



European Association of Service providers
for Persons with Disabilities

Summary of 2024 European Semester Reports and Country-specific Recommendations Related to Social Policy

With a focus on the situation of persons with disabilities

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Glossary

AROPE: At-Risk-Of-Poverty-Or-Social Exclusion

ECEC: Early Childhood Education and Care

ECI: Early Childhood Intervention

ERDF: European Regional Development Fund

ESF+: European Social Fund Plus

GDP: Gross Domestic Product

LTC: Long-Term Care

NEET: Not in Education, Employment, or Training

RRF: Recovery and Resilience Facility

RRP: Recovery and Resilience Plan

SDGs: Sustainable Development Goals

VET: Vocational Education and Training

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1. What are Country Reports and Country-Specific Recommendations?

Each year, around the month of May, the European Commission publishes Country Reports and Country-Specific Recommendations (CSRs) for each of its 27 Member States as part of the ‘[European Semester](#)’. This process, which is a key component of the European Union (UE) economic governance framework, consists of an annual cycle to coordinate economic, fiscal, labour, and social policies across the Union. It aims to ensure that Member States align their policies and budgets with EU objectives and rules, promoting stability, growth, and convergence throughout the EU. The Country Reports reflect the state of play within each EU Member State, detailing advancements in various policy domains and highlighting persistent challenges. The findings in these reports form the basis for CSRs, offering tailored guidance to Member States.

Although the European Semester was initially mainly an economic exercise, it has evolved to also provide a framework for **monitoring the efforts and performance of Member States in implementing the principles and rights established by the European Pillar of Social Rights and promoting social convergence**. The European Semester is crucial in supporting this implementation, encompassing 20 key principles for a strong social Europe. These include, among others, education (principle 1), equal opportunities (principle 3), active support to employment (principle 4), social protection (principle 12), inclusion of people with disabilities (principle 17) and long-term care (principle 18). The European Semester also **assesses Member States’ performance on fairness UN Sustainable Development Goals (SDGs)**, such as no poverty (SDG 1), good health and well-being (SDG 3), quality education (SDG 4), gender equality (SDG 5), decent work and economic growth (SDG 8), and reduced inequalities (SDG 10). The primary tool used to monitor and assess progress in these areas is the **EU Social Scoreboard**.

2. The European Semester in 2024

The 2024 [Country Reports](#) and [Country-Specific Recommendations](#) focus on assessing economic, employment, and social progress in each Member State. It notably reviews the implementation of [Recovery and Resilience Plans](#) (RRPs) – part of the NextGenerationEU recovery package – and [Cohesion Policy programmes](#), particularly in mitigating the impacts of the Covid-19 pandemic. The RRP provide financial support for reforms and investments to strengthen health systems, support economic recovery, and enhance social and economic resilience. Cohesion Policy programmes, including the European Regional Development Funds (ERDF), European Social Fund (ESF+), and Cohesion Fund, have been adapted to address the crisis, focusing on regional and social cohesion, healthcare and employment. The European Semester therefore evaluates synergies between RRP and Cohesion Policy programmes, to maximise investment impacts and contributing to a sustainable recovery. The Country Reports and CSR's also review the consequences of Russia’s invasion of Ukraine, surging energy prices, challenges and progress associated with the digital and green transitions but also the implementation of the [European Child Guarantee](#).

This edition has introduced some innovative changes in its evaluation process. This year marks the beginning of assessments being conducted within the [New economic governance framework](#), established in April 2024. This framework is designed to improve debt sustainability and foster growth that is both sustainable and inclusive. Additionally, the social dimension of the European Semester has been enriched with its assessments made in the context of the recently adopted [Social Convergence Framework](#), a strategic initiative supporting the implementation of the European Pillar of Social Rights and promoting

upward social convergence within the EU. It employs a two-stage analysis of social indicators to deepen the understanding of employment and social trends as well as to identify social and cohesion challenges and risks faced by Member States:

1. First, the [Joint Employment Report](#) (2024) monitors the employment situation in the EU and the implementation of the Employment Guidelines.
2. Then countries where potential risks to upward social convergence identified in the Joint Employment Report were subject to a more detailed analysis in a Commission’s Staff Working Document titled “[Country analysis on social convergence in line with the features of the Social Convergence Framework \(SFC\)](#)”¹. This is the case of Bulgaria, Estonia, Spain, Italy, Lithuania, Hungary, and Romania. Findings under the European Semester Reports of these seven countries are therefore evaluated based on their alignment with this second-stage analysis and their adherence to the features of the Social Convergence Framework.

Regarding findings on social policy, many issues and challenges are shared among Member States. A significant challenge identified is the **demographic impact of ageing populations**. This trend strains health systems, increases long-term care expenditures, and reduces the workforce due to a decline in the working-age population. Consequently, these factors create economic pressures across Europe and threaten fiscal sustainability. Furthermore, persistent problems include **labour shortages and skill mismatches**, primarily in the education and healthcare sectors, which limit access to these essential services. These various challenges affect unevenly regions, resulting in significant regional disparities, but also people. Depending on the country, several groups have been identified as most vulnerable and disadvantaged, being most at risk of poverty, socially excluded, unemployment, and with inadequate access to education, healthcare, and social services. These groups include **persons with disabilities, children, the elderly, women, Roma community, and people born outside the EU or with a migrant background**. While further efforts are needed, Country Reports highlight commitment from Member States, notably in the development of **community-based care and mental health services**, supported by National RRP and Cohesion Policy programmes. Countries such as Denmark, Finland, Greece, Lithuania, Portugal, and Sweden have also made **mental health** a key priority. Finally, CSRs continue to offer targeted guidance to social services providers and disability support services, to address these issues.

3. EASPD methodology

In this report, EASPD will present the Country Report and CSRs of each Member State. The presentation will include (i) performance on fairness-related SDGs, measured by the European Social Scoreboard; (ii) when relevant, under the mid-term review of Cohesion Policy programmes where Member States are advised by the European Commission to continue their efforts; and findings related to disabilities, concerning (iii) Labour market; (iv) Early Childhood Education and Care (ECEC) and education; and (v) Health and care. An added section (vi) will be dedicated to the Social Convergence Framework in the case of Bulgaria, Estonia, Spain, Italy, Lithuania, Hungary, and Romania. Consequently, the relevant CSRs which have a focus on the above topics will be presented.

¹ The second stage analysis is considered warranted for Member States for which six or more Social Scoreboard headline indicators have been flagged red (‘critical situation’) or orange (‘to watch’) in the Joint Employment Report.

The following main indicators from the Social Scoreboard will be used to compare the situation between Member States and the rest of the EU, providing a comprehensive analysis of social performance.

| Indicator (year) | EU average |
|---------------------------------------------------------------------------------------------|-------------------------------------------|
| Share of people at-risks of poverty and social exclusion (in 2022) | 21.6% of EU total population |
| Share of people with disabilities at-risks of poverty and social exclusion (in 2022) | 28.8% of the total population |
| Disability employment gap (in 2022) | 21.4 percentage points (pps) ² |
| Share of participation in ECEC less than 3 years (in 2021) | 35.9% |
| Share of participation in ECEC less than 3 years (in 2022) | 35.7% |
| Share of participation in ECEC less than 3 years (in 2023) | 34.9% |
| Share of participation in ECEC between 3 years and the start of compulsory school (in 2021) | 92.5% |
| Share of participation in ECEC between 3 and the start of compulsory school (in 2022) | 93.1% |
| Share of total spending on health (in 2021) | 10.9% of EU total GDP |
| Share of total spending on LTC (in 2022) | 1.8% of EU total GDP |

² The disability employment gap, expressed in percentage points, corresponds to the difference between the percentage of employment of persons with disabilities and the percentage of employment of persons without disabilities.

4. EASPD's Summary of the 2022 Country Reports and Country-specific Recommendations

AUSTRIA

Austria needs to continue to support qualitative and inclusive education, to support training and lifelong learning, and to support active inclusion and employability measures, particularly for disadvantaged groups, which include persons with disabilities.

Country Report

- **SDGs:** While Austria shows strong performance and improvement on SDG indicators related to poverty and inequalities reduction, it still faces challenges with quality education.
- **Labour market:** Limited progress has been assessed in implementing the 2022 CSRs on the improvement of labour market outcomes for disadvantaged groups, including persons with disabilities with a disability employment gap of about 23.8 pps in 2022, slightly above the EU average (21.4 pps). Austria supports active labour market integration policies, upskilling and reskilling measures through the ESF+ and its RRP, to address the labour shortages, persistent in the healthcare sector – and skills mismatch, which are among the highest in the EU.
- **ECEC and education:** In 2023, fewer than one in four children under 3 years old were enrolled in ECEC (24.1%), making Austria below the EU average (34.9%). Through its RRP and the ESF+, Austria intends to improve the availability of ECEC. According to the European Commission, the introduction of compulsory quality standards in ECEC could improve the provision of quality care across the country.
- **Health and care:** Austria's health spending ranks are among the highest in the EU (12.1% of its GDP vs. EU average 10.9 in 2021), but the demographic shift puts pressure on it, notably on long-term care (LTC). LTC was reformed indeed in 2022 to better answer the needs of an ageing population³. The abolition of the *Pflegeregress* in 2018 made LTC financially more accessible for people in need; however, it also created a greater incentive to rely on residential care rather than home-based care⁴. Austria's RRP dedicates EUR 254 million to measures that include the expansion of multi-professional primary healthcare units, the reform of working conditions for healthcare professionals, and that support community nursing. Overall, the European Commission stressed the desirability for Austria to increase the harmonisation of financing and healthcare services, to better coordinate between the different sectors, and to put in place common performance standards across regions.

Country-Specific Recommendations

- CSRs recommend improving quality of ECEC services, to improve labour market outcomes for disadvantaged groups, notably women.

³ The reform comprises measures to make training for a LTC staff more attractive to potential recruits, to improve working conditions, and to directly support people in need and their caring relatives. Allowance for individuals with severe mental disabilities and dementia will for instance slightly increased.

⁴ The *Pflegeregress* was the claim made by the Social Welfare Departments of the Austrian federal states on the private assets of a person receiving LTC and the assets of their relatives. Since then, individuals receiving LTC in residential facilities no longer had to use their personal assets to cover the costs of their care, making residential care comparatively more affordable than home care.

BELGIUM

Belgium performs well on poverty reduction and inclusive growth. Nevertheless, vulnerable groups, notably persons with disabilities, still face challenges in integrating the labour market.

Country Report

- **SDGs:** Belgium performs well or is improving on most fairness SDG indicators, notably poverty, with efficient social transfers reducing poverty and inequalities. However, the At-Risk-Of-Poverty-Or-Social Exclusion (AROE) gap between persons with and without disabilities increased and was one of the highest in the Union in 2022 (20.3 pps vs. EU average 10.5 pps).
- **Labour market:** Labour shortages – notably of healthcare workers – and skills mismatches – especially due to the ageing of society and evolving skill demands due to green and digital transitions – are among the highest in the EU. Participation rates in the labour market are low among vulnerable groups, notably persons with disabilities whose employment gap was about 35.3 pps in 2022 – one of the highest in the EU (EU average 21.4 pps). In the Brussels Capital Region, funds under the RRF, together with cohesion policy funds, aim to integrate jobseekers with disabilities into the workforce through sustainable pathways. The Brussels public employment service is also currently implementing a [disability project](#) aiming to create a legislative framework, funded by the ESF+, to facilitate job matching for jobseekers with disabilities. What is more, the recruitment process in Belgium civil service has been adjusted to facilitate access for applicants with disabilities.
- **ECEC and education:** Participation rates in ECEC for children aged under 3 (52.7% in 2021) and for children between 3 and the start of compulsory school (97.6% in 2021), are among the highest in the EU. However, challenges related to equal access persist. As the European Child Guarantee is being implemented, Belgium' RRP and the ESF+ are providing enhanced funding to support active inclusion and inclusive education initiatives.
- **Health and care:** Belgium is one of the top-EU spenders on LTC (2.3% of its GDP in 2022 vs. EU average 1.8%). However, the share of older people unnecessarily or prematurely placed in a residential care facility remains high, although it has been decreasing over the last decade. This is particularly the case in the region of Brussels and Wallonia. Belgium is investing around EUR 31 million under the ESF+ (2021-2027) and EUR 93.6 million under its RRP to improve the accessibility, quality and resilience of the health system.

Country-Specific Recommendations

- CSRs recommend using RRF funds and other resources to tackle labour shortages and skills mismatches, particularly in relation to the green transition. This should involve strengthening activation policies, providing lifelong learning opportunities to enhance worker mobility and adaptability, as well as targeted measures to better integrate disadvantaged groups, including people with disabilities, in the labour market.

BULGARIA

Bulgaria has made progress in its social policies, nevertheless, further efforts are needed to achieve full social convergence. Persons with disabilities need targeted policy support, including better access to healthcare, employment, education, ECEC, and measures to prevent them from poverty and social exclusion.

Country Report

- **SDGs:** Bulgaria falls below EU average on most fairness SDG, particularly quality education. Still, it progressed on good health and well-being. Despite improvement, the AROPE rate has further diverged from the EU (32.2% vs. 21.6% in 2022), affecting vulnerable groups such as persons with disabilities (49.9% AROPE vs. EU average 28.8% in 2022, down to 42.4% in 2023), but also children, old people, and the Roma community. The reform of the minimum income scheme, effective as of June 2023, is expected to strengthen social protection. Overall regional disparities have also been identified regarding poverty, access to healthcare, education, and employment.
- **Labour market:** Although unemployment is lower than the EU average, its rate is higher among vulnerable groups. In 2022, the disability employment gap was 29.5 pps (vs. EU 21.4 pps). Despite policy measures to better support vulnerable populations, like wage increases, in-work poverty for them remains high. Under the RRP, Bulgaria adopted active labour market policies for groups distant from the labour market and invested in skills acquisition, particularly for the green and digital transitions. In addition, the 'I Start Work' initiative, supported by the ESF+, offers extensive measures to help vulnerable groups gain employment, aiming for a national employment rate of 79% by 2030.
- **ECEC and education:** The Bulgarian education system shows strong social segregation, growing inequalities, and declining outcomes, with one of the highest underachievement rates for disadvantaged students among EU Member States. Despite progress, participation rate in ECEC for children between 3 and the starting age for compulsory primary education remains low (79.4% vs. EU average of 92.5% in 2021).
- **Health and care:** Bulgaria's health and care sectors face several challenges. This includes below-average funding compared to the EU (8.6% vs 10.9% in 2021), insufficient coverage and poor health outcomes of the LTC system, shortage of professionals, and obstacles in accessing social services for vulnerable groups, despite improvements in social protection measures. EU funds are playing a significant role in Bulgaria, particularly through its RRP, which allocates EUR 287 million (5% of the total budget) to healthcare, including the modernisation of psychiatric care facilities. Cohesion funds are also supporting Bulgaria's Child Guarantee Action Plan, focusing on enhancing education and improving accessibility to healthcare services for vulnerable children across the country.
- **Social Convergence Framework:** "Addressing these challenges will help Bulgaria boost upward social convergence. The second-stage analysis in line with the features of the Social Convergence Framework points to challenges for Bulgaria that may affect social convergence in relation to social protection and inclusion, education and skills."

Country-Specific Recommendations

- CSRs recommend to improve education and training through better teacher training and competency-based learning, focusing on disadvantaged groups.

- CSRs recommend to address labour shortages and enhance worker skills to boost competitiveness and support the green transition.

CROATIA

In the recent years, Croatia has initiated reforms across multiple sectors to bolster social cohesion and inclusion, but uneven progress underscores the imperative for further advancements, especially in integrating persons with disabilities, accelerating deinstitutionalisation, and strengthening the healthcare system.

Country Report

- **SDGs:** Croatia is improving on all fairness SDG indicators, but still needs to catch up with the EU average on good health and well-being, decent work and economic growth, quality education, and gender equality. Although the AROPE rate has been relatively stable since 2019 and below the EU average, it has increased, including for persons with disabilities. The rate of the last went from 35.3% in 2022 to 37.5% in 2023 (vs. 28.8% in the EU). Social inequalities are also marked by significant regional disparities.
- **Labour market:** Vulnerable groups face persistent barriers to accessing the labour market and getting quality employment, constraining participation and productivity. Skills mismatches, shortage – notably of healthcare workers and ECEC teachers – and lack of quality job persist in the labour market, affecting primarily disadvantages groups. The disability employment gap widened to 39.2 pps in 2023 (36 pps in 2022, already above the 21.4 pps EU average). To address these issues, Croatia focuses on upskilling and reskilling, especially for the climate and digital transitions, through RRF funds and the ESF+. The country also supports active labour market policies and ECE to ensure comprehensive social protection.
- **ECEC and education:** Participation in ECEC for children under three declined to 29.6% in 2023 (33.3% in 2021), still below the EU average. There is potential for improvement through RRP and cohesion policy investments and reforms, however concerns remain about staff shortage.
- **Health and care:** Croatia's health and care sectors face several challenges. This includes below-average funding compared to the EU (8.1% vs. 10.9% in 2021), lack of access to qualitative services due to uneven healthcare facilities and labour shortages, under-developed LTC and issues in the deinstitutionalisation process. There are also challenges for the deinstitutionalisation process. The European Commission points out that there is a rising 'demand' for institutional care, but that this is being caused by the shortcomings in developing alternative family- and community-based services and ensuring conditions for independent living. Under the ESF+ and the ERDF, Croatia aims to reduce occupancy and eventually close long-stay residential institutions. The future national LTC strategic framework will help to speed up this deinstitutionalisation process.

Country-Specific Recommendations

- CSRs recommend to strengthen competitiveness, Croatia is recommended to reduce labour and skills shortages by strengthening basic skills, enhancing upskilling and reskilling, and improving access to formal home- and community-based long-term care.

CYPRUS

Despite efforts, Cyprus faces persistent challenges in achieving social inclusion for persons with disabilities who experience higher rates of poverty and social exclusion, necessitating stronger efforts regarding notably education and employment opportunities.

Country Report

- **SDGs:** Cyprus is doing relatively well in implementing the principles of the European Pillar of Social Rights and fairness-related SDGs, but not on all fronts. It needs to catch up with the EU average on quality education, gender equality, decent work and economic growth. In 2022, Cyprus surpassed its 2030 targets, by reducing poverty risk for 10,000 people, including 3,000 children. While the AROPE rate has improved and is below the EU average, it remains higher for disadvantaged groups, such as persons with disabilities (28% in 2021) – still on EU average.
- **Labour market:** Despite an overall robust performance, the Cypriot labour market faces several challenges. People Not in Education, Employment, or Training (NEET), women, and persons with disabilities encounter barriers in accessing the labour market and having qualitative jobs. For persons with disabilities, the employment gap has been above the EU average since 2021 (25.7 pps in 2022). Current and planned investments in activation and social integration of vulnerable groups via cohesion funds and RRF should boost labour supply, the social economy, and growth. Still, the European Commission underlined the need to further support in enhancing Vocational Education and Training (VET), adult learning, and teacher training.
- **ECEC and education:** Between 2020 and 2021, the participation rate in ECEC above the age of 3 dropped by 5.3 pps to 85.8%, well below the EU-Barcelona target of 96%. Consistent measures are planned to increase affordability of ECEC through the ESF+, the RRF and the EU [Technical Support Instrument](#). According to the report, Cypriot students' underachievement in basic skills underscores the urgent need for educational reforms to enhance equity and quality, notably by strengthening individual learning accounts and implementing the European Child Guarantee.
- **Health and care:** Cyprus's health and care sectors face several challenges. This includes health spending below the EU average, despite having increased to 9.1% of GDP in 2021, low funding for LTC accounting for only 0.33% of its GDP (less than one-fifth of EU average) as well as shortages of professionals. It has to be noted that the 2019-2020 health reform introduced a universal health coverage and unified the system. Investments and reforms under the RRP and the ESF+ aim notably to support LTC, independent living, and ECE.

Country-Specific Recommendations

- CSRs recommend to strengthen continuous teacher training and address the imbalances between labour supply and demand by further increasing the capacity and attractiveness of VET programmes as well as fostering adult learning.

CZECHIA

While the specific needs of persons with disabilities are acknowledged, they are not consistently categorised as a vulnerable or disadvantaged group like Roma, Ukrainian refugees, or women. Still, the report and recommendations underscore the imperative for Czechia to accelerate the deinstitutionalisation process.

Country Report

- **SDGs:** Czechia performs very well and is continuing to improve in addressing poverty and inequalities, with associated rates significantly outperforming the EU average. Nevertheless, the country experiences significant regional and social disparities. The ESF+ is dedicating EUR 15 million to support the social inclusion of marginalised groups and to reduce the number of AROPE people, notably children. Progress is also needed on good health and well-being and quality education, with indicators falling behind the EU average.
- **Labour market:** The country has one of the highest employment rates, and a disability employment gap on average (22.7 pps vs. EU average 21.4 pps in 2022). It is mainly youth and women that face barriers, which Czechia tries to address through RRF funds and ESF+ investments.
- **ECEC and education:** Progress has been made in the quality and inclusiveness of education. The participation of Roma children in ECEC indeed increased from 24% in 2016 to 51% in 2021, but despite this positive point, overall challenges remain for Roma children. Czechia is leveraging EU funds, notably RRF, to enhance educational frameworks, focusing on digital literacy and IT skills, and providing tutoring for disadvantaged students, including Roma but also refugees from Ukraine.
- **Health and care:** Czechia health and care sectors face several challenges. This includes data deficiencies, health spending below the EU average and uneven geographical distribution of health workers even though the country has slightly more doctors and nurses per 1,000 inhabitants than the EU average. Czechia also faces major long-term challenges in its social and healthcare systems, worsened by an ageing population. Access to quality community-based services remains limited for some people in need, notably women, older people, and persons with disabilities. It is hindered by a lack of community-based service capacity and a fragmented financing system with regulatory barriers hindering integrated social-health care, leading to high reliance on residential care. Ongoing reforms notably aim to strengthen primary healthcare, health services, and improve access in underserved areas and for vulnerable groups. Finally, Czechia national action plan for deinstitutionalisation aims at expanding independent living and community-based services, with potential additional funding support starting in 2025⁵.

Country-Specific Recommendations

- CSRs recommend to “strengthen the competitiveness of the economy by addressing skills mismatches, simplifying the recognition of foreign qualifications, and by increasing the labour market participation of underrepresented groups”.

⁵ According to the country report, “a government resolution was also approved that could pave the way to unlock national funding for deinstitutionalisation from 2025 onwards”.

DENMARK

Despite little mention of persons with disabilities in the report and the CSRs, Denmark appears to maintain strong performance in their inclusion. This is supported by a resilient healthcare system and favourable employment opportunities for persons with disabilities.

Country Report

- **SDGs:** The country is outperforming the EU average on quality education and reducing inequalities. The share of people AROPE is also below the EU average (17.1% in 2021 vs. EU average 21.6%).
- **Labour market:** The labour market performs well with a long-term unemployment rate below the EU average but also a disability employment gap which was only about 9.9 pps in 2022, well above the EU average (21.4%) This strong performance is supported by very a good system of vocational education, training and adult learning. However, certain groups still encounter barriers such as old workers and youth. RRF funds and the ESF+ support measure to help them to enter and stay in the labour market.
- **ECEC and education:** Denmark has the second highest rate of participation in ECEC for children between 3 and the start of compulsory school (97%), which is above the Barcelona target (96%). However, the country continues to lack qualified staff in ECEC and in primary and secondary education.
- **Health and care:** Denmark has a strong health system. It has more doctors and nurses than the EU average, and it is further stepping up policies to foster access to healthcare, notably through RRF funds. Nevertheless, a shortage in the healthcare and welfare sectors of 15 000 workers is projected for 2035. To address the challenge, in 2022, the country agreed on a reform aiming to improve the medical coverage in areas with a shortage of doctors. This has notably helped to close the gap between rural and urban healthcare provisions. Denmark also launched a 10-year plan to improve psychiatry and mental health, identifying children and young people, and adults with severe mental health issues as particular target groups.

Country-Specific Recommendations

The European Commission did not include any specific CSRs related to disability, social services, healthcare, children, and education.

ESTONIA

The country faces significant social challenges with rising poverty and underfunding of the healthcare system, which particularly impacts persons with disabilities. Nevertheless, Estonia is showing strong commitment through reforms and investments, although the outcomes remain to be seen.

Country Report

- **SDGs:** Despite performing very well on all fairness SDG, Estonia needs to catch up with the EU average on indicators related to poverty, gender equality and good health and well-being. Poverty indicators are indeed worsening and among the worst in the EU. This affects primarily vulnerable groups such as persons with a disability whose AROPE rate reached 47.8% in 2022, second highest in the EU. Estonian RRP, along other EU funds, supports upward social convergence, social protection, notably by increasing support for persons with disabilities.
- **Labour market:** Despite good performance during the recession, skills and labour shortages persist in the healthcare and education sectors, and youth unemployment remains an issue. The disability employment gap rose by 7.5 pps in 2022, exceeding the EU average (26.2% vs. 21.4%). However, progress has been made with a significant decrease again in 2023 (to 20.2 pps) The European Commission stressed the need to prioritise education quality, promoting lifelong learning, upskilling and reskilling, and fostering inclusion, which Estonia is doing through RRF funds, the Just Transition Fund, and the ESF+.
- **ECEC and education:** Participation in ECEC has increase for children under 3 but is still below the EU average (33.7% vs. 35.7% in 2022). It remains stable for children above 3 and on EU average (91.5% vs EU 92.5% in 2021). A draft reform act adopted in 2024 aims to ensure access to childcare for children aged 18 months to 3 years and establishes an integrated ECEC system with common quality standards.
- **Health and care:** Despite ongoing reforms, Estonia health and care sectors face several challenges. Public health spending has been decreasing since 2021 and is among the lowest in the EU – despite a rise during Covid pandemic –. This contributes to regional disparities, workforce shortages, lack of accessibility and affordability of LTC and healthcare, which are exacerbated by demographic pressures. Persons with disabilities notably report high levels of unmet medical needs, among the highest in the EU, and limited access to health data when Estonia is digitalising more and more its health services. EU funds significantly support healthcare in Estonia with EUR 72 million from the RRP allocated for improving infrastructure, implementing reforms, enhancing primary healthcare, and updating e-health frameworks. An additional EUR 1.4 million from cohesion policy funds will support health system accessibility, effectiveness, and resilience, alongside integration efforts and addressing material deprivation. The European Commission also identifies independent living as a priority deserving further attention from the Estonian authorities.
- **Social Convergence Framework:** The analysis from the Social Convergence Framework of May 2024 highlights challenges in social protection, inclusion, and education in Estonia. However, social convergence challenges are not deemed major, given positive developments, notably in employment.

Country-Specific Recommendations

- CSRs recommend to broaden the tax base and improve access to and financing of healthcare and LTC.

FINLAND

While Finland performances on social indicators are high, the country faces challenges related to public finances, access to healthcare and long-term care and the jobs market, affecting notably persons with disabilities. Reforms, under the RRP and other EU funds have been taken to address these issues.

Country Report

- **SDGs:** Finland performs well across most dimensions of the Social Scoreboard and on SDG indicators related to fairness, with some room for improvement for those on poverty reduction and quality education. The AROPE rate remains low albeit showing an upward trend.
- **Labour market:** Unemployment figures highlight ongoing skill mismatch, which is expected to persist as Finland has the highest old age dependency ratio among EU countries. The disability employment gap is very low (19 pps in 2022), and below the EU average of 21.4 pps. There are labour shortages, primarily in the health and education sectors. Finland's RRP focus on improving mental health and health care service at the workplace as well as to support reskilling, upskilling and continuous learning via the creation of a new Service Centre for Continuous Learning and Employment. This is complementary to the ESF+ investments which focus particularly on integrating marginalised groups such as migrants and people with disabilities into the labour market.
- **ECEC and education:** Efforts are implemented to tackle the low rate of participation in ECEC (below the EU targets), especially through reduction in fees and increase in the number of free entitlements.
- **Healthcare sector:** There are several challenges, including pressure on health expenditures, due to the ageing of the population, staff shortages in the healthcare sector – including in LTC, and ECEC –, regional disparities, and high level of unmet medical needs. Finland's RRP focused on enhancing resilience and equal access to care, education and social services, improve cost-effectiveness, and address labour and skills shortages. In 2023, the responsibility for organising these services was transferred from municipalities to 22 newly established wellbeing services counties. The plan also aims to improve digital health services and consolidates knowledge and health data across population groups.

Country-Specific Recommendations

- CSRs recommend to “pursue the reform of the social security system in order to increase the efficiency of the social benefits system, which would improve incentives to work and support the long-term sustainability of public finances”.
- CSRs recommend to “address labour and skills shortages by reskilling and upskilling the workforce and widening the higher education offer, in particular for the study fields most in demand in the labour market. Ensure that the reform of social and healthcare services improves access to and delivery of services and tackles inefficiencies”.

FRANCE

France faces challenges, particularly in education, employment, and poverty, with significant impacts on outer regions and rural areas. Efforts are ongoing to integrate disabled children into education, enhance ECE access for disadvantaged groups, and invest in the healthcare system.

Country Report

- **SDGS:** France is advancing on most fairness SDG indicators but is moving away in reducing poverty and inequalities and needs to align with the EU average. Poverty rates are rising, particularly between outermost and metropolitan regions, and urban and rural areas, affecting particularly children. Education quality indicators are improving but do not fully reflect socio-economic disparities and challenges for vulnerable groups. Progress is still needed on good health and well-being.
- **Labour market:** Although employment rose to record high levels, labour and skills shortages remain, notably in health, care and education sectors, affecting disproportionately outermost regions and non-urban areas. For people with disabilities, the employment gap aligns with the EU average. The French skills investment plan and the plan to reduce recruitment pressures, supported by the ESF+ and the RRF, focus on upskilling and reskilling the workforce. The European Commission stressed the need to increase investment in vocational education and training, despite above-average adult learning participation.
- **ECEC and education:** France meets EU targets for ECEC participation and reducing early school leaving. In 2022, 56.2% of children under 3 attended ECEC (EU 35.7%), and all children over 3 attend pre-primary school (100% vs. EU 92.5% in 2021). Progress has been made in including children with disabilities in mainstream schools, but challenges remain due to specialist shortages and limited accessibility. In the school year 2022-2023, 114,600 more children with disabilities attended mainstream schools compared to 5 years ago. However, only 1.4% had access to specialist teachers, and 3.7% to adapted teaching equipment. The European Commission emphasised the need to improve teaching conditions, school autonomy, pedagogical freedom, mentoring for new teachers, and training to meet the needs of students, including with disabilities.
- **Health and care:** Health spending relative to GDP was above the EU average in 2021 (12.3% of GDP vs. 10.9%). France faces a shortage and uneven distribution of doctors, with a lower increase in density against an ageing population compared to the EU overall, and lower nurse salaries compared to the EU average, despite a planned salary upgrade for hospital nurses in 2024. France aims to address these challenges through its RRP, with 11.2% of funding dedicated to strengthening health system resilience. A reform in 2021 introduced hospital governance flexibility and support for older people and those with disabilities ([loi relatives à la dette sociale et à l'autonomie](#)). Additional investments of around EUR 428 million from cohesion policy funds will enhance health infrastructure, e-health services, and healthcare access for vulnerable groups from 2021 to 2027.

Country-Specific Recommendations

- CST recommends to “further address skills shortages, including in green transition occupations, and foster participation in training, in particular among the low-skilled. Improve the performance and equity of the education system. Strengthen the teaching profession, including by improving working conditions and training”.

GERMANY

Germany excels in poverty reduction, health, and decent jobs but lags in quality education and reducing inequalities. Despite a strong labour market, challenges remain in increasing employment for people with disabilities and addressing labour shortages, including ECEC.

Country Report

- **SDGs:** Germany is performing above the EU average on some fairness SDG indicators linked to poverty, health and decent jobs and growth. However, it is lagging behind the EU average and moving further away from SDG targets on quality education and reducing inequalities. Poverty significantly affects children as one out of four children were AROPE in 2022. The ongoing implementation of the European Child Guarantee – even though most of the planned measures lack target values – the introduction of the Citizen’s Benefit and the currently discussed Act for the Guaranteed Child Allowance aim to address the issue.
- **Labour market:** Germany has a robust labour market with high employment, low levels of long-term unemployment and a declining number of young people NEET. There is potential to further increase the employment rate of persons with disabilities (24.2 pps in 2022).
- **ECEC and education:** Germany faces unmet demand for ECEC due to inadequate provision and staff shortages, exacerbated by lowered entry requirements and a lack of qualified personnel, affecting service quality and parental employment. The 2022 ECEC quality law provides EUR 4 billion for improvements, alongside the RRP’s creation of 90,000 new places and the ESF+ support for staff training and whole-day schools.
- **Health and care:** Germany has the highest healthcare spending in relation to GDP in the EU. Most health spending is publicly funded, with comparatively low out-of-pocket payments. It has above-average numbers of doctors and nurses per capita in the EU, however it faces persistent labour shortages in ECEC staff, and nurses. This trend is notably exacerbated by demographic ageing. Under the cohesion policy funds (EUR 89 million), complemented by its RRP (15.26% of the plan, worse EUR 4.3 billion), Germany is investing in measures to improve healthcare accessibility, effectiveness, and resilience.

Country-Specific Recommendations

- CSR recommend to address the skills worker shortage by enhancing basic and digital skills, improving education outcomes with targeted support for disadvantaged groups.

GREECE

Despite funding efforts to enhance social inclusion and support for vulnerable groups, including children and persons with disabilities, challenges remain such as long-term unemployment, inadequate education, insufficient LTC, and limited healthcare access.

Country Report

- **SDGs:** While improving, Greece is underperforming and needs to catch up with the EU average on almost all fairness SDG indicators. After increasing in 2021, the proportion of people and of children AROPE decreased in 2022 and 2023 – still above the EU averages –. The social protection system has a limited ability to reduce poverty and inequalities. The ESF+ provides substantial funding (more than EUR 1.5 billion) for actions promoting social inclusion and tackling poverty.
- **Mid-term review of Cohesion Policy programmes:** The European Commission emphasised Greece's need to invest in skills, implement the Child Guarantee, promote quality and affordable LTC services and social housing, and improve labour market activation and social integration for marginalised communities.
- **Labour market:** Despite recent overall increases in the employment rate, entering work or training remains challenging for persons with disabilities, who continue to face some of the highest long-term unemployment rates in the EU (64.6% in 2022). The European Commission stressed the need to improve outreach, personalised activation services, and training, especially for vulnerable groups. Introducing an in-work benefit scheme could address labour shortages, promote inclusivity, boost employment among women, young people, and vulnerable groups. Greece's RRF and the ESF+ play a key role in these efforts to achieve national employment rate target of 71.1% by 2030.
- **ECEC and education:** Greece ranks last among EU Member States in terms of participation in ECEC which has been found to negatively affect subsequent education outcomes. The European Commission stressed the importance to enhance quality education to enhance equality, reduce socio-economic disparities, and ensure young people acquire essential skills, addressing skills mismatches and low adult learning participation.
- **Health and care:** Greece health and care sectors face several challenges. This includes significantly below-average public expenditure on LTC – even though the need for LTC is rising due to an ageing population – a severe shortage of formal LTC workers, a fragmented governance system, a lack of universal coverage with high out-of-pocket expenses, inadequate formal services, and heavy reliance on informal family caregivers. This led to rising self-reported unmet medical needs, surpassing the EU average. Greece has launched EU-supported initiatives to improve social and health services, including a pilot program under the RRF for independent living support for people with disabilities, set for nationwide expansion by mid-2025. Another pilot targets early childhood intervention for 1,400 children with disabilities. Additionally, Greece has established 50 mental health units and is renovating 80 hospitals. Future plans under the ESF+ aim to assist over 11,500 students with disabilities in education and to establish 1,200 social and health facilities across the country.

Country-Specific Recommendations

The European Commission did not include any specific CSRs related to disability, or social services, healthcare, children and education.

HUNGARY

Despite progress in tackling poverty and enhancing inclusion of persons with disabilities, Hungary still face greater challenges than others in accessing employment, education, healthcare, and social services. Hungary is making significant investments under the RRF to address these issues.

Country Report

- **SDGs:** On fairness, Hungary performs well in reducing poverty and inequalities but struggles with high AROPE rates for persons with disabilities (15.4 pps vs. 10.5 pps EU average in 2022). The country also lags in gender equality, health, well-being, and education compared to EU standards.
- **Mid-term review of Cohesion Policy programmes:** The European Commission advises Hungary to continue prioritising social inclusion, poverty reduction, strengthening basic skills, quality education and lifelong learning, though it faces limitations due to the conditionality mechanisms⁶.
- **Labour market:** Despite a high overall employment rate, disadvantaged groups such as persons with disabilities face barriers entering the labour market but also accessing upskilling opportunities. The disability employment gap remains among the highest of the EU (32.4 pps in 2022, 29.6 in 2023 vs. EU average 21.4 pps in 2022). Persons with disabilities also face lower basic skills, higher early school leaving rates, and lower education enrolment. Alongside RRF funds, Hungary allocates EUR 447 million from the ESF+ to implement the Reinforced Youth Guarantee, targeting the needs of vulnerable groups. This aims to improve education access, make teaching more attractive, support schools and vocational institutions, and increase participation among disadvantaged groups, promoting social mobility and reducing dropout rates through better outcomes and workforce training.
- **ECEC and education:** Participation in ECEC exceeds the EU average for children above 3 (93.4% vs. EU average 92.5% in 2021), however, it is below for children under the same age.
- **Health and care:** Hungarian health and care sectors face several challenges. The country has among the lowest health expenditure in the EU – despite having increased –, faces chronic shortage of medical professionals and public formal care services and assistance. This implies that families play a key role in financing and providing LTC. Hungary aims to address these issues with a high level of expenditure under its RRP (12.5% of the total value, worth EUR 1.3 billion) – one of the highest among EU countries – aiming to improve access to healthcare and social services. Complementary investments are planned under the EU cohesion policy funding for 2021-2027 (EUR 154 million).
- **Social Convergence Framework:** The challenges pointed out in the report are consistent with the second-stage analysis under the Social Convergence Framework. No major social convergence challenges have been identified.

Country-Specific Recommendations

⁶ The conditionality regulation is a tool designed to safeguard the EU's budget and financial interests from being compromised by breaches of the rule of law. In December 2022, based on a proposal from the European Commission, the Council decided to partially freeze Hungary's access to EU Cohesion Funds and RRF. As of December 2023, the European Commission has approved the partial release of Cohesion Funds.

- CSRs recommend to improve the social protection system, including unemployment benefits, and educational attainment levels, and to increase access to effective active labour market measures, particularly upskilling and reskilling opportunities for the most disadvantaged groups.

ITALY

Italy progress in reducing poverty and including vulnerable groups like persons with disabilities, children, and older people, with EU funds supporting reforms in healthcare, employment, and poverty reduction. However, structural issues and regional disparities persist.

Country Report

- SDGs:** While Italy is improving on almost all fairness SDG indicators, it still needs to catch up with EU levels on most of them. Despite being above the EU average, performance on good health and well-being has declined. The AROPE rate remains high (24.4% in 2022, vs. 21.6% in the EU), particularly for children (28.5%). To address this, Italy established in 2022, the *Assegno Unico e Universale per i Figli*, a new Universal child allowance. Additionally, started in 2024, the new minimum income scheme, *Assegno di Inclusione*, provides support primarily to households with children, persons with disabilities, or individuals over 60 who cannot work (a €350 monthly allowance for those below the income threshold while in training, up to 12 months)⁷. The country also continues to face significant regional disparities in access to public service and employment, notably in the South.
- Labour market:** Italy's labour market faces several challenges such as brain drains, skill mismatches, risks of shortages, high rate of youth NEET and a high gender employment gap. However, the disability employment rate is relatively low (14 pps in 2022). Cohesion policy funds finance national programmes *Inclusion and Poverty Reduction and Youth, Women and Jobs* aiding vulnerable groups such persons with disabilities to access the job market.
- ECEC and education:** The share of children under 3 in ECEC declined (91% vs. EU average 92.5%). The RRP and the ESF+ support new childcare places and the implementation of the European Child Guarantee.
- Health and care:** Historically, investments in healthcare have lagged, but EU funds provide substantial support. Italy's RRP (EUR 16.1 billion) supports community-based specialised structures and strengthening of the healthcare workforce. Additional EU cohesion funds (EUR 1.8 billion) focus on improving health services in less developed regions and enhance accessibility and capacity for vulnerable groups. Under its RRP, Italy is investing to improve the quality of life of persons with disabilities and giving them greater autonomy – alongside older people too –. The country has reformed its services for non-self-sufficient older people, and its Framework Law on disability⁸.
- Social Convergence Framework:** The second-stage analysis highlights challenges for social convergence in the labour market, social protection and inclusion, and education and skills, according to the Social Convergence Framework.

Country-Specific Recommendations

- CSR recommend to boost potential growth, address negative demographic trends by attracting and retaining high-skilled workers and tackling labour market challenges, especially for women, youth, and those in non-standard contracts facing in-work poverty.

⁷ However, the reform aims to reduce recipients, potentially increasing poverty, especially among children, according to the European Commission.

⁸ Adopted 2021, it establishes the direction of forthcoming reform regarding persons with disabilities: recognising the condition of disability, supporting independent life and measures for the protection and promotion of the rights of persons with disabilities.

IRELAND

Despite Ireland's strong equality record, integrating persons with disabilities into education, work or training remains challenging, leading to higher risks of poverty and social exclusion. Addressing these challenges requires improving access to social services and implementing targeted skills initiatives.

Country Report

- **SDGs:** Ireland excels in fairness SDG indicators, surpassing the EU average in reducing inequalities and poverty, access to health and education. Still, poverty and social exclusion remain challenging for vulnerable groups, including persons with disabilities whose AROPE rate slightly increased (39.5% in 2022), and is twice as high as for the total population. Ireland also continues to experience significant economic and social disparities between its metropolitan areas and other regions.
- **Mid-term review of Cohesion Policy programmes:** The European Commission advises Ireland to continue to improve access to social services and to implement targeted skills measures for vulnerable groups to address labour shortages, poverty, and social exclusion.
- **Labour market:** Despite record-high employment, Ireland has the highest disability employment gap of the EU (37 pps in 2022 vs. EU 21.4 pps). Persons with disabilities often live in low-work-intensity households, experience discrimination, and have limited job opportunities, contributing to high poverty rates. The fear of losing benefits also discourages their employment-seeking efforts.
- **ECEC and education:** ECEC attendance for children under 3 remains low (19.1% in 2022), falling short of the EU's 45% target and 35.9%'s average. The 2024 national budget proposed increased public funding, subsidies for parents, and an 'equal participation model' to provide free ECEC for disadvantaged families, aligning with the European Child Guarantee. The professionalisation of childcare workers also continues to be supported through the ESF+. Persons with disabilities experience high rates of early school leaving, lower attendance in post-secondary education, and lower tertiary educational attainment. Since 2022, the public employment services have reached out proactively to persons with a disability to raise awareness on the support that is available to them. The ESF+ also co-finances the Workability Programme, which will support 5 000 persons with disabilities to enter education and employment in 2021-2027.
- **Health and care:** Ireland's health and care sectors face several challenges. This includes financial pressures characterised by lower spending relative to GDP compared to the EU average (though higher per capita) and which are driven up by an ageing population, persistent shortages of doctors, absence of universal primary care coverage – the only country in the EU –. This increases pressure on hospitals with lengthy waiting lists or reliance on the private sector for those who can afford it. Ireland is allocating about 8.2% of the resources of its RRP to address these challenges.

Country-Specific Recommendations

- CSRs recommend to “address the expected increase in age-related expenditure by making the healthcare system more cost-effective”.

LATVIA

Latvia has made significant progress in addressing the needs of persons with disabilities, notably within the labour market. However, further efforts are required to increase access to community-based services for individuals with mental disabilities.

Country Report

- **SDGs:** Latvia is improving on all fairness SDG indicators such as the long-term unemployment rate or early leaves from education and training. It still lags behind the EU average in several areas, notably in the reduction of poverty and inequalities. This is primarily due to inadequate income redistribution and low public spending on social protection – among the lowest in the EU –. Socio-economic disparities remain also significant across regions, with rural areas more affected.
- **Labour market:** Latvia performs well in including persons with disabilities. The unemployment rate of persons with disabilities was 7.1% in 2022 (vs. EU 6.3%). The disability employment gap is also below the EU average (20.8 pps vs. 21.4% in 2022). The country is investing through the ESF+ to support more than 42 000 disadvantaged and unemployed people.
- **ECEC and education:** Participation in ECEC is nearly universal for children from three to the start of compulsory education (95.5% in 2022 vs. EU average 93.1%) but remain low for children under 3 years old (32.7% in 2022) – under EU average (35.7%). The country is investing through the ESF+ to provide access to ECE to over 1 200 disadvantaged children.
- **Health and care:** Latvia's health and care sectors face several challenges. Underfunding – among the lowest in the EU – combined with persistent professional shortage, severely restricts access to high-quality and timely care and restrict available care options, affecting notably LTC. EU funds support substantial investments with EUR 181.5 million under Latvia's RRP supporting enhanced resilience, access and quality of the health system and ESF+ supporting attractiveness and training of medical staff and the improvement of the healthcare quality assurance. Launched during the programming 2014-2020, the ESF+ continues to support the deinstitutionalisation process and the development of community-based care social, providing support to persons with disabilities – notably mental disabilities – (up from 20% in 2012 to 32% in 2021). However, further efforts are still needed. Social protection and inclusion of the most vulnerable, requiring affordable care and social housing, face obstacles due to limited services and low spending – among the lowest of the EU –⁹. A proposed legislative amendment for minimum services from 2024 to 2029 could, according to the European Commission, potentially mitigate these challenges if implemented promptly.

Country-Specific Recommendations

- CSRs recommend to broaden taxation, including of capital and property, and strengthen the adequacy of healthcare and social protection.
- CSRs recommend to accelerate the implementation of cohesion policy programmes. In the context of the mid-term review continue focusing on the agreed priorities, taking action to better address persistent regional disparities and inequalities while considering the opportunities provided by the Strategic Technologies for Europe Platform initiative to improve competitiveness.

⁹ This is primarily attributed to fragmented provision of social services across municipalities, resulting in unequal access and varying support quality.

LUXEMBOURG

In the Country Report and CSR, the European Commission does not raise particular challenges for persons with disabilities. However, Luxembourg still needs to address higher poverty rates among vulnerable groups and address labour and skills shortages, especially in the healthcare sector.

Country Report

- **SDGs:** Luxembourg performs well on gender equality, good health and well-being, and reduced inequalities. However, while the overall share of people AROPE is below the EU average and declining (from 21.1% in 2021 to 19.4% in 2022), certain groups remain disproportionately affected, notably people born outside the EU. Measures under the ESF+ will help further reduce poverty, including child poverty, by assisting people from vulnerable groups to find jobs or training.
- **Labour market:** The country is one of the best performers with a disability employment gap of 8.5 pps (vs. EU 21.4 in 2022).
- **ECEC and education:** Luxembourg performs relatively well in comparison to the EU average (35.7%), with 54.7% of children aged less than 3 that attend ECEC. However, From the age of 3, participation in ECEC is below the EU average (88.9% vs. 92.5% in 2021). The enrolment gap between children AROPE and those not at a risk is increasing since 2021 and reached of 24.9 pps in 2022.
- **Mid-term review of Cohesion Policy programmes:** The European Commission advice Luxembourg to keep a particular attention to the implementation of the European Child Guarantee. This includes measures to promote the integration of disadvantaged pupils through quality education and training.
- **Health and care:** Public expenditure on health as a proportion of total health spending is also among the highest in the EU and above the EU average. Nevertheless, Luxembourg faces a shortage of doctors. The national health strategy included in the RRP aims to address these shortages by decreasing reliance on foreign health professionals.

Country-Specific Recommendations

- CSRs recommend to “broaden taxation, including of capital and property, and strengthen the adequacy of healthcare and social protection”. The AROPE rate and of monetary poverty after social transfers went up in the past years.
- CSR recommend to “address labour and skills shortages, in particular in STEM, and in other specialisations needed for the green and digital transition, as well as in the social and healthcare sectors, including through targeted upskilling and reskilling”.

LITHUANIA

Despite reforms, persons with disabilities face significant challenges, including high poverty rates, limited labour market access, and disparities in education and health outcomes. The country is significantly using EU funds to support reforms and investment in healthcare and address regional disparities.

Country Report

- **SDGs:** Lithuania excels in gender equality and reducing inequalities but falls short in health and education compared to EU averages. Despite overall improvements, vulnerable groups, like older persons and those with disabilities, face higher poverty and poorer outcomes. The AROPE rate for persons with disabilities rose from 38.9% in 2021 to 44.3% in 2022. Recent reforms may help reduce poverty among these groups.
- **Mid-term review of Cohesion Policy programmes:** The European Commission advises Lithuania to continue to support education quality and inclusiveness, implement the European Child Guarantee, enhance upskilling and reskilling, and improve social and health services access.
- **Labour market:** Persons with disabilities face strong barriers with a disability employment gap recording a spike from 23.9% (2021) to 35.0% (2022), one of the highest levels in the EU¹⁰.
- **ECEC and education:** Despite rising participation in ECEC for children above 3 years old (from 88.1% in 2016 to 92.1% in 2021 vs. EU average 92.5%), shortages threaten education quality.
- **Health and care:** Lithuania’s health and care sectors face several challenges. This includes low public spending – among the lowest in the EU – shortages and uneven distribution of health professionals, and an increasing demand from an ageing population, posing challenges to timely and quality access to healthcare. EU cohesion funds support wage increases, bolster the healthcare workforce, improve infrastructure, and enhance the accessibility, quality, and resilience of healthcare services. 7% of the RRP’s total value (EUR 268 million) is invested in healthcare, supporting notably the creation of a system to monitor care quality. Lithuania is also developing a LTC model to better integrates social and health services and enhance patients support. To improve social services, a new legislation will enable a consortium of organisations, selected through a tender process, to provide training, methodological assistance, and community-building services for social workers. Finally mental health is a key priority for Lithuania’s forthcoming national strategies.
- **Social Convergence Framework:** Findings of the report are “consistent with the second-stage analysis in line with the features of the Social Convergence Framework”. The analysis highlights challenges with high poverty or social exclusion rates and income inequality but notes positive developments in employment and no major social convergence issues overall in Lithuania.

Country-Specific Recommendations

- CSRs recommend to “provide adequate financing for healthcare, social protection and general public services.”
- CSRs recommend to “enhance health outcomes and system resilience by boosting primary and preventive care and increase old-age pensions while ensuring system sustainability”.
- CSRs recommend to “address skills mismatches by improving the labour market relevance of higher education.”

¹⁰ National data suggest more positive outlook, but outcomes of recent public interventions may take time to be reflected.

MALTA

Persons with disabilities continue to encounter strong inequalities and obstacles to enter the labour market or to access education and training. Nevertheless, Malta is effectively supporting persons with disabilities through various EU funding sources, notably RRF funds and the ESF+.

Country Report

- **SDGs:** On fairness SDGs, Malta is improving on education and gender equality though still below the EU average. Performance is deteriorating on poverty, reduced inequalities, good health and well-being. Despite being below the EU average, the share of people AROPE is rising and remains particularly high among persons with disabilities (36% in 2022). Under the 2014-2020 programming, almost 11,000 vulnerable people, to whom 17% were disable, benefited from active inclusion and anti-poverty measures, financed by the ESF+.
- **Mid-term review of Cohesion Policy programmes:** The European Commission advises Malta to continue to promote social and labour integration of persons with disabilities.
- **Labour market:** Despite a performing labour market, persons with disability face significant barriers with a disability employment gap at 30.1 pps in 2022, far above the EU average (21.4 pps), and one the highest. Only half of working-age persons with disabilities are active in the labour market. Employment activation measures under the ESF+ aim to tackle this issue. The ESF+ Operational Programme provides targeted support for persons with disabilities after education, offering training for work and independent living, as well as work exposure, apprenticeships, job coaching, and mentoring services.
- **ECEC and education:** The proportion of children under 3 years in ECEC rose sharply from 24% in 2021 to 43.1% in 2022 (compared to the EU average of 35.9%). However, participation for children above 3 is continuing to fall (95% in 2016 vs. 86.2% in 2021 vs. EU average 92.5% in 2021). The implementation of the European Child Guarantee is underway to address these issues, although some measures lack specified target values. EU funds finance substantial inclusive education policies for persons with disabilities. The ESF+ support the adaptation of educational facilities for students with disabilities while the RRF introduced multi-sensory learning rooms and autism units in schools to integrate students with special needs.
- **Health and care:** From 2019 to 2021, health spending relative to GDP significantly rose, reaching almost the EU average, however public health spending is historically low and below EU average (67.4% vs. 81.1% in 2021), despite having one of the highest increases of the EU – due to the ageing of the population. EU funds support substantive investment in healthcare. Investments under European Structural and Investment Funds programmes aim to shift chronic disease treatment from costly hospital care to primary and community care settings. On their side, RRF fundings and the ESF+ focus on strengthening the accessibility, effectiveness, and resilience and the health system.

Country-Specific Recommendations

- CSRs recommend to continue promoting the social and labour market integration of vulnerable groups, with the focus on non-EU nationals and people with disabilities, as well as on gender equality.

- CSRs recommend to strengthen the quality and labour market relevance of education and training to address low educational outcomes as well as the severe shortage and mismatch of skills, in particular by fostering basic skills of students and the professional development of teachers.

NETHERLANDS

Persons with disabilities face persistent inequalities, including higher risks of poverty and barriers to access employment. Addressing these challenges is crucial for The Netherlands to achieve its 2023 poverty reduction goals and to improve labour productivity.

Country Report

- **SDGs:** The Netherlands performs very well on most fairness SDGs. However, while still being above the EU average, it is moving away from the target on no poverty, and on reduced inequalities. Despite stable and below EU average AROPE rates, a quarter of people with disabilities face a significant risk – more than the double of the rate of those without disabilities (in 2022).
- **Mid-term review of Cohesion Policy programmes:** The European Commission advises The Netherlands to continue to focus on reducing social and labour market inequalities through investments in equal opportunities and combating discrimination.
- **Labour market:** The disability employment gap has known a slight narrowing in 2022, bringing it closer to the EU average (25.2 vs. 21.4 pps). Despite higher participation in vocational education and adult learning compared to other EU countries, certain groups participate less. This includes lower-skilled individuals, people in temporary contracts, people in long-term unemployed, and those out of the labour force. The Netherlands aims to use ESF+ funding to enhance employment and training opportunities for these groups, addressing labour shortages and maximising their skills and potential.
- **ECEC and education:** Participation in ECEC for children under 3 (73.3% in 2022) and above 3 (93%) exceed EU averages, making the country one of the best performers. A special form of ECEC is the ECE scheme for disadvantaged children. Although the number of children from the target group remained stable from 2019 to 2021, there was a decrease in available places from 2020 to 2021, particularly in moderately and highly urban areas.
- **Health and care:** The Netherlands has a well-developed health and care sectors, and especially strong primary care and LTC systems. Both are supported by high public expenditure, slightly above the EU average. The level of LTC spending is indeed the highest in the EU and is expected to continue to increase due to demographic shifts. The Netherlands allocates 3.15% of its RRP to healthcare, complemented by Cohesion Funds. While the near-universal coverage system reduces reliance on informal caregivers, there is still room to improve LTC efficiency. The European Commission stressed the need to address incentives for premature transitions to residential care.
- **Other:** The Netherlands has an extensive system of allowances supporting households to cover costs related to housing, healthcare and childcare with extra support for disadvantaged groups.

Country specific recommendations

- CSRs recommend to align the taxation of different types of income from wealth, amongst others, to reduce the household debt bias. Remove obstacles to the construction of new dwellings and ensure

the affordability and availability of housing in the private rental market. Address the expected increase in age-related expenditure by making the long-term care system more cost-effective.

- CSRs recommend to improve basic skills, address teacher shortages and support disadvantaged schools.

POLAND

Despite inclusive measures, persons with disabilities still encounter challenges in education and employment, hindering their social and economic participation. Poland aims to improve access to formal home-based and community care for persons with disabilities through RRP and ESF+ funding initiatives.

Country Report

- **SDGs:** Poland is making progress on most fairness SDGs, outperforming the EU average in poverty indicators, early leavers from education and training. However, gaps in social protection remain and result in higher at-risk-of-poverty rates for those in non-standard work, older people, and women.
- **Mid-term review of Cohesion Policy programmes:** The European Commission advises Poland to continue to enhance measures that facilitate employment for women and persons with disabilities, addressing regional disparities in access to quality and affordable childcare, and improving accessibility to high-quality, affordable and community-based LTC services.
- **Labour market:** The employment gap for people with disabilities remains significantly above the EU average (31.3 pps in 2022) despite a slight decrease (34.2 pps in 2021). Disability or illness is a major cause of economic inactivity. In 2020, 69% of working-age individuals with a documented disability were inactive. Integrating disadvantaged groups into the labour market is essential, according to the European Commission, as it will help to increase competitiveness. Under the ESF+ and its RRP, Poland is investing to address the low number of adults in learning and labour and skills shortages, and support upskilling and reskilling.
- **ECEC and education:** Participation in ECEC stagnated with low rates – below EU averages – for children above (90.4% in 2021), and for children of 3-year-olds+ (76.2% in 2022) – that may affect disadvantaged children – To address these issues Poland supports the development of quality standards for childcare and the establishment of new childcare facilities through ESF+ and RRF. What is more, despite inclusive measures, the share of young people with disabilities who are NEET is one of the highest in the EU (46% in 2023) and the tertiary education gap for this category was 21.4 pps in 2020-21 - above the EU average.
- **Health and care:** Poland's health and care sectors face several challenges, including low public funding, a severely underfunded, underdeveloped and fragmented LTC system, shortage of medical and LTC staff, very low coverage of publicly funded home care and residential care. The European Commission stressed the need to ensure stable and sufficient public financing due to rapid demographic changes. Poland allocates a significant portion of its RRP' funding to health. In complement, the ESF+ supports the improvement of accessibility, effectiveness, and resilience of the healthcare system. Due to the insufficient provision of residential and non-residential services, the care for older people and people with a disability is mainly informal and falls on family members, especially women. The European Commission stressed that improving access to formal home-

based and community-based LTC could foster Polish economic activity among informal caregivers – mostly women – and increase labour market participation.

Country-Specific Recommendations

- CSRs recommend to take steps to increase labour market participation of disadvantaged groups, including by improving quality of and access to formal home- and community-based LTC.

PORTUGAL

Portugal shows relative strength in including persons with disabilities in education and employment and took significant steps in upholding the rights of persons with mental health illnesses and supporting community-based care services. Nevertheless, continuous and further efforts are still needed.

Country Report

- **SDGs:** Portugal is improving on fairness SDGs, notably with an AROPE rate below the EU average (20.1% in 2022). Still, the country has to catch-up with the EU average on health and well-being. The urban-rural gap has widened significantly, well above the EU average with outermost regions primarily affected by poverty and social inclusion issues.
- **Mid-term review of Cohesion Policy programmes:** The European Commission advises Portugal to continue to “support education and training, the development of qualifications and skills demanded by the labour market, and targeted active labour market policies, especially for young people, ensuring equal access to education, health and social services” particularly for disadvantaged groups.
- **Labour market:** The country is one the best performs with a disability employment gap at 13.1 pps in 2022 (vs. Eu average 21.4 pps).
- **ECEC and education:** The rates of children aged 3 and over attending ECEC decreased (2.4 pps less than in 2020), still below the EU average (90.5% vs. 93.1% in 2021). However, on participation of children under 3, Portugal performs relatively well (47.2% vs EU average 35.7%). To enhance overall participation, the government has, in 2022, set out specific conditions for rolling out free childcare and family day care centres for all children born on or after 1 September 2021. The country also aims to create up to 15 000 new ECEC places by 2026 through the PARES programme.

Health and care: Severe underfunding – less than a quarter of the EU average – along with skills and staff shortages and a rapidly ageing population, significantly impact access to adequate LTC services and other health services. Long waiting lists due to shortage is a primary barrier to access mental health services. Portugal is taken major steps. It adopted in 2021 a [Mental Health Decree](#) that establishes principles for organising, managing and evaluating mental health services¹¹. 7.7% of its RRP is allocated to healthcare, supporting reforms of primary care services, simplification of the social benefit system, and community-based social services, particularly in mental health and LTC services. In 2022, the country adopted a new [Mental Health Law](#) that regulates the rights of people

¹¹ This reform established better conditions for the de-institutionalisation of people with mental illnesses, expanding local and integrated continuous care services, reorganising forensic psychiatric services, and implementing regional health plans for dementia.

with mental illness¹². Complementary investments are made under the cohesion policy funds for 2021-2027, focusing on developing and renovating NHS healthcare facilities, enhancing family and community-based care services, and improving the accessibility of health services in less developed regions.

Country-Specific Recommendations

The European Commission did not include any specific CSRs related to disability, social services, healthcare, children, and education.

ROMANIA

Persons with disabilities continue to face substantial obstacles in accessing quality education, employment, training opportunities, and affordable, high-quality community-based social and care services. The country focuses its investments to address these issues through RRF and cohesion funds.

Country Report

- **SDGs:** Despite progress in poverty reduction, Romania remains well below the EU average on most fairness SDG indicators. It has high poverty and inequality levels, affecting especially rural residents, older adults, children, the Roma community and persons with disabilities.
- **Labour market:** Participation is low among persons with disabilities with an unemployment gap about 32 pps in 2022 (vs. EU average 21.4 pps). Ineffective public employment services and low public expenditure, hindering reskilling and labour market participation, make harder employment prospects for them. The European Commission stressed the need to increase investments to integrate these groups and support more inclusive economic growth. Romania's RRP includes reforms to improve the protection system for adults with disabilities and introduce upskilling and reskilling schemes. ESF+ supports targeted activation measures and promotes social inclusion for vulnerable populations.
- **ECEC and education:** Romania's education system faces quality and inclusivity challenges, with critical level of ECEC participation for children under three (12.9 vs. EU average 35.7% in 2022) and low one for children above 3 (75.6% vs. EU 92.5% in 2021). Romanian RRP aims to reform compulsory education and to invest in continuous training for early-childhood educators.
- **Health and care:** Romania's health and care sectors face inadequate and uneven coverage of quality, affordable care services, notably LTC. In 2022, 16.4% of persons with disabilities report unmet medical needs (vs. 4.1% in the EU). The limited availability and affordability of non-residential, community-based care services impede deinstitutionalisation and transition to independent living for people with disabilities. Cohesion policy funds and the RRP aim to improve health infrastructure, equipment, enhance access to basic services in disadvantaged areas, and support deinstitutionalisation and social innovation for better access to services for persons with disabilities. Romania adopted guidelines for the deinstitutionalisation of persons with disabilities and the prevention of institutionalisation and agreed on a national LTC strategy. It also plans

¹² The new law focuses on providing person-centred care that acknowledges individuals' unique needs, and autonomy. A central objective is to complete the transition toward community-based mental health care services.

legislation to implement the European Child Guarantee to prevent family separations and support at-risk children¹³.

- **Social Convergence Framework:** The second-stage analysis, aligned with the Social Convergence Framework, highlights significant challenges in Romania’s social situation, education, skills, and labour market. Significant efforts are crucial to deliver on the European Pillar of Social Rights and foster upward social convergence.

Country-Specific Recommendations

- CSRs recommend to “significantly accelerate the implementation of cohesion policy programmes and the recovery and resilience plan”. “In the context of the mid-term review, continue focusing on the agreed priorities, taking action to better address the needs regarding social housing, the related social services and the development of smaller urban areas”.

SLOVAKIA

Roma children face significant segregation, notably in overrepresentation within special educational needs schools and classes for mental health issues or disabilities. The country also needs to invest in ECEC and to bolster its healthcare system.

Country Report

- **SDGs:** Slovakia performs better than the EU average on non-poverty indicators and is improving on quality education indicators despite still lagging behind the EU average. The country performs well in reducing the number of people AROPE, however, children remain vulnerable, and regional disparities persist. According to the European Commission, further action is needed to address child poverty and to implement the European Child Guarantee recommendation. Overall, the country needs to catch up with the EU average on most of the other’s fairness SDGs.
- **Labour market:** The disability employment gap was about 21 pps in 2022, in line with the EU average (21.4 pps).
- **ECEC and education:** Despite recent favourable actions, levels of enrolment are critical. Participation for children below 3 in ECEC in 2021 was only about 2.3% (vs. EU average 35.7%), and in ECE in 2022 for children above 3 about 77.4% (vs 92.5% in the EU). This can be explained by a lack of available places and a negative perception of it. The European Commission identifies significant potential to increase ECEC enrolment answering these two issues. The Commission also identified as the most pressing issue is the high proportion of Roma students placed in special educational needs schools and classes for pupils with mental health issues or disabilities. To address these concerns, the Slovakian RRP – in synergy with several projects under the ESF+ – includes measures to improve pupils’ skills and make the education system more inclusive and equitable by creating more places in pre-school, updating school curricula, and addressing Roma segregation.
- **Health and care:** Slovakia’s health and care sectors face several challenges. This includes public health spending that remains significantly below the EU average, a long-standing shortage of doctors and nurse, and pressures on the LTC system due to the ageing of the population. This poses challenges to the long-term sustainability of public finances, leading to higher spending on pensions,

¹³ This includes counselling, parental support, professional training, and support for multifunctional sports and cultural facilities, infrastructure and services in day centres for children vulnerable, with disabilities, and problematic behaviours.

healthcare, and LTC. To address these challenges, Slovakia makes use of substantial EU funds. Under its RRF, EUR 1.15 billion are allocated to enhance the physical and digital infrastructure and improve the quality, accessibility, and efficiency of the healthcare system. An additional EUR 166 million is invested to improve accessibility for disadvantaged groups through the 2021-2027 EU cohesion policy.

Country-Specific Recommendations

- CSRs recommend to strengthen the teaching of basic skills, including for children from disadvantaged backgrounds – only Romas are specifically mentioned – and increase the availability and use of affordable high-quality ECE and care for children under the age of 3.

SLOVENIA

Persons with disabilities do not face significant barriers in entering the labour market. However, they encounter challenges in accessing affordable housing and schools that meet the needs of those with reduced mobility. The country also needs to accelerate deinstitutionalisation, improve the quality and affordability of community-based social services, and address inefficiencies in mental health services.

Country Report

- **SDGs:** Slovenia performs well or is improving on some fairness SDG indicators such as no poverty, reduced inequalities or quality education, but needs to catch up with EU average on access to healthcare. Despite low levels, some categories are also more AROPE (older people and women).
- **Mid-term review of Cohesion Policy programmes:** The European Commission advises Slovenia to continue to focus on accelerating deinstitutionalisation and development of quality, adequate and affordable community-based social services, particularly LTC, and to increase social inclusion.
- **Labour market:** In 2023, Slovenia’s labour market remained stable, marked by high employment and historically low unemployment. The country performs relatively well with a disability employment gap below the EU average (18.6 pps in 2022 vs 21.4 pps), yet older individuals continue to encounter barriers.
- **ECEC and education:** Participation in ECEC is relatively high for children under 3 – around the EU average (92.3% vs. 92.5% in 2021) – and for children above 3 – above the EU average (92.3 vs. 92.5 in 2022). Early school leaving is also low. Still Roma children remain much more excluded and children with disabilities still face issue to access education. The European Commission stressed the need for additional efforts to be set up to support the inclusion of children with special needs. Indeed, currently only about 26% of secondary school facilities in Slovenia are equipped to accommodate the needs of children with reduced mobility.
- **Health and care:** Slovenia’s health and care sectors face several challenges. These include decreasing public health spending in 2022 (relative to GDP), which is below the EU average, shortages of professionals, lack of timely access to publicly funded health services, a shrinking list of fully funded services, and higher reported unmet medical needs compared to the EU average (3.7% vs. 2.2% in 2022). The European Commission stressed how important it was for Slovenia to overcome the fragmented management of mental health services and addressing staff shortages to improve prevention and care for mental health conditions. This includes training primary care staff, establishing care networks for integrated care, mental health, and community-based services, enhancing infrastructure for communicable diseases, digitalising healthcare, and improving the resilience, effectiveness, and accessibility of health services. However, for now, Slovenia has not yet achieved significant results.
- **Other:** Although the housing cost burden is lower than the EU average, affordability remains a significant challenge, including for persons with disabilities. Alongside actions under ESF+, through its RRP, Slovenia plans to buy or build nearly 5,000 non-profit flats by 2026, enhancing access to affordable rental housing.

Country-Specific Recommendations

- CSRs recommend to “accelerate the implementation of the cohesion policy programmes. In the context of their mid-term review, continue focusing on the agreed priorities”.

SPAIN

Despite a better integration into the labour market in comparison to other vulnerable groups, persons with disabilities still encounter a higher risk of poverty, and so do children. Spain also faces challenges in providing adequate primary and community care which it aims to address through investments in the modernisation of these sectors under cohesion and recovery funds.

Country Report

- **SDGs:** While Spain is improving on fairness SDG indicators, it still lags behind the EU averages in no poverty, reduced inequalities, and decent work. Despite progress in reducing the number of people AROPE, Spain remains among the top EU countries facing high rates, notably for persons with disabilities (30%) and children (32.2%). Spain adopted measures to strengthen social and territorial cohesion and reduce poverty. Cohesion funds benefit vulnerable groups and people AROPE and supports the implementation of the European Child Guarantee. A national minimum income scheme was also created in 2020 to support vulnerable families and will be enhanced by RRP measures and cohesion policy funds.
- **Labour market:** The country faces challenges, including significant skills gaps and high unemployment rates among young people, migrants, and older workers, but not among persons with disabilities whose employment gap was well below the EU average in 2022 (14.6 pps vs. 21.4 pps). RRP measures and cohesion policy aim to improve skills training, support active labour market policies and social convergence and territorial cohesion to support a sustainable competitiveness.
- **ECEC and education:** Participation in ECEC for children under 3 and for children above 3 surpass EU averages (respectively 48.6% vs. 35.7% in 2022, and 96% vs. 92.5% in 2021).
- **Health and care:** Spain's health and care sectors face several challenges. This includes health spending slightly below the EU average in 2021, limited investment in primary care, a shortage of healthcare professionals, and underserved public services – especially primary care – for vulnerable groups and non-urban areas. The government has initiated an action plan under the RRP to modernise primary and community care. In addition, Spain is investing in healthcare infrastructure, e-health equipment and the improvement of local social services under cohesion policy funds (2021-2027).
- **Social Convergence Framework:** “These findings are consistent with the second-stage analysis in line with the features of the Social Convergence Framework. The analysis points to challenges related to the transition from education to the labour market as well as to child and energy poverty and the impact of social transfers but does not point to major social convergence challenges for Spain overall, in light of the positive developments recorded, especially in the labour market”.

Country-Specific Recommendations

- CSRs recommend to “accelerate the implementation of the cohesion policy programmes. In the context of their mid-term review, continue focusing on the agreed priorities”.

SWEDEN

While Sweden excels in fairness, persons with disabilities still face barriers, especially in accessing the labour market. The government is addressing these challenges through initiatives focused on upskilling and reskilling. Additionally, it is advancing strategies to improve mental health care accessibility and services.

Country Report

- **SDGs:** Sweden performs well on most fairness SDGs, but it is moving away from SDG 1 with poverty and income inequalities having increased in 2022. In 2022, 18.6% of people were AROPE, highest figure ever recorded for the country since 2015 (still below the EU average of 21.6%), affecting primarily people born outside the country.
- **Labour market:** The country continues to face difficulties in integrating vulnerable people, primarily people born outside the EU and persons with disabilities. The last has seen its employment gap widening in 2022, again above the EU average (25.7 pps). Integrating these persons should continue to be a priority, according to the European Commission, benefiting growth and reducing poverty risks. Together, cohesion policy funds and the RRF support measures to foster lifelong learning, vocational education, and skills development, helping people to better integrate the labour market.
- **ECEC and education:** There is a shortage of qualified teachers at most levels of education, with significant regional and local variations, especially in ECEC. However, despite this, participation rates remain high for children under 3, and children above 3 (respectively 54.4% in 2022 and 96.1% in 2021). Overall, declining educational outcomes, especially among disadvantaged groups, are adversely impacting future skills development and competitiveness.
- **Health and care:** In 2021, total healthcare expenditure in Sweden slightly decreased to 11.2% of GDP but remained above the EU average (10.9%) and was at 85.9% publicly funded (vs. EU average 81.1%). The largest portion of health spending (about one-third) was allocated to outpatient care, including home care. The Swedish RRP incorporates measures to enhance the accessibility, capacity, and resilience of healthcare and LTC systems, such as funding to municipalities for the ‘Elderly Care Initiative’ to train over 10,000 employees working in elderly care to improve their skills. Sweden is roughly one out of six individuals experienced a mental health issue in Sweden in 2019, a rate similar to the EU average. A recent Eurobarometer survey has shown that Swedish people face difficulties accessing mental health services due to long waiting lists and delays in diagnosis or treatment for themselves or their family members. To address the issue, the government is developing a new mental health strategy aimed at tackling mental illness and promoting suicide prevention.

Country-Specific Recommendations

- CSRs recommend to “accelerate the implementation of the cohesion policy programmes. In the context of their mid-term review, continue focusing on the agreed priorities”.
- CSRs recommend to improve educational performance, including of students with disadvantaged socio-economic and migrant backgrounds, by addressing the persistent shortage of qualified teachers, by ensuring equal access opportunities to the schooling system and by further supporting the transition of students to upper secondary school. Develop the skills of the labour force,

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for Persons with Disabilities

particularly those from disadvantaged socio-economic and migrant backgrounds, through targeted policy measures and resources, to improve their integration into the labour market.