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| Negotiating return to work in the age of demographic change through industrial relations (VS/2019/0075) | | | | File:Flag of Belgium (civil).svg - Wikimedia Commons | |
| **Belgium** | | | |
| **General indicators for work incapacity, industrial relations and chronic disease\*** | | | | | | | | |
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| ***Public spending on incapacity (% of GDP)*** | ***Collective bargaining coverage (%)*** | | | | ***Chronic morbidity (people having longstanding illness or health problems)[[1]](#footnote-1)*** | | | |
| **Policy framework and key issues for return to work** | | | | | | |
| * Act of 4 August 1996 on Wellbeing at Work (Chapter 4) * Law of 3 July 1978 on Employment Contracts * Compulsory Healthcare and Indemnity Insurance Legislation of 14 July 1994 * Anti-discrimination Legislation | | * Lack of coordination between health professionals * High incidence of contract termination due to medical reasons and lack of support for employees declared permanently unfit to return to the same company * Insufficient support for SMEs to implement reasonable accommodations | | | | | | |
| ***Policy framework*** | | ***Key policy issues*** | | | | | | |
| **Involvement of social partners in return to work policies** | | | | | | | | |
| * Strong culture of social dialogue, high unionisation rate and collective bargaining coverage, media presence * Involvement in legislation via the National Labour Council and the High Council for Prevention and Protection at Work | | * Responsibility of health and safety committee to create an internal company reintegration policy * Obligation for the employer to draft individual reintegration plans * Possibility for union delegates to help the employee during negotiations with the employer and colleagues | | | | | |
| ***National level*** | | ***Company level*** | | | | | |
| **Policy recommendations** | | | | | | | | |
| **Recommendations for policymakers**   * Address the initial design flaws of the legislation on reintegration procedures * Collect reliable and systematic data on return to work * Foster tailored vocational rehabilitation programmes * Audit companies with high incidence of incapacity | | | **Recommendations for social partners**   * Include return to work in a cross-sectoral collective agreement on wellbeing at work * Draft joint cross-sectoral or sectoral guidelines on the design of a company-level reintegration policy * Continue raising awareness by training affiliates | | | | |
| **Further information** | | | | | | | | |
| **References**  Lopez Uroz, N., L. Westhoff and M. Akgüç (2020), Working paper on national-level and company-level industrial relations actors’ involvement in facilitating return to work policies and identifying best practices – Country Report for Belgium, Brussels.  Mutualités Libres (2019), Reprendre le travail pendant une période d’incapacité, Brussels.  \*Sources: Data on public spending on incapacity and collective bargaining coverage is taken from the OECD. Chronic morbidity is taken from Eurostat. | | | | | | | | |

1. The concept is operationalised by a question asking if the respondent suffers from any longstanding (of a duration of at least six months) illness or health problem. [↑](#footnote-ref-1)