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Hungary

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Introduction

This collection of country reports is part of the research on Digital Skills, Accommodation and Technological Assistance for Employment, conducted by the European Disability Forum (EDF) with the support of [Google.org](https://www.google.org).

The aim of the study is to explore the situation of persons with disabilities in the open labour market, focusing in particular on the potential of digital skills training and the use of accessible and assistive technologies to foster inclusion in the workplace.

National experts from each EU Member State (with the exception of Luxembourg) and the UK analysed their respective national contexts. They outline policies and programmes to support reasonable accommodation as a Human Resources (HR) procedure, map trends in the use of accessible and assistive technologies in the workplace, and explain the main limitations experienced by employees with disabilities in acquiring accessible or assistive technology that meets their needs. They also analysed the barriers faced by persons with disabilities related to digital skills and highlight some good practices at national level.

The national reports cover the following countries: the UK, Austria, Belgium, Bulgaria, Croatia, Cyprus, Czechia, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Malta, the Netherlands, Poland, Portugal, Romania, Slovakia, Slovenia, Spain and Sweden. Luxembourg is the only EU Member State that is not part of the study due to not finding a suitable national expert on the topic.

Glossary

Assistive devices: external devices that are designed, made, or adapted to assist a person to perform a particular task. Many people with disabilities depend on assistive devices to enable them to carry out daily activities and participate actively and productively in community or professional life.

Assistive technology: any item, piece of equipment, service or product system including software that is used to increase, maintain, substitute or improve functional capabilities of persons with disabilities or for, alleviation and compensation of impairments, activity limitations or participation restrictions.

Disability allowance: payments that persons with disabilities can receive from the State to cover basic living costs and services.

Discrimination: any distinction, exclusion or restriction on the basis of one or several grounds (sex, race, disability, sexual orientation, gender identity, etc.) that damages or nullifies the recognition, enjoyment or exercise of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field, on an equal basis with others.

European Union (EU): a unique economic and political union between 27 European countries, as it stands at the time of publication of this report.

EU Statistics on Income and Living Conditions (EU-SILC): a regular cross-sectional and longitudinal sample survey by Eurostat that provides data on income, poverty, social exclusion and living conditions in the European Union.

General Comment: a General Comment is a treaty body's interpretation of human rights treaty provisions, thematic issues or its methods of work. General Comments often seek to clarify the reporting duties of State Parties with respect to certain treaty provisions and suggest approaches to implementing those provisions.

Member State(s) (of the EU): the EU currently consists of 27 countries, also called "Member States". Each Member State is party to the founding treaties of the European Union and is therefore subject to the privileges and obligations of membership. Unlike members of most international organisations, the Member States of the EU are subject to binding laws in exchange for their representation within the common legislative and judicial institutions.

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Number of observations (n): indicates the number of employers each national expert managed to interview.

Open labour market: this refers to work in a mainstream or “regular” employment setting, as opposed to a setting that has been created specifically to employ a specific group of employees, such as persons with disabilities.

Organisations of Persons with Disabilities (OPD): represent the interests of their members with disabilities and have the mandate to advocate for the realisation of their human rights and lobby for the consideration of their interests.

Percentage points: this term expresses the arithmetic difference of two percentages, whereas percent (%) refers to the rate of change. For example, if Country A has an employment rate of 30% and Country B has an employment rate of 60%, Country B’s employment rate is 30 percentage points higher than Country A’s but is also higher by 100%.

Persons with disabilities: individuals who have long-term physical, mental, intellectual or sensory impairments which, in interaction with various barriers, may hinder their full and effective participation in society on an equal basis with others.

Reasonable accommodation: the necessary and appropriate modification and adjustments, where needed in a particular case, to ensure to persons with disabilities the enjoyment or exercise on an equal basis with others of all human rights and fundamental freedoms. To be “reasonable”, the accommodation cannot impose a disproportionate or undue burden. Denial of reasonable accommodation is a form of discrimination.

The Digital Economy and Society Index (DESI): an index that the European Commission reports between 2014-2022, monitoring Europe’s overall digital performance and tracks the progress of EU countries in their digital competitiveness.

United Nations Convention on the Rights of Persons with Disabilities (CRPD): an international human rights treaty that reaffirms that all persons with disabilities must enjoy all human rights and fundamental freedoms. The CRPD clarifies that all persons with disabilities have the right to participate in the civil, political, economic, social and cultural life of the community in the same way as anyone else.

National Overview

The 2011 census by the Hungarian Central Statistical Office (KSH) provides the most accurate statistics on people with disabilities in Hungary¹. In 2011, 490,578 people identified themselves as disabled in Hungary, which was 4.9% of the total population². When asked, “What barriers do you perceive due to your disability?”, 356,000 respondents named at least one barrier. The most common barriers were “difficulties in everyday life” and “transport”.

The educational attainment of people with disabilities is much lower than that of the total Hungarian population. The number of people with disabilities aged 15 years and above was 467,388 in 2011. The highest level of education was 8 years of primary school or lower for 53% of this sub-population; only 38% had secondary education, and 9% had tertiary education. In the same year, the number of unemployed persons with disabilities was 15,967, while the number of employed persons was 65,581³. This means that altogether 17% of persons with disabilities belonged to the economically active population, of which 14% were employed. In comparison, the rate of employment was 45% of the total population⁴.

While there is no difference in the sex ratio compared to the total population, there is a significant difference in the age structure: the proportion of children is much lower among people with disabilities, while the older age group is overrepresented. The difference in age structure also explains why the proportion of old-age pensioners is high among persons with disabilities. If it is impossible to find a job, the only means of subsistence for people with disabilities is some form of disability benefit: a quarter of this group are disability pensioners or receive an accident allowance⁵.

Disabled people are at a disadvantage in the labour market, but if the disabled person is also female and has a lower level of education, their disadvantage increases. Place of living also affects employment opportunities among disabled persons, just like in the total population: as one moves from the capital to the municipalities, the probability of entering the labour market decreases⁶. According to Eurostat, the disability employment gap in Hungary was 32.4 percentage points in 2022, significantly above the EU27 average of 21.4 percentage points⁷. The measure shows no significant change over time (this value was 33.2 percentage points in 2014) and indicates only a slight difference across gender (31.1 percentage points for women and 32.8 percentage points

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for men). Persons with disabilities belong to the large pool of people who could be integrated more into the labour market, together with women with care responsibilities, low-skilled workers, and Roma people. Unless further efforts are made in this area, it will be challenging for Hungary to reach the national employment target of 85% by 2030⁸. A question not covered in the statistics is the exclusion of disabled persons' family members from the labour market due to care, supervision, and personal assistance needs.

Digital Skills

Hungary ranks 23rd out of 27 EU Member States in the Digital Economy and Society Index (DESI) 2021. Hungary scores above average on broadband connectivity and performs well in 5G readiness, but in terms of human capital, it ranks 22nd, scoring below average on most of the indicators. The most challenging areas are the integration of digital technology and digital public services. Only 46% of SMEs have at least a basic level of digital intensity, compared with a 60% average for the EU, and the adoption of key digital technologies (big data, AI, and cloud) is low⁹. The share of Hungarians reaching at least a basic level of digital literacy is below the EU average, but the situation is much worse among disadvantaged groups¹⁰.

Even if young people tend to be highly tech-oriented in Hungary too, only one fifth of primary school pupils learn in a digitally well-equipped school. The proportion is higher among secondary school pupils, but below the European average at all levels, according to a study by Deloitte and Ipsos for the European Commission¹¹. As part of the planned Operational Programme Digital Renewal Plus (DIMOP Plus), in the priority project 'Development of basic digital competence for citizens', Hungary will organise training for 110,000 people with no digital skills, including 1,100 participants with disabilities¹². The Hungarian Recovery and Resilience Plan also promotes digital transformation and contains reforms and investments aimed at improving the quality of education and training, including programmes for disadvantaged students and vulnerable groups¹³.

Hungarian persons with disabilities are a diverse sub-group from the aspect of digitalisation with many different needs. Research shows that there is a significant difference in the use of info-communication technologies (ICTs) among people with different disabilities (i.e. the visually impaired, the hearing impaired, the mobility-impaired, and the mentally disabled). The proportion of elderly people among the mobility-impaired is high, and they are less likely to use smart ICT devices. The visually impaired, on the other hand, have a higher level of education than the mobility-impaired, and younger people are more represented among them, which means that they use modern technologies to a much greater extent. For people with intellectual disabilities, even access to digital equipment is difficult for financial reasons. Table 1 illustrates the diversity in the use of digital devices by persons with disabilities and the general prevalence of mobile phone technology¹⁴.

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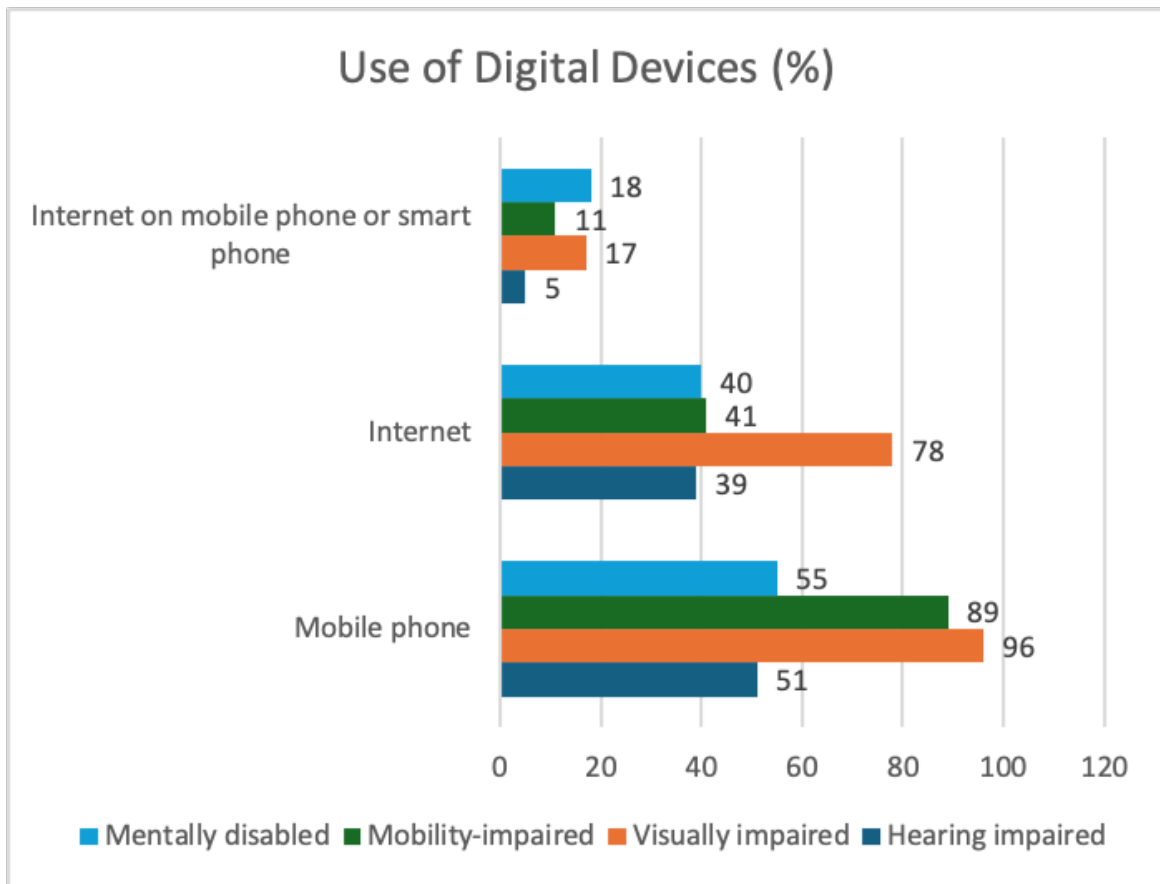


Table 1. Research, Consumer Awareness (Participatory Consumer Perception Research), Highlights, 2013, 2014. (NMHH, 2015)

Source: Large-sample, non-representative NMHH

Employers tend to include digital competences in their job requirements in general, mainly in the case of intellectual jobs, where the processes and roles make these skills essential. In the case of companies that offer hybrid job opportunities, internal communication and information sharing take place online. In sum, the lack of digital skills might be a difficulty when the company/organisation plans to recruit people with disabilities. This was also confirmed by the EDF employer survey, where some 40% of the respondents stated that the lack of digital skills is a burden when planning on hiring persons with disabilities, but their answers also revealed that this burden is more job-specific and independent of disability as a characteristic. Some 75% of the respondents (n=20) stated that they develop employee training programmes on digital skills, but with no particular focus on persons with disabilities.

Considering that companies/organisations expect potential employees to already have experience with computer applications before hiring, the digital skill development of persons with disabilities is an important issue from an employment perspective. The in-depth interviews with OPDs revealed that equal opportunities in the use of digital tools means not only access to hardware (computers, mobile phones, tablets) and software but also the availability of learning professionals and services that help them acquire the knowledge of how to use them in general or for work purposes. The OPDs emphasised that training provided for persons with disabilities is as important as assistive application development or the allowance given for purchasing the equipment. Digital devices and digital skills can play a crucial role in the social integration of persons with disabilities, in autonomous life, autonomous transport, communication, as well as in employment and education. However, digital skill development requires a complex approach: the programmes shall be group-specific (in terms of disability and job) and must fit individual needs. Services like mentoring and early development can also have major importance.

Assistive Technologies

Hungary ratified the UNCRPD in 2007, but the term 'assistive technology' (hereafter: AT) is not used in the legislation¹⁵. Instead, 'medical device' is defined as "...provided for the personal use of a person with a temporary or permanent impairment or disability and does not require the constant presence of a qualified medical professional"¹⁶. The definition of medical devices is more restrictive than the definitions of AT and lacks the mention of related services. The legislation contains a precise list of medical devices that have 50%, 70%, 80%, 90%, or 98% state subsidies. The list also determines the time limit for the use of the device (in case of damage, the user cannot apply for another one), and the application process is long¹⁷.

The National Health Insurance Fund Management of Hungary (NHIFM) is a central agency supervised by the Hungarian Government and the Ministry of Human Resources, and it is the main allocator of health-related benefits, including the allocation of medical devices. NHIFM is responsible, among other tasks, for maintaining the national list of devices and for negotiating with distributors and manufacturers. Distributors who want their product to be covered by the insurance system can apply to NHIFM. The list does not change often and has an almost exclusive focus on cost-effectiveness¹⁸. This means that advanced but expensive technologies, which might be reasonable choices in some cases, are not on the list and are consequently available only on the free market (without subsidies) for persons with disabilities.

The current support scheme for ATs in Hungary is individual-based; normative financial support is given only to accredited employers (please refer to the section on 'Reasonable Accommodation'), and there is no specific system for non-accredited employers.

This was also reflected in the EDF employer survey: only 20% of respondents (n=20) were aware of the use of assistive technologies for employees with disabilities. A special keyboard was mentioned as a concrete example, and one respondent listed categories related to different types of impairments. As the main limitations of ATs, surveyed respondents mentioned compatibility with their internal system and the insufficient number of developments. One respondent specified that although today's technologies are already capable of transforming information and messages (image-to-text, sound-to-text, text-to-code, text-to-image, etc.), even in real-time, the limitations are most severe when it comes to information creation, mainly in the case of multiple disabilities.

Some 15% of companies/organisations reported that they have policies for the acquisition and use of assistive devices and technologies; none of the respondents were aware of related legal frameworks and public support programmes. The companies/organisations that have a policy cover the cost of the purchase of AT devices and software from their own budget based on the decision of the hiring manager and/or the management.

The interviewed OPDs held the standpoint that the right approach and the written policies are not enough: an effective incentive system is needed in Hungary to increase the use of assistive technologies in the workplace and thus to strengthen the integration of people with disabilities into the labour market. As for the practice of AT usage in Hungary, the OPDs also confirmed that the focus of the list of medical devices is primarily on medication, so general digital technologies are not included (although, for example, a tablet and internet connection could be essential ATs for a person with autism), and thus are not subsidised. The reason is partly the lack of control mechanisms. It can also happen that in the case of very specific needs, the appropriate product cannot be found on the list, and the person with a disability needs to finance its purchase. The interviewed OPDs mentioned that they would prefer a system where persons with disabilities would be trained on how to use the necessary AT, and after gaining a certificate of their knowledge—which may also help them find a job in the open labour market—they could get access to a wider range of ATs in a controlled manner. Renting can also be a good alternative in many more cases.

Interviewees mentioned two specific digital technology best practices: 'The Digital Autonomy Support in the Autism Spectrum (DATA) system and connected services', which were designed to support and improve daily living skills, autonomy, and social participation of individuals with autism in a complex, comprehensive way¹⁹. The other referred project is called Távszem, and aims to provide blind and visually impaired people with equal access to high-quality internet-based remote assistance services through accessible mobile devices²⁰.

Persons with disabilities need information about the available devices and applications that are accessible outside the social security system (e.g., several assistive mobile applications are available free of charge), and about how to use them. On the other hand, employers need more information and positive incentives too.

Reasonable Accommodation

The Hungarian social care system applies an employment quota²¹ to increase the employment rate of disabled people. There is an employee tax relief, a wage subsidy, a reduced social security contribution for employers who employ persons with disabilities, and a reasonable accommodation duty. There are several recruitment services; however, awareness-raising actions and guidance (information provided for employers) are rather limited. Employment rehabilitation is coordinated and supported through tenders by the National Social Policy Institute²².

If the employer meets the quota criteria (employs at least 30 employees with disabilities, or 25% of all employees) and undertakes further responsibilities (e.g. implementation of a rehabilitation plan, acting as a rehabilitation mentor), it may become an accredited employer. The accredited employer may get support for the salary of persons with disabilities and the cost of employment up to 100% (in accordance with detailed and complicated rules). Support may be granted for the rehabilitation employment of disabled workers (wage costs and additional costs) and for adapting the workplace for rehabilitation purposes. In addition, there is a one-off grant, which is only available to eligible employers who have an annual contract for support under the individual grant²³. Financial support is provided by the relevant regional Government Office for a period of up to three years, and it may be renewed based on the employer's application. These rules apply only to employers under the scope of the Labour Code, and there is no special attention to micro or small businesses, which employ two-thirds of all employees²⁴.

Act 26 of 1998 on the Rights of Persons with Disabilities and the Guaranteeing of their Equal Opportunities (RPD) and Act 1 of 2012 on the Labour Code contain provisions on the duty of employers concerning reasonable accommodation. The EU law has been transposed, but there are still many open questions in practice²⁵. The Hungarian legal framework contains an obligation to accommodate the needs of persons with disabilities during the recruitment procedure (if the company advertises the job publicly, the candidate indicates their special needs, and the provision does not impose a disproportionate burden on the employer). The employer is also obliged to adapt the working environment to the needs of employees with disabilities who are already employed there. Even though the employers can request a grant from the central budget to cover the costs of the adjustment, they may argue that the law does not specifically require adaptation of the work environment to hire

someone with a disability²⁶. The main criticisms related to the legislation are that it only regulates the adaptation of the physical and material environment (and does not cover other aspects e.g. working hours, internal communication channels, etc.), the requirements of the pre-employment procedure are limited, and the definition of disproportionate burden is exaggerated and not exact²⁷.

In the EDF employer survey, 5% of respondents (n=20) stated that their company's Human Resources policy covers the reasonable accommodation of employees with disabilities as a standardised procedure, and none of the respondents indicated that their company has a policy regarding the accessibility of recruitment processes. In terms of the most common forms of accommodation provided, hybrid working (including increased working hours at home) was mentioned. One respondent gave a list of reasonable accommodations provided by the company, including a dedicated parking lot, accessible office (Access4you Gold certified), KONTAKT sign language service, mobile induction loop, ergonomic furniture (height-adjustable desks and chairs), flexible working hours, inclusive workplace culture, and sensitivity training.

Financing was the main, but only one of the many, obstacles to the provision of reasonable accommodation. Other aspects mentioned by the respondents included the lack of an HR professional who could handle this issue within the company, the speciality of the working environment (physical dangers mentioned by a chemical plant), and the risk of slowing down entire workflows. It was also mentioned that in the case of less obvious disabilities, the employee might not inform the company, leading to data recording issues. None of the surveyed employers were aware of the legal framework and public programmes supporting the provision of ATs.

The interviewed OPDs mentioned similar limitations of the current system. There is a high demand for:

- more focus on the human aspects (e.g. an appropriate number of training professionals who work with companies and persons with disabilities; available training services; a mentor network, etc.);
- customisability: target-group-specific training programmes, and customisation even at the individual level, fitting the supports and solutions to the specific individual needs;
- more information available for employers and persons with disabilities

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alike (to specify the details of reasonable accommodation);

- a system approach (including skill development, complex technical solutions, maintenance, etc.).

The in-depth interviews with the OPDs also concluded that the current system of rehabilitation allowance is not appropriate to encourage the open labour market to employ severely disabled workers and requires reconsideration (e.g. incorporating positive incentives, applying differentiated rehabilitation contributions, supporting the costs of occupational rehabilitation services or onboarding processes).

References

- 1.** The Central Statistical Office had not published the 2022 Hungarian census data related to people with disability by the time of the submission of the report. The interviewed OPDs also confirmed that the data referred to hereafter are the most recent and accurate source of information.
- 2.** KSH – Hungarian Central Statistical Office (2011). STADAT tables- Situation of people with disabilities and their social care. https://www.ksh.hu/nepszamlalas/tablak_fogyatekossaggal_elok_helyzete
- 3.** Ibid.
- 4.** KSH – Hungarian Central Statistical Office (2015). 2011 CENSUS,17. Situation of people with disabilities, and their social care. https://www.ksh.hu/docs/hun/xftp/idoszaki/nepsz2011/nepsz_17_2011.pdf
- 5.** Ibid.
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- 7.** Eurostat (2023). Disability employment gap by level of activity limitation and sex (Source EU-SILC). Eurostat – Data Browser. https://ec.europa.eu/eurostat/databrowser/view/hlth_dlm200/default/table?lang=en
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- 10.** European Commission (2023a), op. cit., endnote 8.
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12. European Commission (2021), op. cit., [endnote 9](#).

13. European Commission (2023a), op. cit., [endnote 8](#).

14. NMHH – Hungarian National Media and Communications Authority (2015). A digitalizáció és az infokommunikációs javak szerepe a fogyatékosok mindennapjaiban. https://nmhh.hu/cikk/167641/A_digitalizacio_es_az_infokommunikacios_javak_szerepe_a_fogyateko%20sok_mindennapjaiban

15. Hungarian legal acts:

- A Fogyatékossgal élő személyek jogairól szóló Egyezmény (About the publication of the UN Convention on the Rights of Persons with Disabilities and its Optional Protocol) (2007). <https://www.un.org/disabilities/documents/natl/hungary-ez.pdf>
- A gyógyászati segédeszközök társadalombiztosítási támogatásba történő befogadásáról, támogatással történő rendeléséről, forgalmazásáról, javításáról és kölcsönzéséről (Regulation no. 14/2007. (III. 14.) about the regulation of medical devices with social insurance subsidies) (2007). <https://njt.hu/jogszabaly/2007-14-20-OB.58>

16. A biztonságos és gazdaságos gyógyszer- és gyógyászatisegédeszközellátás, valamint a gyógyszerforgalmazás általános szabályairól XCVIII (Act of 2006 about the general regulation of the provision of medicaments and medical aids) (2006). <https://mkogy.jogtar.hu/jogszabaly?docid=a0600098.TV>

17. Menich, N. (2019). Challenges in access to assistive technology in Hungary. Global Perspectives on Assistive Technology.

18. Ibid.

19. A research and development consortium of the Hungarian National Autism Society (Autisták Országos Szövetsége, AOSZ) and the HAS-ELTE 'Autism in Education' Research Group developed the application, on behalf of Eötvös Loránd University (ELTE), Bárczi Gusztáv Faculty of Special Needs Education. The project was funded by an EFOP grant from the European Union and the Hungarian government. More information: <https://data.aosz.hu/english-summary/>

20. The project of the National Association of the Hungarian Blind and Visually

Impaired (MVGYOSZ) has been founded by the EU and the Hungarian State (with a budget of ca. €1,234,000).

21. Under the quota measure regulated by Article 23 of Act 191 of 2011, employers are obliged to pay a 'rehabilitation contribution' (fee), if they have more than 25 employees and the proportion of persons with an altered ability to work within their workforce is below 5 %. Employers liable to pay rehabilitation contributions are required to pay 2,088,000 HUF (ca. €5,440) in 2023 for each number of persons with a reduced capacity for work (disabled employees) to reach the mandatory employment level.

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27. Halmos (2014), op. cit., endnote 25.