	6.7	3.2	2.8 (*)	21.2 (*)
	UK	26.3	24.4	16.1	14.0	1.9	10.4	33.7	30.2	15.7	13.6	3.5	16.6
<i>Tertiary education attainment rate (30–34) (%)</i>	EU 28	19.9	27.4	32.2	39.5	-7.5	-12.1	17.5	26.1	32.2	39.7	-8.6	-13.6
	DK	(:)(*)	24 (*)	37.8	49.1	(:)(*)	-25.1(*)	(:)(*)	24.4 (*)	37.2	49.9	(:)(*)	-25.5 (*)
	DE	(:)(*)	(:)(*)	29.1	30.5	(:)(*)	(:)(*)	(:)(*)	(:)(*)	28.6	31.1	(:)(*)	(:)(*)
	ES	30.1	38.4	38.7	47.4	-8.3(*)	-9.0(*)	25.6	43.2	39.0	47.4	-	-4.2(*)
	FR	29.3 (*)	35.3 (*)	44.8	51.5	-6.0	-16.2	(:)(*)	40 (*)	44.7	50.5	(:)(*)	-10.5
	IT	5.6 (*)	12.4	15.3	25.0	-6.8(*)	-12.6	8.7 (*)	14.5 (*)	15.1	24.7	-5.8(*)	-10.2(*)
	PL	11.7 (*)	22.4 (*)	31.8	43.6	-10.7	-21.2	8.3 (*)	18.7 (*)	31.8	43.5	-10.4	-24.8
	UK	26.2	33.7	44.6	49.7	-7.5	-16.0	25.0	25.8	44.6	49.9	-0.8	-24.1
<i>Participation in education and training (%) (age 15–64)</i>	EU 28	8.8	10.4	20.0	21.8	-1.6	-11.3	7.8	9.8	19.9	21.7	-1.9	-11.9
	DK	22.5	33.7	37.5	49.3	-11.1	-15.6	23.0	31.2	37.7	50.5	-8.2	-19.3
	DE	8.5	9.8	21.6	20.2	-1.3	-10.4	5.3	5.8	21.9	20.7	-0.5	-14.9
	ES	9.4	10.4	19.2	21.4	-1.0	-11.0	10.0	9.9	19.3	21.8	0.0	-11.8
	FR	7.5	8.6	19.4	20.8	-1.1	-12.1	7.7	10.2	19.0	19.8	-2.5	-9.6
	IT	5.4	6.0	14.9	16.8	-0.6	-10.8	5.2	6.6	14.8	16.5	-1.4	-9.8
	PL	3.9	3.9	18.2	20.8	0.0	-16.9	4.1	4.0	17.9	20.2	0.1	-16.2
	UK	13.2	15.4	22.0	25.1	-2.2	-9.8	12.0	13.5	21.8	25.0	-1.5	-11.4

Sources: LFS – AHM, 2011. Notes: (*) Low reliability; (:) Not available with gender disaggregation

Access to the labour market.

According to Eurostat data, all the selected countries with the exception of Italy present **higher employment differences between women with and without disabilities (disability gaps) compared to gender differences among people with disabilities** (see Table 5.4).

In **Italy**, instead, the gender gap (+16.6 p.p.) is higher, in absolute values, than the disability gap (-10.1 p.p.) when we consider people with difficulties in basic activities (definition 1). As highlighted by the Italian expert (p.9), a greater gender gap also emerges from a study on the social inclusion of people with functional limitations, impairments or severe chronic diseases conducted by the Italian National Institute of Statistics (ISTAT) in 2015 and based on the self-perceptions of respondents

The specific vulnerability of women with disability in employment is confirmed by national surveys in the other countries (Velche, 2001 and 2002). The **French** case study (p. 14) for example indicates the 1998–2002 French survey Disabilities, Incapacities, Dependencies (HID), led by the Insee and the Research Institute on Disability (IFRH).

In contrast, **UK** data recently released by the Office for National Statistics (ONS) show that women with disabilities are more likely (56 %) to be in employment than men in the same situation (44 %) (DWP & DoH, 2016b and 2016c). However, less than half (48 %) of people with disabilities are in employment compared to 80 % of the non-disabled population (ONS, 2016).

On average, women with disabilities present **lower unemployment rates** than men with disabilities, although the **gender gap is rather low** for both definitions of disability (+0.2 p.p. and +0.6 p.p.). In the case of the first definition, all countries show a positive gender gap (from +2.7 p.p. in the UK to +0.4 p.p. in Germany), meaning that men with disabilities are more likely to be unemployed than women. Only **France** shows a negative gap (-3.3 p.p.), with men with disabilities presenting a lower unemployment rate compared to women. With definition 2, Spain (-3.8 p.p.) and Poland (-0.7 p.p.) besides France (-2.7 p.p.), also have negative gender gaps.

The low gender gaps in unemployment rates are due to the fact that women with disabilities, as their counterparts without disabilities, are more likely to exit the labour market and be inactive rather than looking for a job. As a consequence, they are not counted among the unemployed, and show lower unemployment rates than men.

This is probably also due to cultural factors: as stated by Margaret Maruani (2004) 'inactivity is a socially acceptable status for women but it remains hardly imaginable for men'. In addition, as underlined in the **French** case (p. 16), inactive men are more liable to ask for an administrative recognition of their disability, because it makes their inactivity situation more acceptable (Bechrouri et al., 2016, p. 31). In **Italy**, according to a report by the Ministry of Labour and Social Policies¹⁴⁶, in the period 2012–2013 there has been a general decline in the registrations of people with disabilities in the local unemployment lists, which was higher among women than men (-7.7 % vs. -6.5 % respectively). This trend was even more pronounced when considering flow values.

¹⁴⁶ Ministero del Lavoro e delle Politiche Sociali, VII Relazione al Parlamento sullo stato di attuazione della Legge 12 marzo 1999, no 68 'Norme per il diritto al lavoro dei disabili'. 2012–2013, 2014 (<http://www.lavoro.gov.it/temi-e-priorita/disabilita-e-non-autosufficienza/focus-on/norme-sul-collocamento-al-lavoro-delle-persone-disabili/Pagine/Relazioni-al-Parlamento.aspx>)

The **disability gap**¹⁴⁷ is on average, and in most countries positive, meaning that women with basic activity difficulties have a higher chance of being unemployed compared to those without difficulties. The only exception is **Italy** (-1.8 p.p.). Using the second definition of disability, the unemployment rate for women limited in work is always higher than that of women without limitations: the highest gap was registered in **Germany** (+14.2 p.p.) while the lowest was in **Italy** (+0.6 p.p.).

Conversely, men tend to have lower **inactivity rates** than women in all country case studies, resulting in negative **gender gaps**¹⁴⁸ independently of the definition adopted (see Table 5.4): **Italy** (-18.7 p.p. and -16.4 p.p.) and **Spain** (-15.4 p.p. and -14.1 p.p.) show the highest gender gaps.

Concerning the disability gap, differences in inactivity rates between women with and without disabilities are always higher when we consider the impact of LHPAD with the exception of France, where the disability gap is positive under definition 1 and negative under definition 2. The highest disability gap is registered in Denmark (+32.1 p.p. and +38.2 p.p.).

In Chapter 3 it has been underlined that among inactive women an illness or disability is the main reason for not seeking employment. The case studies show that this can be connected to the existence of discrimination in the workplace and also depends on the type and/or severity of impairment (Berthoud, 2014), **suggesting the existence of a further level of discrimination, as certain types of disability (like mental impairment) seem to have a greater effect than other forms** (like some types of physical impairments) in reducing employment opportunities. As stressed by the UK expert (p. 18), women with mental health impairments are more at a labour market disadvantage than women with disabilities generally (TUC, 2015). According to the Trade Union Congress (TUC), the employment rate of women with disability whose primary impairment is mental illness was more than 9 p.p. lower than disabled women generally, while their activity rate is 7 p.p. lower (TUC, 2015 on LFS Q3, 2014 data). Looking to unemployment, women with disability whose primary impairment is mental illness face a 7 p.p. higher unemployment rate than women with disability generally, as well as a nearly 7 p.p. higher economic inactivity rate (TUC, 2015).

Unfortunately, a comparison across European countries cannot be made, as **the distinction between mental impairment and other disabilities is not possible with the available data**. In fact, in most Member States, there are no official information available about the labour market outcomes of people with disabilities disaggregated by sex and type of disability in the main statistical sources. The gender variable is not considered when interacting with type of disability or disability degree and, therefore, no specific analysis can be carried out on this topic.

¹⁴⁷ The disability gap is computed as the difference between the unemployment rate of women with and without disabilities. A negative gap indicates a disadvantaged position of women with disabilities, as they are more likely to be unemployed.

¹⁴⁸ The gender gap is computed as the inactivity rate of men with disabilities minus the inactivity rate of women with disabilities.

Table 4.5: Main Labour Market Access Indicators Disaggregated by Gender and by Disability Definition and Gender, and Disability Gaps (p.p.) by Disability Definition

INDICATOR		2011 – EU LFS AHM Definition 1						2011 – EU LFS AHM Definition 2					
		A Men with disabilities (%)	B Women with disabilities (%)	C Men without disabilities (%)	D Women without disabilities (%)	Gender Gap A-B (p.p.)	Disability Gap B-D (p.p.)	A Men with disabilities (%)	B Women with disabilities (%)	C Men without disabilities (%)	D Women without disabilities (%)	Gender Gap A-B (p.p.)	Disability Gap B-D (p.p.)
<i>Employment rate (15–64)</i>	EU28	51.3	43.9	73.0	60.7	7.4	-16.8	40.7	36.0	73.8	61.5	4.7	-25.5
	DK	49.5	44.5	79.8	76.3	5.0	-31.8	42.8	40.5	81.4	78.5	2.3	-38.0
	DE	55.3	47.4	77.7	66.7	7.9	-19.3	37.1	34.6	78.0	66.8	2.5	-32.2
	ES	50.8	39.3	66.3	54.5	11.5	-15.2	40.8	28.8	67.4	56.4	12.0	-27.6
	FR	60.8	52.7	71.1	60.9	8.1	-8.2	62.4	57.3	73.0	62.9	5.1	-5.6
	IT	54.7	38.1	69.6	48.2	16.6	-10.1	44.6	31.0	70.0	48.6	13.6	-17.6
	PL	36.8	31.3	71.1	56.6	5.5	-25.3	28.7	23.8	71.3	56.6	4.9	-32.8
UK	50.5	45.1	80.4	70.3	5.4	-25.2	37.6	34.7	81.1	70.8	2.9	-36.1	
<i>Unemployment rate (15–64)</i>	EU28	12.2	12.0	9.5	9.8	0.2	2.2	17.7	17.1	9.3	9.4	0.6	7.7
	DK	11.3	10.4	7.5	6.7	0.9	3.7	15.2	11.6	7.1	6.5	3.6	5.1
	DE	12.4	12.0	6.7	6.1	0.4	5.9	23.2	20.0	6.4	5.8	3.2	14.2
	ES	23.6	23.1	21.5	22.5	0.5	0.6	26.2	30.0	21.3	21.9	-3.8	8.1
	FR	10.5	13.8	8.2	9.3	-3.3	4.5	18.6	21.3	7.3	8.5	-2.7	12.8
	IT	8.6	7.5	7.0	9.3	1.1	-1.8	12.4	10.3	6.8	9.1	2.1	1.2
	PL	12.0	11.0	8.8	10.2	1.0	0.8	14.6	15.3	8.7	10.0	-0.7	5.3
UK	12.0	9.3	8.5	7.1	2.7	2.2	16.9	13.2	8.3	6.9	3.7	6.3	
<i>Inactivity rate (15–64)</i>	EU28	41.6	50.1	19.3	32.7	-8.5	17.3	50.6	56.6	18.6	32.1	-6.0	24.5
	DK	44.3	50.3	13.8	18.2	-6.1	32.1	49.5	54.2	12.4	16.1	-4.7	38.2
	DE	36.8	46.1	16.7	29.0	-9.2	17.1	51.7	56.8	16.6	29.1	-5.1	27.7
	ES	33.5	48.9	15.5	29.7	-15.4	19.3	44.7	58.8	14.3	27.8	-14.1	31.0
	FR	32.1	38.8	22.6	32.9	-6.7	6.0	23.4	27.1	21.2	31.3	-3.7	-4.2
	IT	40.1	58.8	25.2	46.9	-18.7	12.0	49.1	65.5	24.8	46.5	-16.4	18.9
	PL	58.2	64.8	22.1	37.0	-6.6	27.8	66.4	71.9	21.9	37.2	-5.5	34.8
UK	42.6	50.3	12.1	24.3	-7.7	26.0	54.8	60.1	11.6	23.9	-5.3	36.1	
<i>NEET rate (15–34)</i>	EU28	29.3	32.1	12.0	19.3	-2.8	12.8	39.6	41.1	11.8	19.1	-1.5	22.0
	DK	24.1	27.0	6.6	7.2	-2.9	19.8	29.6	30.0	5.8	6.3	-0.4	23.7
	DE	17.8	27.4	8.5	15.7	-9.6	11.7	35.7	51.0	8.3	15.4	-15.3	35.6
	ES	38.4	25.9	20.2	23.3	12.5	2.6	38.9	40.7	20.1	22.7	-1.8	18.0
	FR	19.1	29.2	9.8	17.2	-10.1	12.0	22.4 (*)	32.5	9.4	16.8	-10.1 (*)	15.7
	IT	36.5	44.4	16.6	27.2	-7.9	17.2	46.3	48.2	16.5	27.2	-1.9	21.0
	PL	46.2	45.2	10.0	19.8	1.0	25.4	51.6	50.5	9.9	19.8	1.1	30.7
UK	34.0	36.4	11.8	19.5	-2.4	16.9	45.2	47.9	11.2	18.8	-2.7	29.1	

Sources: LFS – AHM, 2011

Employment conditions.

In all the considered countries, when employed, **women with disabilities are more likely to work part-time** than both women with no difficulties and men with disabilities, independently of the definition adopted (see Table 5.5 below). In Spain, recent national data¹⁴⁹ confirm this result, showing a higher proportion of women with disabilities working on a part-time basis in 2015 (25.9 %) than men with disabilities (10 %). This, in some cases, depends on employment regulations: employees with disability are often entitled to work part-time, if this is necessary due to their individual handicap (as for example specified by the German Social Code).

Conversely, the share of **temporary contracts among female workers with a disability is lower** than among those without a disability. However, the opposite situation is observed in Denmark (+0.5 p.p.) when we consider difficulties in basic activities, and in Denmark (+3.8 p.p.), Italy (+1.1 p.p.) and the UK (+0.9 p.p.) when looking at a limitation in work because of an LHPAD. According to the Danish expert (p. 13) more women than men are having a flex job. This seems to indicate that women in this respect receive support to be on the labour market, at least to a certain degree. Flex jobs can be seen as a good instrument in paving the way for some attachment to the labour market.

A possible explanation of the lower incidence of temporary work among people with disabilities has been suggested by the Spanish expert (p.p.15-16). Job contracts for people with disabilities (both men and women) are more frequently open-ended than those for people without disabilities. However, according to the academic literature¹⁵⁰, jobs at sheltered work centres usually have low salaries and reduced opportunities for career development, resulting in pay gaps and higher risks of poverty.

Turning to the gender gap, on average **women with difficulties in basic activities are slightly more likely than men to be employed in temporary jobs**. This pattern is confirmed across all the selected Member States, but Poland (-4.4 p.p.). The gender gap slightly increases between women and men reporting a limitation in work. The gender gap is negative (fewer men with disability in temporary jobs than women) in DK, ES, FR, IT, and UK, while is positive (more disabled men in temporary jobs than women) in BE, DE and PL.

Women with difficulties in basic activities are more likely to work from home than men (see Table 5.4), except for Italy and Germany where there are almost no differences. When we consider disability in employment, Denmark also shows a higher share of men with disabilities compared to women working from home (+2.8 p.p.).

On the contrary, results concerning the disability gap¹⁵¹ are more puzzling: Denmark and Germany have slightly more women without difficulties in basic activities usually working at home, while the opposite holds true for the others (ES, FR, IT, PL, UK).

Some evidence about the **gender pay gap** in case of people with disabilities emerges from the Polish, Spanish and UK case studies. In Poland, men with disabilities earned a slightly higher income (EUR 314) than women with disabilities (EUR 248). In Spain, the gender pay gap for people with disabilities is lower (16.2 %) than in the case of the population without disabilities (24.3 %) but still the median salary of men with disabilities in 2015 is almost EUR 3 800 higher than for women (The Wage of Persons with

¹⁴⁹ Source: Employment of persons with disabilities (INE, 2015). See Spanish case study, p. 14.

¹⁵⁰ http://sid.usal.es/idocs/F8/FDO26330/Employment_report_II_Spain.pdf

¹⁵¹ The disability gap is computed as the share of women with disabilities usually working at home minus the share of women without disabilities usually working at home. A negative gap implies more women with disabilities working usually at home than those without.

Disabilities, INE, 2015). In UK, the Equality and Human Rights Commission (EHRC) with particular reference to gender pay gap has shown that, although the employment gap between disabled men and women has decreased in recent years, the pay gap between the two has widened.¹⁵²

¹⁵² Women and Work All Party Parliamentary Group (APPG) (2017). *Women Returners - Annual Report 2016*,

Table 4.6: EU28 and Case Study Countries – Main Employment Condition Indicators Disaggregated by Gender and by Disability Definition, and Gender and Disability Gaps (p.p.) by Disability Definition

INDICATOR		2011 – EU LFS AHM Definition 1						2011 – EU LFS AHM Definition 2					
		A Men with disabilities (%)	B Women with disabilities (%)	C Men without disabilities (%)	D Women without disabilities (%)	Gender Gap A-B (p.p.)	Disability Gap B-D (p.p.)	A Men with disabilities (%)	B Women with disabilities (%)	C Men without disabilities (%)	D Women without disabilities (%)	Gender Gap A-B (p.p.)	Disability Gap B-D (p.p.)
<i>Part-time employment share (15–64)</i>	EU28	13.3	38.6	7.4	30.3	-25.3	8.3	19.4	45.8	7.2	29.8	-26.4	16.0
	DK	22.2	50.0	13.6	36.4	-27.8	13.6	26.5	52.9	13.3	35.9	-26.4	17.0
	DE	15.2	51.5	7.5	45.1	-36.2	6.4	26.5	63.5	7.5	45.1	-37.0	18.4
	ES	5.6	27.9	6.4	24.5	-22.3	3.4	7.7	31.6	6.3	24.3	-23.9	7.4
	FR	9.3	37.5	5.8	28.9	-28.3	8.7	12.8	48.4	5.8	28.5	-35.6	19.9
	IT	9.0	30.1	5.2	29.7	-21.2	0.4	13.7	33.4	5.1	29.5	-19.7	3.9
	UK	14.5	18.0	4.0	9.7	-3.4	8.3	20.4	25.0	4.0	9.6	-4.6	15.4
<i>Temporary employment share (15–64)</i>	EU28	9.1	10.2	10.8	12.8	-1.1	-2.6	10.3	11.8	10.7	12.5	-1.6	-0.7
	DK	8.0	9.7	7.6	9.1	-1.6	0.5	8.6	12.6	7.6	8.7	-4.0	3.8
	DE	10.5	11.6	12.8	13.4	-1.0	-1.8	13.9	13.0	12.9	13.3	0.9	-0.3
	ES	13.5	20.1	20.0	23.7	-6.7	-3.6	12.1	20.4	20.0	23.7	-8.3	-3.3
	FR	10.3	10.4	11.5	14.8	-0.2	-4.4	11.7	12.2	11.3	14.1	-0.5	-1.9
	IT	6.5	10.9	9.1	12.4	-4.4	-1.6	7.3	13.3	9.0	12.2	-6.0	1.1
	UK	20.1	17.1	20.6	21.5	3.0	-4.4	22.8	18.4	20.4	21.3	4.3	-2.8
<i>Share of people usually working from home (15–64)</i>	EU28	6.2	7.6	4.8	5.4	-1.4	2.3	6.9	8.0	4.8	5.5	-1.2	2.6
	DK	9.8	10.3	12.3	10.9	-0.5	-0.6	12.5	9.6	12.0	11.0	2.8	-1.4
	DE	3.4	3.4	3.2	4.0	0.0	-0.6	(:)	(:)	3.1	3.8	(:)	(:)
	ES	4.4	5.3	3.8	4.0	-0.9	1.3	4.5	8.2	3.8	3.9	-3.6	4.3
	FR	11.2	13.7	10.0	13.4	-2.5	0.3	12.0	12.3	10.0	13.8	-0.3	-1.4
	IT	3.7	3.5	3.1	2.9	0.2	0.6	4.6	4.4	3.1	2.9	0.1	1.5
	UK	6.1	7.4	4.3	4.9	-1.4	2.6	6.6	9.2	4.3	4.9	-2.6	4.3
	UK	3.2	5.3	2.9	4.0	-2.1	1.4	3.2	7.2	2.9	3.9	-4.0	3.3

Sources: LFS – AHM, 2011. Notes: (*) Low reliability; (:) Not available with gender disaggregation.

Poverty and income. EU-SILC data show that **generally income, poverty and living conditions of women with an activity limitation are worse than both those of their male counterparts and women with no such limitation.** Among the considered countries, France (-2.9 p.p.) and the UK (-2.8 p.p.) show the highest gender gaps, while Germany (+31.8 p.p.) the highest disability gap. The case of Denmark, which shows a positive gender gap and a negative disability gap, is unusual.

Comparing the disability gaps of the risk-of-poverty rate before and after social transfers, confirms that **social benefits, allowances and pensions are very important measures to reduce the risk of poverty for people with activity limitations.** Also, the gender gap would have been higher without social transfers: except for Denmark, in all the selected countries, women with activity limitation are more at risk of poverty before social transfers than men.

However, there are **gender differences to be considered in relation to benefits received.** The Danish country expert underlines (p.13) that in Denmark more women than men are either on early retirement pension or have a flex job, indicating – in the view that flex jobs and early retirement pensions can and might be possible benefits for people with disabilities – that women receive more support than men to be on the labour market. In Spain, according to the National expert (p.17), there are also gender differences in relation to income from contributory state pensions¹⁵³: 70 % of the beneficiaries with disabilities are men (Huete, 2013). Average amount perceived from contributory state pensions related to a permanent disability situation is EUR 927.76 (EUR 990.30 received by men and only EUR 812.11 by women) while non-contributory is EUR 396.44 (Jimenez and Huete, 2015). Moreover, the share of female wage earners with disabilities who make social security contributions with a specific disability contract (23.8 %) is lower than the share of male wage earners with specific disability contracts (32.4 %) ¹⁵⁴ and in 2015, only 59.3 % of women with disabilities received any kind of benefit. This percentage reached 72.6 % in the men's case (Employment of persons with disabilities survey, 2015).

There are also side effects of an extensive use of social benefits, including disability benefits. As stressed by the Polish expert (p. 27), benefit and pension systems may discourage or prevent people with disability to be active in the labour market, especially in the case of women who – because of fear of losing social benefits and awareness of their low chances in the labour market – often decide not to work. The costs of disability-induced economic inactivity have been of particular concern also to UK policymakers (Work and Pensions Committee, 2017; Jones and Wass, 2013; Berthoud, 2011), driven by extensive and negative coverage in the media of those on benefits (p. 11).

Having a job appears to reduce the gender gap in the share of people with activity limitation at risk of poverty, while disability gaps persist. However, differences in working condition and wages often translate in higher risk of poverty, even for those employed.

As has been pointed out in the UK case (p.p. 16-17), 'despite qualifications, disabled women have lower participation rates in higher skilled jobs and work fewer hours than both non-disabled women and disabled men. As a result, women with disabilities have both lower earnings and fewer opportunities to progress up the career ladder' (APPG, 2017). A number of reasons, including **multiple social and institutional barriers, count for the disabled women's rather more limited career options** (Shaw Trust,

¹⁵³ Contributory pensions are related to previous participation in the labour market and, usually, the amount perceived by the beneficiary is higher than in other type of pensions.

¹⁵⁴ The percentage of employed women who make social security contributions, and who have reductions or discounts in the contribution quotas (23.9%) is lower than the percentage of men (32.6%) in the same situation.

2017; APPG, 2017). For example, as shown in a recent report, ‘there are gender roles, and socio-institutional stereotypes restrict the range of jobs open to women with disabilities. In addition, work experience and training opportunities for women with disabilities are limited when compared to those offered to their peers without disabilities’ (Shaw Trust, 2017; APPG, 2017). In Spain, according to the Wages of Persons with Disabilities Survey (INE, 2015) and in comparison with women without disabilities, women with disabilities in Spain have wages that are 12.1 % lower. In turn, the wages for men with disabilities are 20.5 % lower than those of men without disabilities. In Poland, according to the 2011 Social Diagnosis, the average net income of people with disabilities (EUR 298) was considerably lower than that for non-disabled people (EUR 400), irrespective of their gender. **Disability has a strong impact on people’s income, in contrast to gender, which – among people with disabilities – has no such an influence.** In the UK, the Equality and Human Rights Commission (EHRC, 2010) has shown that, compared to non-disabled men and women, the pay gap for disabled men is 11% and for disabled women is 22%.¹⁵⁵ Moreover, ‘taking into account their other characteristics, including qualification levels, the pay penalty experienced by disabled men falls a little, compared with their pay gap, to 8% while that of women increases to 31%’.¹⁵⁶

Table 4.7: EU28 and Case Study Countries – Main Poverty and Income Indicators Disaggregated by Gender, and Gender and Disability Gaps (p.p.)

INDICATOR		EU-SILC (2014)					
		Some and severe disability (%)		None (%)		Gaps (p.p.)	
		A-Men	B -Women	C -Men	D -Women	Gender gaps A-B	Disability gaps B-D
<i>At-risk-of-poverty and social exclusion rate (16 and over)</i>	EU28	28.8	31.0	20.4	22.4	-2.2	8.6
	DK	26.3	25.7	15.2	16.3	0.6	9.4
	DE	25.8	29.8	14.2	17.8	-4.0	12.0
	ES	31.9	30.6	27.3	27.0	1.3	3.6
	FR	21.5	25.7	14.9	17.0	-4.2	8.7
	IT	28.6	31.0	25.2	28.1	-2.4	2.9
	PL	30.0	30.7	21.7	21.9	-0.7	8.8
	UK	32.0	33.9	18.1	21.0	-1.9	12.9
<i>At-risk-of-poverty rate (16 and over)</i>	EU28	18.8	20.3	14.7	15.9	-1.5	4.4
	DK	17.0	11.3	10.8	13.1	5.7	-1.8
	DE	21.4	23.7	11.9	14.3	-2.3	9.4
	ES	20.8	21.0	20.9	20.7	-0.2	0.3
	FR	13.6	16.5	10.6	12.2	-2.9	4.3
	IT	17.8 (p)	20.0 (p)	17.3 (p)	19.4 (p)	-2.2 (p)	0.6 (p)
	PL	18.3	18.2	15.4	15.0	0.1	3.2
	UK	20.4	23.2	13.9	15.3	-2.8	7.9
<i>Before social transfers risk-of-poverty rate (16 and over)</i>	EU28	67.4	70.2	36.1	39.9	-2.8	30.3
	DK	62.4	60.7	37.3	41.1	1.7	19.6
	DE	66.4	69.4	31.1	37.6	-3.0	31.8
	ES	69.1	70.8	41.8	43.0	-1.7	27.8
	FR	65.4	71.1	37.7	40.7	-5.7	30.4
	IT	65.7 (p)	71.0 (p)	37.4 (p)	40.7 (p)	-5.3 (p)	30.3 (p)
	PL	66.8	70.0	36.6	39.5	-3.2	30.5
	UK	72.3	72.6	32.0	38.3	-0.3	34.3
<i>Severe material deprivation</i>	EU28	11.5	12.6	7.3	7.4	-1.1	5.2
	DK	7.5	6.2	2.3	1.4	1.3	4.8
	DE	7.6	8.1	2.6	3.0	-0.5	5.1

¹⁵⁵ Sayce, L. (2011). *Getting in, staying in and getting on: Disability employment support fit for the future, A Review to Government*, June 2011, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/49779/sayce-report.pdf
Papworth Trust, (2016). *Disability in the United Kingdom 2016 – Facts and Figures*, <http://www.papworthtrust.org.uk/sites/default/files/Disability%20Facts%20and%20Figures%202016.pdf>
TUC, 2015; stakeholder interviews

¹⁵⁶ Equality and Human Rights Commission (EHRC), (2010). *How fair is Britain*. Triennial Review 2010, https://www.equalityhumanrights.com/sites/default/files/how_fair_is_britain_-_complete_report.pdf

<i>rate (16 and over)</i>	ES	8.8	9.4	5.8	5.8	-0.6	3.6
	FR	6.1	8.2	3.5	4.0	-2.1	4.2
	IT	14.1	14.5	10.0	9.8	-0.4	4.7
	PL	15.3	16.3	8.8	8.1	-1.0	8.2
	UK	10.9	11.8	5.2	5.3	-0.9	6.5
<i>Share of people (under 60) living in households with very low work intensity</i>	EU28	25.2	24.9	8.0	9.3	0.3	15.6
	DK	27.1	26.8	8.8	8.4	0.3	18.4
	DE	23.3	22.3	5.2	7.2	1.0	15.1
	ES	34.7	33.7	15.3	15.3	1.0	18.4
	FR	20.0	25.2	6.8	8.2	-5.2	17.0
	IT	19.3 (p)	19.7 (p)	10.6 (p)	12.4	-0.4 (p)	7.3 (p)
	PL	21.3	20.2	5.4	6.4	1.1	13.8
	UK	32.7	32.1	6.9	8.2	0.6	23.9
<i>In-work at-risk-of-poverty rate (18 and over)</i>	EU28	12.1	12.2	9.6	8.5	-0.1	3.7
	DK	9.4	7.0	3.8	4.9	2.4	2.1
	DE	11.2	14.9	8.0	9.6	-3.7	5.3
	ES	16.2	15.7	12.5	11.5	0.5	4.2
	FR	11.1	11.4	7.7	7.1	-0.3	4.3
	IT	13.8 (p)	9.4 (p)	11.2 (p)	10.4 (p)	4.4 (p)	-1.0 (p)
	PL	12.8	13.4	11.5	8.8	-0.6	4.6
	UK	12.5	12.4	8.8	7.3	0.1	5.1
<i>Share of people (16 and over) unable to face unexpected financial demands</i>	EU28	43.7	47.7	33.5	36.2	-4.0	11.5
	DK	34.1	39.5	22.7	25.3	-5.4	14.2
	DE	37.7	40.3	26.2	30.3	-2.6	10.0
	ES	48.9	53.2	39.2	39.2	-4.3	14.0
	FR	33.7	41.1	28.7	30.8	-7.4	10.3
	IT	43.2 (p)	46.9 (p)	33.9 (p)	35.6 (p)	-3.7 (p)	11.3 (p)
	PL	54.2	59.9	44.4	46.0	-5.7	13.9
	UK	46.5	48.6	30.4	35.0	-2.1	13.6
<i>Share of people (16 and over) in arrears (mortgage or rent, utility bills or hire purchase)</i>	EU28	13.1	13.3	11.4	11.4	-0.2	1.9
	DK	12.7	13.1	5.8	4.8	-0.4	8.3
	DE	5.9	6.0	5.0	4.3	-0.1	1.7
	ES	14.3	13.6	10.8	10.9	0.7	2.7
	FR	10.0	10.4	7.9	8.3	-0.4	2.1
	IT	15.5 (p)	14.3 (p)	12.6 (p)	12.4 (p)	1.2 (p)	1.9 (p)
	PL	17.5	16.6	14.0	13.2	0.9	3.4
	UK	12.9	13.6	7.6	8.3	-0.7	5.3

Source: EU-SILC, 2014. Notes: (p) Provisional

5.3. The national legal and policy framework on disability and employment in a gender perspective

The recent move towards a greater attention to the multiple discrimination experienced by women with disabilities, is slowly changing the legislative and policy frameworks in some of the considered countries, while the majority does not address the multiple discrimination faced by women with disabilities (see Table 1 and 2 in Annex A3 for details).

Among the considered countries, **Germany, Spain and Italy** show a greater, although still partial, attention in their legal and policy frameworks to the specific conditions of women with disabilities compared to the other countries. However, public policies towards persons in a situation of disability have not fully considered the gender dimension in their actions.

In **Germany**, generally, the legislation in place does take into consideration both gender and disability, and from a formal point of view, attention to multiple discrimination is formalised in laws and acts (p.p. 9-10). However, such characteristics tend to be treated separately.

For example, the **General Act on Equal Treatment (AGG** as the German acronym), in force since 18 August 2006, incorporates four EU anti-discrimination directives into German law and governs the claims and legal consequences in the case of discrimination, both in the field of work and in the sphere of civil law. This act foresees the protection of people who have been affected by multiple discrimination, thus it is potentially helpful for women with disabilities who can be discriminated twice on the grounds of their disability and on the grounds of their sex. However, statistics on the number of disabled women

who have made use of these rights are not publicly available. Notwithstanding this, the legislature has **recognised the need for action** because the reasons for discrimination are not always clear or easy to distinguish from each other. The **Act on Equal Opportunities for People with Disabilities** (last updated 19 December 2007) presents a specific Article 2 on disabled women. This explicitly states that the **special needs of disabled women** need to be taken into account through special measures to remove any existing disadvantages in order to promote equality. Also, within the **National Action Plans to Implement the UN Convention on the Rights of Persons with Disabilities** (NAP 1, adopted in 2011, NAP 2.0 adopted in 2016), **gender mainstreaming is formally considered as a cross-cutting issue** and women have been ‘reserved’ a specific attention. The First National Action Plan (NAP 1.0) included a separate field of action in order to take account of the special situation of women and girls with disability. The objective of the Second National Action Plan (NAP 2.0) is to improve and strengthen the rights of women with disabilities, with a focus on political representation and gender-based violence. Conversely, in the National Action Plan on Business and Human Rights adopted in 2016 the issue of multiple discrimination is not considered, albeit the plan mentions people with disabilities among vulnerable groups and advocates the need to increase their economic independence. Finally, although without a specific gender perspective, the Federal Employment Agency runs local job centres, which provide case management for people who are difficult to place (including people with disabilities and the chronically ill). In addition, the integration offices (Integrationsämter) – which are public authorities – aim to improve the labour market participation of persons with severe disabilities. Cases dealt with by these offices show differences both in the number of men and women assisted and their evolution between 2005 and 2015: the number of men with disabilities that have been assisted increased from 51 077 in 2005 to 70 959 in 2015 (an increase of 38.9%), while numbers of women increased from 21 617 in 2005 to 32 011 in 2015 (an increase of 48%). However, there is **no employment programme or initiative aimed specifically at disabled women, or including a gender perspective**. Key government employment priorities are meant to increase the labour market participation of women in general, with no disaggregation according to other variables, such as the presence or not of a disability status.

In Spain, the concept of multiple discrimination in relation to women with disabilities as well as **the gender perspective have recently been included in the legislation related to disability**. Multiple discrimination is among the objectives specifically addressed by the **Action Plan for the Spanish Strategy on Disability 2014–2020** and the **Equal Opportunities Strategic Plan 2014–2016**. Also the **Action Plan on Equal Opportunities Between Men and Women in the Information Society 2014–2017** and the **National Plan for the Promotion of Women in Rural Areas 2015–2018** take into account the situation of women with disabilities as a vulnerable group that needs specific attention and establish some actions directed to them. However, according to the Spanish expert, regulations on disability, employment and gender address intersectionality only partially, and the measures related to disability and employment from a gender perspective are often scattered across various regulations and laws addressing either people with disabilities; or gender equality; or employment and social inclusion. There is not a national strategy focusing on the specific situation of women with disabilities in the labour market and the majority of the policies and measures regarding access to employment for women with disabilities are too generalist. In addition, it is difficult to determine the impact of these measures as they are scattered in several laws and plans and, often, they are not evaluated.

The **Italian legal framework** on disability and employment supports the work inclusion of people with disabilities without provisions directly aimed at supporting women’s access to

the labour market and protecting their working conditions (Law no 68 of 12 March 1999; Law no 104 of 5 February, 1992). However, the national law implementing the Directive 2000/78/CE (D.lgs.216/03) that reinforced the anti-discrimination prohibition in the labour field, **recognised indirectly the double discrimination for women with disabilities** underlining the opportunity of adopting *'a perspective that takes into account the different impacts that the same forms of discrimination may have on women and men'* (Article 1). **The Italian legal framework on disability and employment still features an overall neutral approach without provisions directly aimed at women with disabilities** (Law no 68 of 12 March 1999; Law no 104 of 5 February 1992). Only two legislative proposals (no 760 of 6 May 2008 and 26 January 2012), still awaiting discussion in parliament, are specifically aimed at protecting women workers with disabilities through affirmative actions to improve the women's employment situation (e.g. tax and contribution relief for employers who hire disabled women, specific funds for training, free transport services to reach the workplace).

The Italian policy framework also shows a lack of specific attention to the intersection between disability and gender, and there are no mechanisms providing for priority inclusion and/or economic measures in favour of women with disabilities. So far, there is no effective integration of a gender perspective in policies for disability and, at the same time, gender policies do not take into account the specific situation of women with disabilities. Only very recently has the need to adopt a gender perspective both in the policies and in all community services been recognised in policy documents. In particular, the second **Biennial Action Plan for the promotion of the rights and the integration of people with disabilities**, adopted on 18 October 2016, recalls art. 6 of the UN Convention referring to the need *'to reduce all forms of additional inequality and among these [...] ones referring to gender' and to adopt a gender perspective 'both in the preparation of policies and in all services for community'* (action line 2). Some measures supporting the employment of people with disabilities could potentially be declined in a gender perspective. One is the employment services targeted to people with disabilities, introduced by Law 68/99. With regard to this measure, in the period 2012–2013 both the number of people with disabilities listed in the employment public services and the numbers of recruitments declined were more for women than for men. Another potentially important initiative is the National Observatory on the Status of People with Disabilities and its working groups. In addition, the First and the Second Biennial Action Plans for the Promotion of the Rights and the Integration of People with Disabilities, adopted in in 2013 and in 2016 respectively, outline the set of interventions to be carried out in order to:

- promote non-discrimination at work (i.e. the Charter for Equality of Opportunity and Equality at Work of 2009)
- ensure equal opportunities in public administrations (a committee to guarantee equal opportunities, enhance the welfare of workers and contrast discrimination was established by Law no. 183/2010)
- refinance the fund for the right to employment of the disabled (by the financial Law 190/2014)
- activate in 2017 a fund for the rehabilitation and integration of workers with disabilities to guarantee and facilitate the working continuity of injured workers and of workers affected by occupational disease.

In **France**, according to the country expert, the main pillar of the legal framework regarding the education, social protection and employment of disabled workers (law of 11 February 2005), does not address the multiple discrimination issue nor the intersection between gender and disability.

In the same way, as stated in the **2016 report of the Defender of Rights** (Bechrouri et al., 2016)¹⁵⁷, ‘currently, public policies towards persons in a situation of disability have not taken the gender dimension into account in their actions’. The French policy framework mostly relies on the obligation to employ disabled workers, on protected employment (*Etablissements et services d’aide par le travail, Esat*) and adapted workplaces (*Entreprises adaptées, EA*), as well as on active labour market programmes (e.g. subsidised contracts of the non-market sector, apprenticeship contracts, professionalisation contracts; dedicated integration measures). People with disabilities may also benefit from dedicated social entitlements, whether employed (in low-paid jobs) or not.

Nevertheless, none of these policies specifically addresses multiple discrimination. For example, as underlined by the French expert, women benefit less than men from the obligation to employ disabled workers (*Obligation d’emploi des travailleurs handicapés, OETH*). Moreover, existing benefits do not fully compensate for the income and career penalties due to employment withdrawal (either totally or partially) to care for their children (or dependent relatives), that affect women (with and without disabilities) more than men.

The cited **2016 Report of the Defender of Rights** is the first attempt to put the issue of multiple discrimination into the public debate. **The Report underlines the specificity of the so-called intersectional discrimination that women with disabilities face.** (This is when ‘discrimination does not simply consist of the addition of two sources of discrimination’ but where synergy effects result in a ‘qualitatively different’ kind of discrimination¹⁵⁸.) It illustrates the crucial role of gender stereotypes affecting women with disabilities as well. This report also stresses the difficulties in relying on a multiple discrimination approach (whether cumulative or intersectional) in court judgements, as on several occasions the Defender of Rights had denounced multiple discrimination related to gender and disability, but the administrative judge did not follow the recommendations.

In the UK, the anti-discrimination framework does not address intersectional discrimination. However, different stakeholders confirmed the importance and necessity from a policy point of view of focusing on the disadvantage at the intersection of gender and disability, in relation to access to employment. In the UK, it is not possible to identify a programme specifically aimed at improving the access to employment for women with disabilities. In general policies aimed at reducing the disability employment gap in the UK have included both passive labour market policies such as supply side incentives in the form of changes to (lower) disability benefit levels, (more stringent) conditionality and (stricter) eligibility criteria and active labour market policies (ALMPs), such as the Work Programme and provision of personalised job search assistance. Moreover, despite the fact that the Green Paper *Work, Health and Disability: Improving Lives* published by the government in October 2016, makes no specific mention about improving the employment outcomes of women with disabilities, there is the hope that it can help more women with disabilities return to work.

In **Poland, the multiple discrimination issue is still a marginal topic** and, as already mentioned, it is not part of the public debate. **The topic of Women with disabilities is not specifically considered in policy documents.** Despite the fact that during the ratification of the UN Convention Poland worked on a series of domestic strategies, the problematic situation of persons with disabilities was only marginally covered, while the

¹⁵⁷ Defender of Rights, (2017), 10è barometre de la perception des discriminations dans l’emploi, March.

¹⁵⁸ This report besides the « intersectional discrimination » distinguishes other two form of discriminations: “sequential” multiple discrimination (“when a person suffers discrimination on different grounds on separate occasions”) and “additive” multidiscrimination (“when a person is discriminated against on the same occasion but in two different ways”).

specific issue of women with disabilities was not addressed at all. However, some strategies (e.g. **The Long-term National Development Strategy – DSRK – Poland 2030**; **The National Development Strategy 2020**; **The National Regional Development Strategy – KSRR**; **The Human Capital Development Strategy 2020 – SRKL**), although not exclusively devoted to people with disabilities, also concern people with disabilities with the aim to improve their opportunities in the labour market.

Turning to **Denmark**, no law on disability and employment seems to integrate a gender perspective, according to the Danish expert. According to the **Social Service Act**, support is given to people with permanent impairment of physical or mental function, without attention to gender differences. As for the policy framework, the universal welfare policy approach adopted in this country, focuses on how to ensure equal access to the labour market to all, with no measures specifically devoted to women with disabilities. According to the country expert, an exception was represented by **the 2009 information campaign on how to support women and children with disabilities in centres for women in crisis**. In general, independently of gender, support to people with disabilities is mainly delivered by municipalities. Based on the individual's needs and circumstances, municipalities decide the level of services, the content of, and the extent of support. Employment services for people with disabilities are integrated within the municipal job centres and provided to support the access to and the permanence into the labour market of people with disabilities, irrespective of their gender. In each municipality there is a **Council for people with disabilities** to provide advice to local decision makers. A strong focus is placed on supporting the accessibility and use of transport by people with disabilities¹⁵⁹. Finally, at central level, there is an option to make complains if a person feels they have been discriminated against due to disability.

5.4. The role of the European Structural and Investment Funds

Overall, in the seven considered countries, the ESI Funds are not much used to promote the integration of women with disabilities into employment. Nevertheless, people with disabilities and women are both among the most relevant targets of the thematic objectives 8 (Promoting sustainable and quality employment and supporting labour mobility) and 9 (Promoting social inclusion, combating poverty and any discrimination) of the programming period 2014–2020. Moreover, the issue of disability and gender is included among the horizontal principles (see Table 3 in Annex A3 for details).

The ESI Funds play only a very limited role in the **Danish** social inclusion system. In particular, a few projects in the 2007–2013 programming period and only one project – lasting from 2015 to 2018 – in the current programming period (2014–2020) has a specific focus on inclusion through employment. The more recent project was supposed to have 54 participants, but no information is provided on whether or not there is a specific gender approach. The mid-term evaluation shows a wide use of flex jobs in hiring people with disabilities (BDO, 2014).

In addition, in **France**, ESI Funds are not much used to promote the integration of women with disabilities into employment. Only a specific measure has been identified so far: an integration site (*Chantier d'insertion*) aiming at the integration into employment of vulnerable people, including those with disabilities. This integration site (created in 2013) is called *La Cistella de Marianne*, due to its commitment to gender equality. However, it is not possible to specify how many people with disabilities were employed by means of La Cistella de Marianne and how many of them were women.

¹⁵⁹ <https://www.borger.dk/handicap/Transport-for-personer-med-handicap>

In **Germany**, in the Operational Programme ESF Federal Germany 2014–2020, people with disability (and thus not even women with disability) are not considered within the primary target groups of the ESF at federal level. The situation with regard to the ERDF is similar, that is to say, people with disabilities (and in particular women with disabilities) are not considered as a specific target group. The OP Niedersachsen, which is the only Multifund German Operational Programme (ERDF/ESF), makes reference to specific measures to promote equal opportunities and to prevent discrimination based on sex, race or ethnic origin, religion or belief, disability, age or sexual orientation during the preparation, elaboration and implementation of the operational programme. However, no reference to multiple discrimination or to specific needs of women with disabilities are mentioned.

In **Italy**, in all the planning documents referring to the 2014–2020 programming period, the intersection of gender and disability is not explicitly mentioned. However, the application of a gender mainstreaming approach in all the planned actions makes possible to submit specific projects aimed at women's disabilities in the framework of all the measures devoted to people with disabilities. There is a lack of specific references about the intersection between women and disability, and explicitly addressing the issue of the double disadvantage of women with disabilities. This does not preclude the presentation (also in a gender perspective) of projects for the inclusion of people with disabilities and/or explicitly taking into account the different gender impact of the promoted actions, but such a shortcoming makes their presentation less likely.

In **Poland**, the question of women with disabilities is not explicitly considered among the areas of intervention related to Structural Funds spending defined by the Polish government. However, the issue of disability and gender is regulated within horizontal principles, written in the *Guidelines for the implementation of the principle of equal opportunities and non-discrimination*. These include accessibility for people with disabilities and the principle of equal opportunities for men and women within the framework of the EU funds for 2014–2020. The document imposes on Poland an obligation to prevent any forms of discrimination based on disability and gender.

In **Spain**, the detail of the budgets allocated to key plans addressing disability, gender or inequality is insufficient to identify, in many cases, the potentially beneficiary group (especially when speaking about intersectionality). However, in the programming period 2014–2020, there are the National Operational Programme for Social Inclusion and the Social Economy (POISES, in its Spanish acronym)¹⁶⁰, the National Operational Programme for Employment, Training and Education (POEFE) and the National Operational Programme Youth Employment (OPEJ). These mention gender mainstreaming, include people with disabilities among the vulnerable groups, and make some references to women with disabilities and their low participation in the labour market.

In the **UK**, there are a number of national programmes and initiatives aimed at people with disabilities – but not specifically at women with disabilities. EU funds such as the ESF have traditionally been used not for mainstream programmes as such, but either to complement or fill gaps in existing provisions. This can – under Investment Priority 8i – include support for very long-term unemployed or inactive people such as people with disabilities or health barriers (including mental health problems). It can pilot new approaches to improving access to employment, alongside mainstream provision, provide advice and support to help them move closer to the labour market so that they can then

¹⁶⁰ The implementation of POISES has not been evaluated yet, thus there is no information about the beneficiaries. POISES relies heavily on the work of five large Spanish NGOs, active in the fight against all forms of discrimination, poverty and social exclusion. One of these NGOs, the ONCE Foundation, is devoted to working with people with disabilities and implements POISES's funding as beneficiary.

access national programmes such as the Work Programme. There is also pre-employment support and training to ensure that people have the core work-related skills that employers require for intermediate labour market activity. Moreover, ESF – under Investment Priority 9i – funds activities designed to respond to the specific needs of participants with disabilities or health conditions, and women. Some participants will experience multiple disadvantages, for example women with a disability who may face barriers related to their age as well as disability. According to the government’s programme guidance, providers should take such multiple disadvantages into account when assessing the needs of participants when devising and delivering activities. They should also work with employers to help integrate people with disabilities into the workplace.

5.5. Examples of good practices

The country case studies provide concrete examples of gender mainstreaming in disability policy, as well as mainstreaming the situation of female workers with disabilities into national/regional policies and programmes on employment and vocational training.

Table 4 in Annex 3 summarised the examples provided by the country experts concerning examples of good practices¹⁶¹, including measures implemented both in the framework of public policies and measures implemented by private firms and NGOs. Unfortunately, according to the country experts, no formal evaluation of these practices has taken place.

The practices considered are mainly aiming at the **integration of women with disabilities in the labour market** and to guarantee their **protection against poverty, violence and social exclusion**. However, **in some cases (Denmark and the United Kingdom)**, the examples listed target the whole population of people with disability, **without any specific reference to women**. No measures to support self-employment and business start-ups among women with disabilities has been mentioned in the country case studies.

No example has been provided for Poland, as the expert stressed that even the public institutions (such as ministries), despite financial consequences, most often prefer not to hire people with disabilities (p. 25). Given that, it is also reasonable to not expect a ‘good’ behaviour from private entrepreneurs, when the public sector is not serving as a positive role model.

A number of different types of measures and practices can be identified. Nevertheless, it is important to stress that the practices described often comprise different approaches and different purposes, and cannot be clearly categorised. The measures and practices are:

- **Counselling measures targeted to women with disabilities**, such as vocational guidance and empowerment measures. For example, in **Spain** the **Social mentoring programme for women with disabilities** carried out accompanying actions in different areas such as education, training, employment or maternity, to help women to cope with their disability situation, to improve their social inclusion and to bring full autonomy in their lives. In **Italy**, the **Sportello Donna Disabile** activated in 2009 by the Equal Opportunities Commission in the Caserta Province provides counselling and support services targeted to women with disabilities, with the aim of supporting their empowerment and labour market inclusion. In **Germany**, the Federal Ministry of Labour and Social Affairs, as part of the National Action Plan to Implement the UN Convention on the Rights of Persons

¹⁶¹ For a complete description of these measures, including the responsible body for implementation, the main activities and the actors involved, see the national case studies and the good practice policy fiches in Annex 5.

with Disabilities, has launched the **Initiative Inklusion** to fully inform and counsel school students with disabilities about their career opportunities and to support them in the transition from education to employment (vocational orientation). The initiative is also expected to support the successful placement of severely disabled young people into workplace vocational training by creating new training places with public and private sector employers. However, this measure is not specifically targeted to women with disabilities.

- **Traineeship or employment support measures targeted** to women with disabilities. In **Spain**, an initiative for the **technological training for women with disabilities living in rural areas** has been carried out. This is to encourage and improve social and working skills of women with disabilities and their attitude towards employment through training and education in the use of ICT. Similarly, in **France**, the initiative **Digital house** has been created to provide disabled women digital education and training as well as job search support. Another good practice example, although not specifically targeted to women, is the **Journey to Employment (J2E) Job Clubs**, a peer support scheme in the **UK** which has been successfully piloted and is now being rolled out more widely to 71 Jobcentre Plus¹⁶² areas with the highest number of people receiving Employment and Support Allowance (ESA), to test the effectiveness of these clubs at supporting those with health conditions and disabilities closer or back into employment.
- **Measures supporting the workplace adaptation and the maintenance of the job**, such as the creation of a disability manager position in companies, training and coaching services, workplace flexibility measures (e.g. teleworking, smart working, job sharing, working time flexibility and/or part-time) to address the specific needs of workers with disabilities. In **Spain** for example, a pilot programme for the **Insertion and quality of working life of women with disabilities through the use of ICT Teledislab** has been carried out. The project consists of the identification of job positions suitable for telework for women with disabilities in a group of companies and organisations that collaborate in this project (SMEs are a priority target). In the **UK**, the **Work Choice** programme provides pre-employment advice and support, short- to medium-term in-work support to both the worker with disabilities and their employer. This is to enhance job retention and open-ended help and assistance to help personal progress in work and moving away from the support system. The type of support depends on the person's particular needs and can include: skills training and development; confidence building; interview coaching. Finally, in **Denmark**, **flex jobs** enable the individual to adapt the number of working hours to the ability to work. According to the Danish expert, the use of flex jobs has a positive overall economic impact: they ease the access of people with disabilities to the labour market and increase their chances to work, thus reducing the payment of social benefits.
- **Counselling measures targeted to companies**, such as organisational counselling, support to social responsibility actions, training for the company workforce, etc. One example is the **Spanish** employment network for women with physical and organic disabilities **REDEM+**, which was carried out to promote the professional skills of women with disabilities. Through this initiative, orientation and training were provided, together with the launch of a digital networking platform to facilitate the contact between beneficiaries and companies. In the **UK** there are a number of employer-led initiatives as well as individual employers, although not

¹⁶² The UK's public employment service (PES).

explicitly targeting women. For example, the not-for-profit **Business Disability Forum** (BDF) chairs a subgroup committed to promoting what works in retaining and developing employees with disabilities and long-term health conditions. The BDF is active in promoting good practice among employers, removing barriers to access to employment for both men and women with disabilities and developing/providing advice and guidance to companies so that they become 'disability-smart' organisations.

- **Measures to support NGOs and social cooperatives** providing sheltered jobs and/or on the job training facilitating the transition to employment in the private sector. In **Italy** two projects have been selected by the expert. The so-called Progetto per ricucire L'Orlando Furioso was launched in Turin in 2004 to support the employment for women with psychic and emotional difficulties. The project created a special space for occupational therapies and specific training measures for women in charge to the local health care administration. A small group of women started a dressmaking workshop. In Milan in 2012 the first social ironing enterprise (**Stireria sociale 'La vaporosa'**) was created, employing young women with disabilities.
- **Awareness-raising measures** supporting the employment and empowerment of women with disabilities, and firms' social responsibility in improving the employment of people with disabilities and specifically of women workers. For example, in **Germany** the project **Women's representativeness in institutions: an idea makes a school** strengthened the role of women's representatives in disability aid organisations as contact persons for all women's specific needs. The project supports the so-called Trainers Tandem courses, in which two women learn and work together, one with learning difficulties and a specialist woman with no learning difficulties. Among awareness-raising measures, **surveys, studies, reports and research projects on disability and gender** should also be taken into account, and several examples have been provided by the country experts. Among them, it is relevant to mention the project **RISEWISE – RISE Women with Disabilities in Social Engagement, promoted in Italy** by Genoa University. The project promotes the active participation of women with disabilities employed in the partner institutions through a temporary placement in the institutions of other countries. In this way, the project supports the exchange of inclusive practices and new career perspectives for the women involved.
- **Policies supporting the mainstreaming of disability and gender.** In **Spain**, the national **Action Plan for Women with Disabilities** (2007) adopts a dual strategy to face the double discrimination experienced by women with disabilities, establishing positive actions and transversal measures in the various spheres of action recorded in the plan. The plan considers employment as a specific action area that includes measures to be taken in three fields: occupational training, working for a company and self-employment. This action plan has been of use as a pedagogical and educational tool and has helped to implement some concrete projects. The second is the **I Plan for Integral Action for Women with Disabilities of Andalucía (2008–2013)** which addresses multiple discrimination of women with disabilities and pays explicit attention to the interactions between different strands of inequalities, including references to age, rural/urban location, educational background or financial resources, among others. The plan establishes a number of concrete measures to improve their situation regarding access to employment. Also, specific attention is dedicated to the intersection between gender, disability and employment, and gender-based violence. It is noteworthy that the action plan establishes follow-up mechanisms and indicators for achievement of the objectives.

5.6. Current and future policy challenges according to national stakeholders

The case studies present the current and future national policy challenges according to the perception of key stakeholders and experts interviewed. The 30 stakeholders and experts interviewed have been selected among the representatives of organisations and institutions involved in the fields of interest (labour and social policies, gender equality/equal opportunities). They also include representatives of the social partners (trade unions and employers' associations) and the main associations of people with disabilities and associations of women¹⁶³.

Overall, the interviews confirmed that the issue of multiple and/or double discrimination of women with disabilities has not been fully addressed by legislators and policymakers, and that it is part of the current debates only to a limited extent.

With reference to the issue of multiple discrimination of women with disabilities, the interviews stressed that the main challenges to be addressed are to:

- define strategies with a comprehensive approach;
- solve the issue of lack of information, especially with respect to statistical data;
- raise the social awareness of the problem of multiple discrimination;
- increase the political representation of people with disabilities, especially women.

In **Denmark**, interviewees confirmed that one central aspect related to this field is the lack of information and further, that the possible double discrimination of women only to a more limited extent is part of the ongoing issues and debates. It was also remarked that there are issues of discrimination both for women and for people with a disability on the labour market. However, even taking into account all the difficulties listed, it was argued that the current Danish system is very good at giving people with disabilities access to the labour market by means of various forms of support or compensation.

In **Germany**, although within National Action Plan to Implement the UN Convention on the Rights of Persons with Disabilities women received specific attention, this seems not to be focused on employment, but more on political representation and gender-based violence. In fact, in order to reach the goal of an equal participation for all, the government believes that a society recognition is necessary. This can be done effectively by the political representation of disabled women. Furthermore, there is a definite need for the issue of multiple discrimination to be better reflected (and explicitly articulated) in existing legislation.

In **Spain**, according to the stakeholders interviewed and the literature reviewed, there are several elements influencing the low participation of women with disabilities in the labour market. In this context, the main policy challenge is to design, formulate and implement a crossover strategy addressing the particular situation of women with disabilities in relation to employment with a comprehensive approach. Such a strategy should not consider women with disabilities as a homogeneous group: thus, multiple discrimination needs to be addressed not only as a result of adding the gender and disability factors. Also, it is important that these general strategies are not just a statement of purpose. In addition, public policies should: take different measures to respond to the different needs and situations; policies and measures need to establish follow-up instruments and indicators for impact evaluation in order to determine their effectiveness; and should imply the engagement and political commitment of the main stakeholders.

In **France**, according to national stakeholders, the employment of women with disabilities and the fight against multiple discrimination is becoming more visible, but is still not really

¹⁶³ For details and the roles of experts and stakeholders interviewed, see Table 5 in Annex A3.

on the agenda. This can be traced back to the existing difficulties in raising these questions in the public debate and putting the topic on the agenda, as well as that disabled women are not seen as a public priority. Evoking current and future policy challenges, the stakeholders interviewed insisted on the need to implement integrated policies, to better take into account multiple discrimination and to combat gender stereotypes that specifically affect disabled women. Also, the enforcement of disabled women's rights has been pointed out as a main challenge. Finally, the assessment and recognition of work arduousness is considered an important issue by several stakeholders.

In **Italy**, three challenges have been pointed out as relevant. The first one is to promote a greater awareness and attention to multiple discrimination among politicians, employers and citizens. This requires strong and well-targeted awareness-raising measures.

The second challenge relates to data availability: it is necessary to develop robust and up to date data disaggregated by sex on the socio-economic and labour market conditions of people with disabilities.

The third challenge relates to the governance and functioning of the placement service system created for people with disabilities with Law 68 in 1999. This requires a better knowledge of the multiple discrimination experienced by women with disabilities, and the adoption of a gender mainstreaming approach in employment policies for women with disabilities. This needs to address the labour market integration not only in an economic perspective, but also in a social inclusion one.

In **Poland**, during interviews, experts and stakeholders pointed out that in order to improve the situation of people with disabilities, the following issues should be addressed: raising social awareness over the rights and situation of people with disabilities; improving the accessibility of services and infrastructure for people with disabilities; introducing the issue of multiple discrimination into the public debate; and changing the benefit and pension system, so it will not discourage or prevent people with disability from being active in the labour market.

In the **UK**, both the existing literature and stakeholder interviews identified a number of challenges which have remained the same in the past years, or become even more entrenched. Women with disabilities have worse outcomes in the labour market not only when compared to women without disabilities and the general population, but also to disabled men in terms of employment, pay and working conditions. Moreover, according to the stakeholders (and evidence) the fundamental welfare reform of recent years which has been combined with stricter conditionality and lower benefits has also hit the disabled disproportionately hard. In this perspective, stakeholders stressed the need for more accurate quantitative and qualitative data for more efficient policy design which can address intersectionality. Finally, a number of stakeholders expressed concerns about the potential (negative) Brexit implications for people with disabilities, fearing that the proposed European Accessibility Act will not be transferred into UK law.

6. CONCLUSIONS AND POLICY RECOMMENDATIONS

6.1. The invisibility of women with disabilities

The analysis carried out in the previous sections shows that there is still insufficient attention to gender differences in the experience of disability and to the specific condition of women with disabilities. The **discrimination and marginalisation of women with disabilities has been largely neglected both in policymaking and in the disability and gender equality research and debate**. Even feminist movements and disability movements have not explicitly considered women with disabilities and have paid only a scant attention to the question.

Although some progress has been made in recent years, the situation faced by women with disabilities is still little understood or acknowledged, and their difficulties have been barely considered in the international and national legislation and policies. Gender and disability have been usually addressed separately when promoting equality and non discrimination policies. The **invisibility of women with disabilities and their specific needs** has perpetuated the multiple and intersecting forms of discrimination against women and girls with disabilities. Only in very recent years, the EU and national policymaking has displayed some attention to the identification and understanding of gender differences in disability conditions and the multiple discrimination suffered by women with disabilities.

As described in chapter 2 and in the case studies the **attention to the multiple discrimination women with disabilities are likely to suffer** remains essentially out of the public and political debate, and the intersectional approach remains mostly a field for researchers and academic debate.

Although limited, the gender disaggregated data available at EU and national level highlight the many forms of social and economic exclusion suffered by women of disabilities, while the analysis of the debate and policy developments shows the high levels of stigmatisation faced by women with disabilities, usually perceived as undesirable, asexual and dependent.

As described in chapter 3 of this report, existing data show that women with disabilities are discriminated in the labour market and in access to full citizenship rights in ways that are similar to the discrimination faced by women without disabilities and men with disabilities, but they also suffer additional discrimination due to the intersection of gender and disability. **Besides a high disability gap compared to women without disabilities, they also suffer a gender gap compared to men with disabilities** particularly when considering indicators of labour market participation, employment and working conditions, poverty risks and social exclusion.

Also the **health risks women face in their occupations are less visible and less likely to be recognised**, being often more related to psychological and stress driven disabilities rather than physical disabilities related to manual work. There is also little research and evidence on gender differences in the type of employment (including sheltered workshops) and in employment conditions (e.g. on rehabilitation, recruitment, promotion, access to training, remuneration, access to reasonable accommodation, occupational segregation, economic decision-making...), in access to social benefits, and to social and rehabilitation services.

Another issue emerging from the data analysis is the **lack of reliable and comparable gender disaggregated data** covering all aspects of disability and socio-economic conditions. Available data do not consent to address the additional disadvantages and

forms of exclusion faced by women with disabilities due for example to having multiple disabilities and different types of impairments; being refugees, migrants, asylum seekers or internally displaced; being institutionalised (in hospitals, residential institutions, juvenile or correctional facilities and prisons); being of different ethnic, religious and racial backgrounds.

The lack of a clear and homogeneous definition of disability makes it difficult to gather comparable data at the EU level. As shown in Chapter 3, and in greater detail in Annex 1, the available data sources provide a picture of the situation of people with disabilities aged 15+ who live in private households, while they do not consider people living in care institutions or children under 15 with disabilities. Data collection and comparison is also hampered by the fact that the definition of disability adopted varies across Member State and data sources, making a comparison across them almost impossible. These definitions reflect different models of disability and impairment, which also affect the strategies adopted for meeting the needs of people with disabilities.

Traditionally, two main models of disability are considered: the medical model, focusing on the individual's health condition, which can potentially impact on her/his quality of life; and the social model, which instead focuses on socially-created barriers, both physical or social/cultural, that do not accommodate the variety of abilities of the population. These two models take a different perspective of the interaction between the health condition of an individual and the environment, and are particularly important when considering gender differences in disability.

The social model is at the basis of the "evolving concept" of disability adopted by the UN Convention on the Rights of Persons with Disabilities (CRPD). According to the Convention, disability is human rights issue, as people are disabled by barriers existing in society, not just by their bodies. These barriers can be overcome, if governments, nongovernmental organizations, professionals and people with disabilities and their families work together. According to this concept persons with disabilities are *'those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others'*.¹⁶⁴

6.2. Policy developments

As described in chapters 4 and 5 of this report, the recognition of the specific conditions and needs of women with disabilities has slightly improved in recent years supporting a gradual change in the legislative and policy framework, especially at the EU level.

The adoption of the **UN Convention of the Rights of Persons with Disabilities (CRPD)** on 22 January 2011 represented a major driver for change in the EU and Member States legal systems, as the legally binding Convention requires the mainstreaming of disability rights throughout all EU policies and legislation. Similarly, gender equality jurisprudence developed under the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), which also underlined concerns about women and girls with disabilities, providing specific recommendations to be implemented.

Within this framework, the European Commission has put forward initiatives in several policy areas, with the **European Disability Strategy 2010-2020** meant to mainstream disability issues within all the relevant EU policies. In more recent years, the **proposal for a European Accessibility Act and a Directive on the accessibility of public websites** should support a better access of people with disabilities to services and

¹⁶⁴ United Nations - UN (2006) Convention on the Rights of Persons with Disabilities (CRPD) and Optional protocol, 13 December

infrastructures. Gender differences and women's needs are not specifically addressed, although these actions could have important indirect effects for women with disabilities. Similarly, the Strategic Engagement for Gender Equality 2016–2019, mentions '*the specific needs of groups facing multiple disadvantages, e.g. single parents and older, migrant, Roma and disabled women*' among its priorities, but it does not take specific steps forward. As underlined by the European Disability Forum, these gender equality actions do not mainstream the rights of women and girls with disabilities and specific actions to enhance their rights have not been sufficiently undertaken¹⁶⁵.

In a similar vein, the new **Cohesion policy framework for 2014-2020** explicitly indicate people with disabilities among the possible beneficiaries of specific actions. Support for people with disabilities is primarily addressed by thematic objective 9 on promoting social inclusion, combating poverty and discrimination. Member States and the Commission must also respect a number of horizontal principles when delivering investments under the ESI Funds, with Article 7 requiring that Member States take appropriate steps to *prevent discrimination based on disability, and to ensure accessibility for persons with disabilities* throughout the preparation and implementation of programmes. The promotion of *deinstitutionalisation and the transition to community-based services* emerges as one of the main areas of investment under the 2014-2020 Operational Programmes supporting people with disabilities, together with measures to improve the accessibility and quality of social and health services with the provision and development of services, social and health infrastructure investment and adaptation of housing. Other measures promoting the *employment and education* of people with disabilities include rehabilitation, social entrepreneurship and workplace adaptation. However, still little attention is paid to gender differences and the specific needs of women with disabilities, access to funding is still difficult for people with disabilities and their associations, and most measures lack in detail or sustainability. A new emphasis on the involvement of disability organisations in ESI Funds programming should ensure that the views of disabled people are taken into account and their fundamental rights respected. Yet, the quality of the participation of disability organisations in ESI Funds decision-making, is still too limited to make a difference.

At the **national level**, the case studies show that the concept of multiple discriminations remains essentially out of the public and political debate, and the intersectional approach remains mostly a field for researchers and academic debate. However **in some of the considered countries** (e.g. Germany, Spain, and Italy) the **multiple discrimination experienced by women with disabilities is slowly changing the legislative and policy framework** and is specifically mentioned among policies' aims. The move towards a gender perspective is very recent and in some cases has been translated in an increasing number of local and national associations of women with disabilities, or groups of women within the associations of people with disabilities. In Germany, networks of women with disabilities are now quite widespread and in 2007 a European Network of Women with Disabilities was founded in Berlin.

The change of perspective is also **changing the type of issues the debate is addressing** with respect to women and disability, with strong differences across the considered countries. While in some countries, as Poland, the focus is still on medical intervention and rehabilitation, in others it has moved to employment and training opportunities (e.g. Spain), to the gender pay gap (e.g. UK), to the intersection of gender and ethnicity (e.g. France), to vulnerability (e.g. Italy), to political representation, motherhood and sexuality, and gender based violence (e.g. Germany).

¹⁶⁵ www.edf-feph.org/sites/default/files/2015_03_04_edf_proposals_of_questions_for_list_of_issues_-_final.doc

The **examples of good practices** provided by the country experts are mainly aiming at the integration of women with disabilities in the labour market and to guarantee their protection against poverty, violence and social exclusion. However, in some cases (e.g. Denmark and United Kingdom), the examples listed target the whole population of people with disability, without any specific reference to women.

In order to reaffirm the importance of a full implementation of the UN Convention, in July 2016 the European Parliament stressed **the need for the EU institutions and the Member States to incorporate the perspective of women with disabilities into their policies and programmes on gender equality as well as a gender mainstreaming approach in their strategies on disability**. The European Union and Member States are recommended to develop affirmative actions addressed to disabled women as well a policy framework for participation of women with disabilities in the labour market.

6.3. Policy recommendations

As clearly stated by the UN Committee on the Rights of Persons with Disabilities in its comments to **article 6** of the CRPD of 2 September 2016 (CRPD/c/GC/3), governments should *'go beyond refraining from discriminatory actions, to adopting measures aiming at the development, advancement and empowerment of women and girls with disabilities and promotes measures to empower them, by recognizing these constituencies as distinct right holders, providing channels for voice and agency, raising their self-confidence and increasing their power and authority to take decisions in all areas affecting their lives.'*

The UN Committee and the stakeholders and experts interviewed in the case studies underline that the implementation of the Convention is still hampered by a number of challenges. The main ones relate to:

- The lack of strategies with a comprehensive approach
- The lack of social awareness on the problem of multiple discrimination
- The lack of research and information, especially with respect to statistical data
- The lack of political representation of people with disabilities, especially women.

These challenges ask for supporting a gender perspective in the following measures.

Awareness-raising measures (art. 8).

These measures should address compounded disability and gender stereotypes that can be particularly harmful: e.g. being burdensome to others, being vulnerable and/or victims, being inferior; being asexual, inactive, overactive, incapable, sexually perverse; etc.. An example is the failure of the justice system to hold the perpetrator of sexual violence against a woman with disability accountable based on stereotypical views about her sexuality or on her credibility as a witness.

Accessibility measures (art. 9).

The lack of consideration of gender and/or disability aspects in policies relating to the physical environment, transportation, information and communications, including ICT, and to other facilities and services open or provided to the public prevents women with disabilities from living independently and participating fully in all areas of life on an equal basis with others. This is specially relevant in their access to safe houses, support services and procedures providing protection from violence, abuse and exploitation or health care, particularly reproductive health care.

Measures supporting women with disabilities in living independently and being included in the community (Art. 19).

Cultural norms and patriarchal family values may also adversely affect the right of women with disabilities to choose their place of residence, and often oblige them to live in a particular living arrangement. Old age and impairment, separately or jointly, can increase their risk of institutionalization, and consequently the risk of being exposed to violence and abuse.

Measures supporting women with disabilities access to education (art. 24) and Employment (art. 27).

Gender and disability stereotypes enhance discriminatory attitudes, policies and practices in education and training, which increase absenteeism and dropping out of school, compared to women without disabilities. Concerning employment, besides general barriers which persons with disabilities face when trying to exercise their right to work, women with disabilities face specific barriers, including sexual harassment and unequal pay, and discriminatory attitudes dismissing their claims¹⁶⁶.

Social Protection (art. 28).

Poverty is both a compounding factor and the result of multiple discrimination. Women with disabilities, especially in old age, are more likely to be institutionalized and do not have equal access to social protection and poverty reduction programs.

Health and Rehabilitation measures (arts. 25 & 26).

Women with disabilities face barriers to accessing health and rehabilitation services; these include but are not limited to: lack of education and information on sexual and reproductive health and rights; physical barriers to gynaecological, obstetric and oncology services; attitudinal barriers to fertility and hormone treatments. In addition, physical and psychological rehabilitation service provision, including counselling for acts of gender-based violence, may not be accessible, inclusive, age or gender sensitive.

Participation in political and public life (art.29).

Women and girls with disabilities are disproportionately underrepresented in public decision-making. Due to power imbalances and multiple forms of discrimination, they have had fewer opportunities to establish or join organizations that can represent their needs as women, children and persons with disabilities.

To ensure the full implementation of article 6 of the Convention on the Rights of Persons with Disabilities, providing adequate resources, governments should **combat multiple discrimination** through inter alia:

- **Repealing discriminatory laws, policies and practices that restricts women with disabilities** from their effective and full participation in economic, social, and political and public life on an equal basis with others, including the right to form and join organizations and networks of women in general, and of women with disabilities.
- **Addressing all barriers that prevent or restrict the economic, social and political participation of women with disabilities** and ensuring that the views and opinion of women and girls with disabilities, through their representative

¹⁶⁶ A/HRC/20/5, para. 40 and A/67/227, para. 67.

organizations, are included in the design, implementation and monitoring of all programmes which have an impact on their lives.

- **The collection of data and information disaggregated by sex and the promotion of specific research on the situation of women with disabilities** in all areas related to them, in order to guide policy planning and provide adequate monitoring and evaluation systems on the gender differentiated impact of legislative and policy measures.

Besides combating multiple discrimination, appropriate measures should be implemented to ensure the **development, advancement and empowerment of women with disabilities** through:

- The **adoption of affirmative action measures for the development, advancement and empowerment of women with disabilities**. These measures should in particular address: access to justice, the elimination of violence, respect for home and the family, sexual health and reproductive rights, health, education, employment, and social protection. Public and private services and facilities used by women with disabilities should become fully accessible. This implies that women with disabilities should get support in the exercise of their rights and in taking decisions about their own lives. Public and private service providers should be trained in order to provide appropriate attention, support and assistance to women with disabilities.
- **The involvement of women with disabilities and their representative organisations** in the design, implementation, monitoring and evaluation of all policy areas related to them, and the establishment of consultation mechanisms to better inform the identification of the diverse barriers faced by women with disabilities for improved public policies and practices.
- **Support and promote of the creation of organizations and networks of women with disabilities** and the presence of women with disabilities in leadership roles in public decision-making bodies at all levels.

The recommendations provided in a 2009 study for the European Commission (Ecotec, 2009)¹⁶⁷ to comply with these indications are still applicable. **EU institutions** should revise both their disability and gender equality policies and:

- **Develop a comprehensive information and awareness-raising campaign** on the UN Convention to promote rights and combat prejudice and discrimination against disabled persons and women with disabilities in particular.
- **Adopt an 'ambitious' and women-friendly European Accessibility Act**, with accessible enforcement and complaint mechanisms, to ensure that people with disabilities have full and barrier-free access to products, infrastructures and services.
- **Enforce the implementation of EU legislation on accessible information and public websites** to facilitate access by people with disabilities and diffuse information on their rights and the legal instruments at their disposal to combat discrimination. These campaigns should target women with disabilities and their families, public authorities, companies, the media and organisations representing people with disabilities and women.

¹⁶⁷ Ecotec (2009), Study on the situation of women with disabilities in light of the UN Convention for the Rights of Persons with Disabilities (VC/2007/317). A Final Report for the DG Employment, Social Affairs and Equal Opportunities of the European Commission. Chapter 15.

- Explore the possibility of a **European Directive for the equal treatment of persons with disabilities** in all policy fields, and fully incorporating the gender dimension;
- **Support Member States in ensuring the right of disabled people to live independently and to be included in the community.** While community-based policies and services fall under the competence of the Member States, the European Structural Funds allow for funding de-institutionalization initiatives to establish the conditions for independent living. For the current programming period 2014-2020, the ESI Funds Regulations make explicit reference to the UN CRPD. The new legal framework obliges the Member States to report on how non-discrimination and accessibility for people with disabilities are implemented through the funds. The EU should continue to strongly promote the implementation of de-institutionalisation and strengthen the monitoring of the use of the Structural Funds in a gender perspective.
- **Guarantee a sufficient funding for measures supporting people with disabilities, and women in particular, in the Structural Funds post-2020,** in a context of increasing pressure on the EU's budget.
- **Support Member States in safeguarding the rights and fundamental freedoms of women with disabilities,** ensuring full legal capacity/equal recognition before the law as well as their participation in political and public life. The adoption of specific objectives and indicators addressing women with disabilities dimension within the social OMC could go in this direction, as well as supporting the Member States statistical capacity and gender oriented data collection.
- **Support and fund the development of a complete and up-to-date statistical system** with disaggregated data and indicators by sex, age and type and degree of impairment to support research and informed policy making, and to pave the way for the monitoring and evaluating of how effectively the Convention is being implemented. This requires the collection of reliable and accurate data sets in EU and national surveys on the basis of common definitions, concepts, standards and methodologies. There is therefore a need for a common and shared theoretical framework and definition of disability. The ICF framework could represent a starting point for a common definition of disability and is suitable for collecting data, measuring disability and providing useful information for policy purposes. A common approach to disability data collection as well as a wider integrated data system would ease international comparisons and allow to build a clearer picture of gender and disability, including a better understanding of the number of men and women living with a disability and their needs, their access to all mainstream policies, systems and services, and the nature of existing barriers to full participation in society.
- **Support research activity, as well as peer reviews and mutual learning activities** involving research institutions, national bodies with policy responsibility for issues related to women with disabilities, and civil society bodies at European and national level. These activities could support the dissemination of knowledge and good practices in approaches to women with disabilities. EU programmes, like the Rights, Equality and Citizenship 2014-2020 Programme, the Employment and social innovation (EaSI) Programme, ESI Funds and Horizon 2020, could support these research and learning activities.

- **Support the associations of women with disabilities** and involve them in the policy making consultation mechanisms.
- **Strengthen the EU institutions' internal bodies and mechanisms on disability and gender equality issues.** In this respect EU Institutions may consider: i) ensuring that the Disability High-Level Group addresses the intersectionality of gender and disability; ii) strengthening the Commission's inter-service working groups on disability; and iii) supporting capacity building within European institutions on issues relating to women with disabilities.

Similar recommendations apply to **Member States**. Member States should comply with the UNCRPD, by:

- **Increasing the representation and participation of women with disabilities** in decision-making, through consultation, training and awareness-raising measures.
- **Ensuring that statistics and data collected are disaggregated by gender.** EU Member States may consider: i) establishing an integrated data system comprising disability/functioning data disaggregated by gender in administrative and census and population surveys; ii) complementing quantitative data with qualitative information to be collected, analysed and used with the support of people with disabilities and their organizations.
- **Evaluating and reforming the legislative and policy frameworks** on disability and gender issues. The different impact of existing policies on women and men with disabilities should be assessed in order to derive indications for more effective measures. A **National Strategy for Women with Disabilities** could be planned and implemented, covering the full range of fields set out in the UN Convention. For what regards employment and social protection in particular, Member States should support women (and men) with disabilities in:
 - **access to the labour market** through measures aimed at ensuring a non-discriminating working environment. These measures should include i) the adaptation of workplaces and working conditions, ii) targeted active labour market measures, iii) support for flexible employment, and work-life balance and childcare commitments, iv) awareness-raising and training measures for employers, managers, co-workers and the social partners;
 - **access to social protection and social assistance services**, removing all the existing barriers and disincentives to the labour participation of women with disabilities or detrimental to their welfare;
 - **access to education and training**, by promoting the adaptation of training and education premises, supporting the balance between training and childcare commitments, and reducing education and training gender stereotypes;
 - **access to justice and protection from abuse** of women with disabilities, by incorporating the disability dimension into legal provisions, including those related to abuse in the workplace;
 - **access to health services** encompassing targeted measures to ensure the physical accessibility to services, awareness raising and training, women's rehabilitative and reproductive health services.

To conclude, although the multiple discrimination faced by women with disabilities is increasingly recognised in the debate and policymaking, the steps taken are still too modest and austerity measures risk the impediment of further developments. It is important that this issue be taken up by women and disability associations and in

academic research, in order to increase the social and political awareness on the multiple discrimination faced by women with disabilities and the need for targeted measures.

REFERENCES

- Academic Network of European Disability Experts (ANED) (2014), *“European comparative data on Europe 2020 & People with disabilities - Task 6: Comparative data and indicators”*, Final report prepared by Stefanos Grammenos from Centre for European Social and Economic Policy (CESEP ASBL) on behalf of the Academic Network of European Disability Experts (ANED)
- Advisory Committee on Equal Opportunities for Women and Men, *Opinion on gender equality in the cohesion policy 2014-2020*
http://ec.europa.eu/justice/gender-equality/files/opinions_advisory_committee/opinion_on_gender_equality_in_the_cohesion_policy_2014-2020_en.pdf
- Anker, R (1998), *Gender and Jobs, Sex Segregation of Occupations in the World*, Geneva: International Labour Office.
- Barhoumi M., Chabanon L. (2015), « [Emploi et chômage des personnes handicapées](#) », *Synthese.Stat*, Dares, n° 17, November.
- Bechrouri N., Benichou S., Blanchard R., Demangeon M., Levesque C. (2016) [L'emploi des femmes en situation de handicap. Analyse exploratoire sur les discriminations multiples](#), Rapport du Défenseur des droits November, 86 p.
- Begg, I., Draxler, J. and Mortensen, J. (2008), “Is Social Europe Fit for Globalisation? A study of the social impact of globalization in the European Union”. Brussels: European Commission, Centre for European Policy Studies.
- Beleza, M. L. (2003), *Discrimination against women with disabilities*, Council of Europe.
- Berthoud, R. (2014), *Diverse disability*, Institute for Social & Economic Research. No. 2014-17, April 2014,
<https://www.iser.essex.ac.uk/research/publications/working-papers/iser/2014-17.pdf>
- Berthoud, R., (2011). *Trends in the Employment of Disabled People in Britain*, Institute for Social and Economic Research (ISER) Working Paper No. 2011-03, January 2011, https://www.iser.essex.ac.uk/files/iser_working_papers/2011-03.pdf
- *Book IX of the Social Code – Rehabilitation and participation of persons with disabilities* of 19 June 2001 (Federal Law Gazette Part I p. 1046) in force since 1 July 2001, most recently amended by Art. 4 Para. 3 of the Act of 22 April 2005 (Federal Law Gazette Part I p. 1138)
- Burri, S. and Schiek, D. (2009), *Multiple discrimination in EU law, opportunities for legal responses to intersectional gender discrimination?*, European Network of Legal Experts in the Field of Gender Equality – European Commission.
- Centro de Estudos Sociais - CES (2013), Evaluation study of the integration of the gender perspective within structural funds during the programming period 2007–2013, 2013
http://www.ces.uc.pt/myces/UserFiles/livros/1097_Est%20IG%20FE%20-%20SUM%20EXEC%20Junho%202013%20EN.pdf
- Council of Europe, Recommendation of the Committee of Ministers to Member States on the protection and promotion of the rights of women and girls with disabilities, CM/Rec (2012)6, 13 June 2012, the 1145th meeting of the Ministers’ Deputies)
<http://www.refworld.org/pdfid/50697f522.pdf>

- Council of the European Union, Council Conclusions on *the follow-up to the European Year of People with Disabilities* (15206/03)C/03/354 - 15443/03 (Presse 354), 2549th Council meeting - Employment, Social Policy, Health and Consumer Affairs - Brussels, 1 and 2 December 2003, see:
http://europa.eu/rapid/press-release_PRES-02-354_en.htm
- Council of the European Union, Presidency conclusions, Brussels, 23/24 March 2006,
http://www.consilium.europa.eu/ueDocs/cms_Data/docs/pressData/en/ec/89013.pdf
- Council of the European Union, Council conclusions on the European Pact for gender equality for the period 2011 – 2020, 3073th Employment, Social Policy, Health and Consumer Affairs, Council meeting Brussels, 7 March 2011
http://www.consilium.europa.eu/uedocs/cms_data/docs/pressdata/en/lsa/119628.pdf
- Crenshaw, Kimberlé (1991) "Mapping the Margins: Intersectionality, Identity Politics, and Violence Against Women of Colour", *Stanford Law Review*, Vol. 43: 1241-1299
- Department for Work & Pensions (DWP) and Department of Health (DoH), (2016b). *Improving Lives - The Work, Health and Disability Green Paper - Technical Annex*,
<http://base-uk.org/sites/default/files/news/work-health-and-disability-green-paper-data-pack.pdf>
- Department for Work & Pensions (DWP) and Department of Health (DoH), (2016c). *Disability Green Paper Data Pack - Background Information and Methodology*,
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/564274/work-health-and-disability-green-paper-background-information-and-methodology.pdf
- Ebbinghaus, B. (2012) "Comparing welfare state regimes: Are typologies an ideal or realistic strategy?", ESPAnet Conference, Edinburgh, UK, September 6–8, 2012
- EC-DG Regio (2016), *The use of new provisions during the programming phase of the European Structural and Investment Funds*, edited by Heil Péter and Tétényi Tamás, European Union, May 2016.
http://ec.europa.eu/regional_policy/sources/policy/how/studies_integration/new_provision_progr_esif_report_en.pdf
- Ecotec (2009), *Study on the situation of women with disabilities in light of the UN Convention for the Rights of Persons with Disabilities* (VC/2007/317) A Final Report for the DG Employment, Social Affairs and Equal Opportunities of the European Commission, December 2009.
- Emerson, E. and S. Baines, (2011) "Health inequalities and people with learning disabilities in the UK", *Tizard Learning Disability Review*, Vol. 16 Iss: 1, pp.42 – 48
- Equality and Human Rights Commission (EHRC), (2010). *How fair is Britain*. Triennial Review 2010,
https://www.equalityhumanrights.com/sites/default/files/how_fair_is_britain_-_complete_report.pdf
- Esping-Andersen, G. (1990) *The three worlds of welfare capitalism*, New Jersey, Princeton University Press.
- European Commission (1996), *Communication of the Commission on equality of opportunity for people with disabilities*, COM (96)406 Final, Brussels 30.07.1996
<http://eur-lex.europa.eu/legal-content/EN/TXT/HTML/?uri=URISERV:c11412&from=RO>

- European Commission (2000), Communication Towards a barrier-free Europe for people with disabilities, COM (2000) 284 Final, Brussels 12.05.2000, <http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52000DC0284&from=LVN>
- European Commission (2003), Communication from the Commission to the Council and the European Parliament - Towards a United Nations legally binding instrument to promote and protect the rights and dignity of persons with disabilities, COM/2003/0016 Final Brussels 24.01.2003 <http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52003DC0016&from=EN>
- European Commission (2003), Communication from the Commission to the Council, the European Parliament, the European Economic and Social Committee and the Committee of the Regions - Equal opportunities for people with disabilities: A European Action Plan, COM(2003) 650 final, Brussels, 30.10.2003 <http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52003DC0650&from=EN>
- European Commission (2005), Proposal for a Regulation of the European Parliament and of the Council establishing a European Institute for Gender Equality, COM (2005) 81 http://eur-lex.europa.eu/procedure/EN/2005_17
- European Commission (2005), Communication from the Commission to the Council, the European Parliament, the European Economic and Social committee and the Committee of the Regions - Situation of disabled people in the enlarged European Union: the European Action Plan 2006-2007, COM/2005/0604 [http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=SPLIT_COM:2005:0604\(01\):FIN:EN:PDF](http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=SPLIT_COM:2005:0604(01):FIN:EN:PDF)
- European Commission (2007), Communication on situation of disabled people in the European Union: the European Action Plan 2008-2009, COM (2007) 738, <http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=COM:2007:0738>
- European Commission (2007), *Tackling Multiple Discrimination - Practices, policies and laws*, Luxembourg: Office for Official Publications of the European Communities
- European Commission (2008), Proposal for a Council Directive on implementing the principle of equal treatment between persons irrespective of religion or belief, disability, age or sexual orientation, COM/2008/0426 <http://eur-lex.europa.eu/LexUriServ/LexUriServ.do>
- European Commission (2009), *Study on the translation of Article 16 of Regulation (EC) No.1083/2006, on the promotion of gender equality, non-discrimination and accessibility for disabled persons, into cohesion policy programmes 2007–2013 co-financed by the ERDF and the Cohesion Fund*, 2009. http://ec.europa.eu/regional_policy/it/information/publications/evaluations/2009/study-on-the-translation-of-article-16-of-regulation-ec-n10832006-on-the-promotion-of-gender-equality-non-discrimination-and-accessibility-for-disabled-persons-into-cohesion-policy-programmes-2007-2013-co-financed-by-the-erdf-and-the-cohesion-fund
- European Commission (2010), Communication from the Commission, A Strengthened Commitment to Equality between Women and Men - A Women's Charter Declaration by the European Commission on the occasion of the 2010 International Women's Day

in commemoration of the 15th anniversary of the adoption of a Declaration and Platform for Action at the Beijing UN World Conference on Women and of the 30th anniversary of the UN Convention on the Elimination of All Forms of Discrimination against Women, COM(2010)78 final, Brussels, 5.3.2010

<http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=COM:2010:0078:FIN:EN:PDF>

- European Commission (2010), Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions, Strategy for equality between women and men 2010-2015, COM(2010) 491 final Brussels, 21.9.2010
<http://ec.europa.eu/transparency/regdoc/rep/1/2010/EN/1-2010-491-EN-F1-1.Pdf>
- European Commission (2010), Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions, European Disability Strategy 2010-2020: A Renewed Commitment to a Barrier-Free Europe, COM(2010) 636 final, Brussels, 15.11.2010
<http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=SEC:2010:1324:FIN:en:PDF>
- European Commission (2010), Commission Staff Working Document, Actions to implement the Strategy for Equality between Women and Men 2010-2015 accompanying the Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions Strategy for Equality between Women and Men 2010-2015, SEC (2010) 1079 final, Brussels, 21.9.2010
<http://eur-lex.europa.eu/legal-content>
- European Commission (2010), Commission staff working document *accompanying* the Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions - European Disability Strategy 2010-2020: A Renewed Commitment to a Barrier-Free Europe, Initial plan to implement the European Disability Strategy 2010-2020, List of Actions 2010-2015, SEC (2010) 1324 final,
<http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=SEC:2010:1324:FIN:en:PDF>
- European Commission (2011), Strategy for equality between women and men 2010-2015, Document drawn up on the basis of COM(2010) 491 final, SEC(2010) 1079 and SEC(2010) 1080, Luxembourg: Publications Office of the European Union
http://ec.europa.eu/justice/gender-equality/strategy_equality_women_men_en.pdf
- European Commission (2013), Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and The Committee of the Regions - Towards Social Investment for Growth and Cohesion – including implementing the European Social Fund 2014-2020, COM(2013) 83 final , Brussels, 20.2.2013
<http://ec.europa.eu/social/BlobServlet?docId=9761&langId=en>
- European Commission (2014), Guidance on Ex ante Conditionalities for the European Structural and Investment Funds - PART II", 13 February 2014
http://ec.europa.eu/regional_policy/sources/docgener/informat/2014/eac_guidance_e_sif_part2_en.pdf
- European Commission (2014), *Implementation Guidance 2014-2020 Mainstreaming of Gender Equality and Non-Discrimination Version 2*, 24 march 2014
http://ec.europa.eu/regional_policy/sources/docgener/informat/2014/implementation_gender_equality.pdf.

- European Commission (2014), Commission Staff Working Document, Report on the implementation of the UN Convention on the Rights of Persons with Disabilities (CRPD) by the European Union, SWD(2014) 182 final, Brussels 5.6.2014
http://ec.europa.eu/justice/discrimination/files/swd_2014_182_en.pdf
- European Commission (2015), Proposal for a directive of the European Parliament and of the council on the approximation of the laws, regulations and administrative provisions of the Member States as regards the accessibility requirements for products and services, COM (2015) 615 final Bruxelles, 2.12.2015
- <http://eur-lex.europa.eu/legal-content/EN/TXT/?uri=COM:2015:0615:FIN>
- European Commission (2015), Commission Staff Working Document, Strategic engagement for gender equality 2016-2019, SWD(2015) 278 final, Brussels 3.12.2015
http://ec.europa.eu/justice/gender-equality/151203_strategic_engagement_en.pdf
- European Commission (2017), Commission Staff Working Document, *Progress Report on the implementation of the European Disability Strategy (2010 - 2020)*, SWD (2017) 29 final, Brussels 2.2.2017 <http://ec.europa.eu/social/BlobServlet?docId=16995>
- European Communities (1997), *Treaty of Amsterdam amending the Treaty on European Union, the Treaties establishing the European Communities and certain related acts*, Luxembourg: Office for Official Publications of the European Communities, 1997
<http://www.europarl.europa.eu/topics/treaty/pdf/amst-en.pdf>
- European Disability Forum, Proposal by the European Disability Forum for a Comprehensive Directive fighting discrimination of Persons with Disabilities, DOC EDF January 2008,
See:
<http://cms.horus.be/files/99909/MediaArchive/Disability%20Specific%20Directive.pdf>
European Disability Forum Report "Ten years on: practical impact of the *Employment Directive on persons with disabilities in employment EDF Analysis of Council Directive 2000/78/EC (2010)*,
See:
<http://cms.horus.be/files/99909/MediaArchive/Disability%20Specific%20Directive.pdf>
- European disability Forum (2011), *2nd Manifesto on the Rights of Women and Girls with Disabilities in the European Union. A toolkit for activists and policymakers*, Adopted in Budapest on 28-29th May 2011 by the General Assembly of the European Disability Forum following a proposal by the EDF Women's Committee,
<http://www.uildm.org/wp-content/uploads/2011/11/2ndmanifestoEN.pdf>
- European Disability Forum (2015), European Disability Forum's Submission for the List of Issues on the EU Report to the UN Committee on the Rights of Persons With Disabilities, Document of EDF, 4 March 2015
www.edf-eph.org/files/2015_03_04_edf_proposals_of_questions_for_list_of_issues_-_final.doc
- European Parliament, Committee on Women's Rights and Gender Equality "Draft Report on women with disabilities" (2013/2065(INI)),
<http://www.europarl.europa.eu/sides/>
- European Parliament (2007), *Gender mainstreaming in the use of structural funding*, Study for the European Parliament's Committee on Women's Rights and Gender Equality

http://www.europarl.europa.eu/meetdocs/2004_2009/documents/dv/675/675221/675221en.pdf

- European Parliament (2012), *The multi-annual financial framework 2014–2020 from a gender equality perspective*, European Parliament Notes
<http://www.europarl.europa.eu/document/activities/cont/201201/20120123ATT36024/20120123ATT36024EN.pdf>
- European Parliament (2017), *Gender Equality Plans in the private and public sectors in the European Union*, study for the European Parliament's Committee on Women's Rights and Gender Equality
[http://www.europarl.europa.eu/RegData/etudes/STUD/2017/583139/IPOL_STU\(2017\)583139_EN.pdf](http://www.europarl.europa.eu/RegData/etudes/STUD/2017/583139/IPOL_STU(2017)583139_EN.pdf)
- European Training and Research Center for Human Rights and Democracy, (2012), *Locating intersectional discrimination*, a detailed report on the Conference of 18th/19th October 2012 in Graz on 'Intersectional disadvantage and discrimination – social realities and legal practice',
<http://antidiscrimination.etc-graz.at/cms/index.php?id=22>.
- Eurostat (2015), « Disability statistics », *EUROSTAT Statistics Explained*
http://ec.europa.eu/eurostat/statistics-explained/index.php/Disability_statistics
- Eurostat (2015), « Disability statistics introduced », *Eurostat Statistics Explained*
http://ec.europa.eu/eurostat/statistics-explained/Disability_statistics_introduced
- Ewinkel C., Hermes G., Boll S., Degener T., Kroll B., Lübbers S., et al. (Eds.) (1985) *Geschlecht Behindert – Besonderes Merkmal Frau. Ein Buch von behinderten Frauen*, AG SPAK: München
- Ferrera, M. (1996) "The southern model of welfare in social Europe", *Journal of European Social Policy*, 6(1): 17-37
- Foster, Kenneth, and Mark Sandel. 2010. Abuse of Women with Disabilities: Toward an Empowerment Perspective. *Sexuality and Disability* 28: 177–86
- FRA-European Union Agency for Fundamental Rights (2012), *Multiple discrimination in healthcare*, <http://fra.europa.eu/en/project/2011/multiple-discrimination-healthcare>
- Frohmader, C. (2009), 'Parenting Issues for Women with Disabilities in Australia', A Policy Paper by Women With Disabilities Australia (WWDA)
- Hannel, Sarah (2003) *Equality at the Intersections: The Legislative and Judicial Failure to Tackle Multiple Discrimination*, *Oxford Journal of Legal Studies*, Vol.23, No. 1, p. 68
- HUETE, A. (2013): "Pobreza y exclusión social de las mujeres con discapacidad en España". Madrid, 2013. CERMI
- INE (2008-2015): "Encuesta sobre el Empleo de las personas con discapacidad" Años 2008-2015. Madrid. Instituto Nacional de Estadística
- INE (2010-2015): "Encuesta sobre el salario de las personas con discapacidad" Años 2008-2015. Madrid. Instituto Nacional de Estadística
- Istat, Ministero del lavoro e delle Politiche sociali, *Inclusione sociale delle persone con limitazioni funzionali, invalidità o cronicità gravi. Anno 2013*, 21 luglio 2015
<https://www.istat.it/it/archivio/165366>
- Jones, M. and V. Watt (2013), 'Employment Gaps in Britain 1998-2011', *Work Employment and Society*, 27 (6), pp. 982-1003

- Jones, M. K. (2006), 'Does part-time employment provide a way of accommodating a disability?', IZA conference paper
- Kiss, M (2016), *Vulnerable social groups: Before and after the crisis*, European Parliament Briefing.
- Lee, E. & Oh, H. (2005), 'A Wise Wife and Good Mother: Reproductive Health and Maternity Among Women with Disability in South Korea'. *Sexuality and Disability*, Vol. 23, No. 3, pp. 121-144. Preston, P. (2009), 'Parents with Disabilities'. *National Center for Parents with Disabilities: Through the Looking Glass*, Berkeley, California. www.lookingglass.org
- Leonardi M., (2010), From measuring health and disability: supporting policy development. *The European MHADIE project, Disabil Rehabil*, 32, S1-S8.
- Leonardi M, Koutsogeorgou E, Quatrini A, Covelli V (2014), Women with disability across Europe: issues on updated and available data, *J Women's Health Care* 3:175.
- Myers, L. (1999), *People with disabilities and abuse: implications for centres for independent living*, Houston
- Makkonen, T., (2002), *Multiple, compound and intersectional discrimination: bringing the experiences of the most marginalized to the fore*, Institute for Human Rights. Åbo Akademi University.
- Maruani M. (2004) « [Activité, précarité chômage, toujours plus ?](#) », *Revue de l'OFCE*, No 3/90, pp. 95-115.
- McCall, L. (2001), *Complex inequality [electronic resource]: gender, class, and race in the new economy*, New York, Routledge.
- Meekosha, H. and L. Dowse (1997). "Enabling Citizenship: Gender, Disability and Citizenship." *Feminist Review*(Autumn): 49-72
- Meekosha, H- (2004), *Gender and disability*, Draft entry for the Sage Encyclopaedia of Disability
- Ministero del Lavoro e delle Politiche Sociali, *VII Relazione al Parlamento sullo stato di attuazione della Legge 12 marzo 1999, n.68 "Norme per il diritto al lavoro dei disabili". Anni 2012-2013*, 2014
<http://www.lavoro.gov.it/temi-e-priorita/disabilita-e-non-autosufficienza/focus-on/norme-sul-collocamento-al-lavoro-delle-persone-disabili/Pagine/Relazioni-al-Parlamento.aspx>
- Moon, Gay (2006) "Multiple discrimination – problems compounded or solutions found?", *Justice Journal* pp. 86-102.
- Nosek, M. A. and R. B. Hughes (2003). "Psychosocial issues of women with physical disabilities: the continuing gender debate." *Rehabilitation Counseling Bulletin* 46 (4): 224
- OECD (2012), *Sick on the Job? Myths and Realities about Mental Health and Work*, Mental Health and Work, OECD Publishing; World Health organisation (WHO) Web site – Mental health programme
http://www.who.int/mental_health/prevention/genderwomen/en/
- Office for National Statistics (ONS), (2016). *Labour Force Survey, Q2 2016*, UK.
- Open Society Foundations (2012), *The European Union and the Right to Community Living - Structural Funds and the European Union's Obligations under the Convention*

on the Rights of Persons with Disabilities, Mental Health Initiative Open Society Public Health Program.

<https://www.opensocietyfoundations.org/sites/default/files/europe-community-living-20120507.pdf>

- O'Reilly, A., (2003), *The right to decent work of persons with disabilities*, Skills Working Paper No. 14, ILO Geneva; ILO (2007), *Achieving equal employment opportunities for people with disabilities through legislation – Guidelines*, ILO Geneva (First published 2004, revised edition 2007).
- Pagán-Rodríguez, R. (2009), 'An empirical analysis on the incidence of part-time work among women with disabilities', *Disability and Rehabilitation*, Volume 31, 2009 - Issue 2
- Sapir, A. (2005), *Globalisation and the reform of European social models*, Bruegel Policy Contribution.
- Schröttle, M. et al (2013), *Lebenssituation und Belastungen von Frauen mit Beeinträchtigungen und Behinderungen in Deutschland. Langfassung*. BMFSFJ, Berlin.
- Shaw Trust, (2017). 'Disabled Women Vulnerable to Poor Employment Outcomes', 24/1/2017, <https://www.shaw-trust.org.uk/en-GB/Media-policy/News/January-2017/Disabled-women-vulnerable-to-poor-employment-outco>
- Traustadottir, R. and H. Perri (1997), *Women with disabilities: issues, resources, connections revised*, The Center on Human Policy, Syracuse University, June 1997.
- TUC, (2015). *Disability and Employment: A Social Model Study of the Employment Experiences of Disabled People in Great Britain, with a Focus on Mental Illness*, Economic Report Series 2015, <https://www.tuc.org.uk/sites/default/files/DisabilityandEmploymentReport.pdf>
- United Nations (1995), *Beijing Declaration and Platform for Action*, United Nations, Reprinted by UN Women in 2014. <http://www.un.org/womenwatch/daw/followup/as2310rev1.pdf>
- United Nations (2012), *Getting a life – living independently and being included in the community*, Office of the United Nations High Commissioner for Human Rights. Regional Office for Europe. http://www.europe.ohchr.org/documents/Publications/getting_a_life.pdf
- United Nations - UN (2006) [Convention on the Rights of Persons with Disabilities \(CRPD\) and Optional protocol](#), 13 December
- United Nations (2000), *Report of the Ad Hoc Committee of the Whole of the twenty-third special session of the General Assembly*, General Assembly Official Records Twenty-third special session Supplement No. 3 (A/S-23/10/Rev.1).
- USAID (2012), *Women with disabilities in Europe and the Eurasia region*. Social Transition Team, Office of Democracy, Governance and Social Transition of the United States Agency for International Development (USAID/E&E/DGST) <https://www.usaid.gov/sites/default/files/Women-with-Disabilities-EE-Region-FINAL-2012.pdf>
- Velche Dominique. (2001) « Les femmes handicapées et le travail », Actes des journées pour l'Egalité des chances organisées par la Ville de Grenoble.
- Velche D. (2002) « Accès à l'emploi en milieu ordinaire : une double discrimination bien connue et peut-être une raison d'espérer », quoted in Bechrouri *et al.*, 2016, p. 28.

- Verdugo M.A. et al. (2009), *Report on the employment of disabled people in European countries - Country: Spain*, Academic Network of European Disability experts (ANED)
- Vicki A. Freedman, Douglas A. Wolf, and Brenda C. Spillman. Disability-Free Life Expectancy Over 30 Years: A Growing Female Disadvantage in the US Population. *American Journal of Public Health*: June 2016, Vol. 106, No. 6, pp. 1079-1085.
- WHO and World Bank (2011), *World Report on Disabilities 2011*, World Health Organization.
- WHO (2007), ICF-International Classification of Functioning, Disability and Health, World Health Organization, Geneva.
- Women and Work All Party Parliamentary Group (APPG) (2017). *Women Returners - Annual Report 2016*, <https://www.shaw-trust.org.uk/ShawTrust/Women-and-work-Annual-report-low-res.pdf>
- Work and Pensions Committee, (2017). *Disability Employment Gap*, House of Commons, Seventh Report of Session 2016–17, January, <https://www.publications.parliament.uk/pa/cm201617/cmselect/cmworpen/56/56.pdf>
- Yuval-Davis, N., (2007), Intersectionality, citizenship and contemporary politics of belonging, *Critical Review Of International Social And Political Philosophy* Vol. 10, Iss. 4, 2007.

LEGISLATIVE REFERENCES

- Council of the European Union (EC) No. 1260/1999 of 21 June 1999 laying down general provisions on the Structural Funds.
- Council of European Union, Resolution of the Council and of the Representatives of the Governments of the Member States meeting within the Council of 20 December 1996 on equality of opportunity for people with disabilities, <http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:41997X0113&from=EN>
- Council of the European Union (2008/C75/01), Resolution of the Council of the European Union and the representatives of the Governments of the Member States, meeting within the Council of 17 March 2008 on the situation of persons with disabilities in the European Union [http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:42008X0326\(01\)&from=EN](http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:42008X0326(01)&from=EN)
- Council of the European Union, Decision of 3 December 2001 on the European Year of People with Disabilities 2003, <http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32001D0903&from=EN>
- Directive 1999/5/EC of the European Parliament and of the Council of 9 March 1999 on radio equipment and telecommunications terminal equipment and the mutual recognition of their conformity.
- Directive 2001/85/EC of the European Parliament and of the Council of 20 November 2001 relating to special provisions for vehicles used for the carriage of passengers comprising more than eight seats in addition to the driver's seat, amending Directives 70/156/EEC and 97/27/EC.

- Directive 2002/21/EC of the European Parliament and of the Council of 7 March 2002 on a common regulatory framework for electronic communications networks and services (Framework Directive).
- Directive 2002/22/EC of the European Parliament and of the Council of 7 March 2002 on universal service and users' rights relating to electronic communications networks and services (Universal Service Directive).
- Directive 2007/65/EC of the European Parliament and of the Council of 11 December 2007 amending Council Directive 89/552/EEC on the coordination of certain provisions laid down by law, regulation or administrative action in Member States concerning the pursuit of television broadcasting activities.
- European Commission Decision 2008/164/EC of 21 December 2007 concerning the technical specification of interoperability relating to persons with reduced mobility in the trans-European conventional and high-speed rail system, see: <http://eur-lex.europa.eu/legal-content/en/ALL/?uri=CELEX%3A32008D0164>
- European Parliament legislative resolution of 2 April 2009 on the proposal for a Council Directive on implementing the principle of equal treatment between persons irrespective of religion or belief, disability, age or sexual orientation, P6_TA(2009)0211, <http://www.europarl.europa.eu/sides/getDoc.do?pubRef=-//EP//TEXT+TA+P6-TA-2009-0211+0+DOC+XML+V0//EN>
- European Parliament resolution of 7 July 2016 (2016/0318) on the implementation of the UN Convention on the Rights of Persons with Disabilities, with special regard to the Concluding Observations of the UN CRPD Committee (2015/2258(INI)), <http://www.europarl.europa.eu/sides/getDoc.do?type=TA&language=EN&reference=P8-TA-2016-0318>
- Regulation (EC) No 1107/2006 of the European Parliament and of the Council of 5 July 2006 concerning the rights of disabled persons and persons with reduced mobility when travelling by air.
- Regulation (EC) No 1371/2007 of the European Parliament and of the Council of 23 October 2007 on rail passengers' rights and obligations.
- Regulation of the European Parliament and of the Council concerning rights of passengers (including PRM) when travelling by sea and inland waterways (adopted on 11 October 2010, pending publication).
- Regulation (EC) No 1784/1999 of the European Parliament and of the Council of 12 July 1999 on the European Social Fund.
- Regulation (EC) No 1080/2006 of the European Parliament and of the Council of 5 July 2006 on the European Regional Development Fund and repealing Regulation (EC) No. 1783/1999.
- Regulation (EC) No 1081/2006 of the European Parliament and of the Council of 5 July 2006 on the European Social Fund and repealing Regulation (EC) No. 1784/1999.
- Regulation (EC) No 1107/2006 of the European Parliament and of the Council of 5 July 2006 concerning the rights of disabled persons and persons with reduced mobility when travelling by air.
- Regulation (EC) No. 1828/2006 of 8 December 2006 setting out rules for the implementation of Council Regulation (EC) No 1083/2006 laying down general provisions on the European Regional Development Fund, the European Social Fund

and the Cohesion Fund and of Regulation (EC) No 1080/2006 of the European Parliament and of the Council on the European Regional Development Fund,

- Regulation (EC) No 1371/2007 of the European Parliament and of the Council of 23 October 2007 on rail passengers' rights and obligations.
- Regulation of the European Parliament and of the Council concerning rights of passengers (including PRM) when travelling by sea and inland waterways (adopted on 11 October 2010, pending publication).
- Regulation (EU) No 1303/2013 of the European Parliament and of the Council of 17 December 2013 laying down common provisions on the European Regional Development Fund, the European Social Fund, the Cohesion Fund, the European Agricultural Fund for Rural Development and the European Maritime and Fisheries Fund, and laying down general provisions on the European Regional Development Fund, the European Social Fund, the Cohesion Fund and the European Maritime and Fisheries Fund, and repealing Council Regulation (EC) No 1083/2006.

DIRECTORATE-GENERAL FOR INTERNAL POLICIES

POLICY DEPARTMENT ECONOMIC AND SCIENTIFIC POLICY **A**

Role

Policy departments are research units that provide specialised advice to committees, inter-parliamentary delegations and other parliamentary bodies.

Policy Areas

- Economic and Monetary Affairs
- Employment and Social Affairs
- Environment, Public Health and Food Safety
- Industry, Research and Energy
- Internal Market and Consumer Protection

Documents

Visit the European Parliament website:
<http://www.europarl.europa.eu/supporting-analyses>



ISBN 978-92-846-1236-9 (paper)
ISBN 978-92-846-1237-6 (pdf)

doi:10.2861/756756 (paper)
doi:10.2861/32979 (pdf)

