Vocational rehabilitation for people with disabilities provided by the German Federal Employment Agency

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Group 3: Promotion of health and welfare policies for older people and persons with disabilities focusing on aging society

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Societal background

Future Labour Market Challenges

- Rising average age of the overall population with a shrinking labour force potential
- Necessity of increasing labour force potential

Close correlation between disability and employment barriers in Germany:

Persons with disabilities do have (Pfaff et al 2012):

- Lower level of school-leaving certificate and a lower level of training
- Level of income below the German average with pensions as main source of income
- Labour force participation rate: 52% (non-disabled: 79%)
Mainly three institutions are responsible for vocational rehabilitation:

- The German Pension Insurance Fund (responsible e.g. if persons are in employment liable to social security contributions for more than 15 years or if vocational rehabilitation directly follows medical rehabilitation)
- The German Statutory Accident Insurance (responsible e.g. for persons who had sustained an accident at work or contracting an occupational disease)
- The Federal Employment Agency (responsible for first integration and “all others”)

The German Federal Employment Agency spends 2.3 billion € a year!
Population: Young adults, first entering the labour market and adults, re-entering the labour market

Eligible for vocational rehabilitation schemes:

- Persons with an officially acknowledged disability and persons at risk of becoming disabled if the possibility of a disability (lasting longer than six months) is anticipated
- Capable of work
Inflow into vocational rehabilitation (FEA): first integration of young adults and adults in re-integration

Socio-demographic characteristics, young adults I

- Average age: 19 years
- German: 90 percent

Source: Reims et al. 2016
Socio-demographic characteristics, young adults II

Types of disability, in percent; year 2013

- others
- visual impairment
- hearing impairment
- neurological disability
- organic disability
- musculoskeletal disability
- mental disability
- psychological disability
- learning disability

Source: Reims et al. 2016

increasing (from 15 to 20 percent since 2009)
Active labour market policy: schemes

Labour market schemes

- All schemes designed for unemployed persons
- Schemes specially designed for disabled persons

Preparation schemes
- External or company based vocational training
- Employment support schemes
- Others

Some measures are mainly attended by young adults, others mainly by adults:
- Young adults: mostly vocational training
- Adults: Mostly further training

Vocational rehabilitation should counteract excluding tendencies and enable self-determination and equality
Young adults in labour market schemes – main schemes, year 2013

Education chain: vocational preparation scheme + (company-external) vocational training: 31 percent

About 10 percent do not participate in schemes

Source: Reims et al. 2016
Labour market status of young adults 12 months after finishing rehabilitation

Source: Reims et al. 2016
Evaluation results – young adults in first integration

- Education chain ‘vocational preparation scheme + (external or company based) vocational training’ is increasing over the years. This indicates that young people leaving the education system are not enough prepared and are requiring support in their vocational training (Reims, Tisch & Tophoven).

- Labour market integration does not per se positively determine physical, mental, or general subjective health. Subjective health is rated positively if people are integrated in a working environment that is irrespective of the given disability (Reims 2015).

- The entry into employment is determined by higher educational achievements, a successfully completed apprenticeship at best within an establishment, high regional mobility and good structural conditions, all favouring labour market integration. Physically disabled graduates and those with shorter unemployment and sickness periods stay longer in first employment than graduates showing other disabilities and those with longer periods in unemployment and sickness (Reims & Gruber 2014).
Thanks for your attention!

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Adults in re-integration

Types of disability, in percent; year 2013
- others
- visual impairment
- hearing impairment
- neurological disability
- organic disability
- musculoskeletal disability
- mental disability
- psychological disability
- learning disability

Gender
- Female
- Male

Education
- no educational qualifications
- lower secondary school
- intermediate (secondary) school
- upper secondary school
- others
Starting an employment (and being unemployed before) positively affects subjective health. The level of occupational limitation due to disability appears to be of particular relevance in estimating health. Interacting both the level of occupational limitation and labour market status reveals that if non-employed people are reporting serious occupational limitation due to their disability, they also do have the worst subjective health across all aspects. However, people in employment experiencing similarly serious limitations due to their disability do not differ much from this group. These may be regarded as having taken up disability-inappropriate employment (Reims & Bauer 2015).

Sustainability of re-integration: About two-thirds of the rehabilitants are very quickly in a (mostly) unsupported employment, which is lasting several years. A good subjective feeling of health is important for the integration into employment as well as for the sustainability (Gruber, Rauch & Reims 2015).
(1) Socio-demographic characteristics:
More likely to participate:

- Persons 17 to 20 years old
- Persons coming from special schools or are already in a measure (but not with the status ‘rehabilitant’)
- Living in a rural area or small city
Multivariate results II: Allocation to specific schemes – young adults (only significant results)

(1) Socio-demographic characteristics:

- Men are less likely to receive a company based training
- The higher the education, the more likely to receive a company based training and the less likely participating in specific rehabilitation schemes
- Persons with mental disabilities are more likely to enter a sheltered workshop
- People with psychological problems are most likely to receive a specific vocational rehabilitation scheme