

**Ministry of Social Welfare
Ministry of Health and Prevention**

Denmark

**National Report on Strategies for Social Protection
and Social Inclusion 2008 - 2010**

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Introduction

As part of the activities within the framework of the open method of coordination, the Member States of the European Union are invited to prepare national reports on strategies for social protection and social inclusion. According to the new cycle of the open method of coordination, adopted in 2005, Member States agree to submit their reports to the Commission every three years, and the present report therefore covers the period 2008-2010. In the national reports, Member States should outline the strategies and initiatives they apply to achieve the common objectives for social protection and social inclusion under the open method of coordination, which the Member States have adopted.¹

As in the preceding report, Member States are encouraged to outline the strategies for the three areas of pensions, inclusion of socially disadvantaged groups and health and long-term care. The new report should present the initiatives launched since the 2006 report, but the Member States have also agreed that the new cycle of the open method of coordination should focus on the results generated from the initiatives and strategies described in the preceding report. Chapters 2 and 4 therefore open with a report on the implementation of the strategies described in the 2006 report and with a follow-up to Denmark's challenges as identified by the Council of Ministers for Social Affairs and Employment and the Commission in the Joint Report on Social Protection and Social Inclusion 2007.²

Moreover, the Member States have agreed that the EU's integration activities should receive particular attention in the new cycle. The Guidance Note³ for Preparing National Strategy Reports therefore proposes that national integration activities be incorporated as a general element of the strategies for social protection and social inclusion in Chapter 1 and that these activities be elaborated on in Chapter 2.

Structure and contents of Denmark's National Strategy Report on Social Protection and Social Inclusion

The Danish report focuses on describing how the Danish strategy is organised strategically and systematically. Based on each of the objectives set out in the open method of coordination, the report therefore presents the Danish objectives, Denmark's social/welfare-related challenges and the initiatives launched in response to those objectives and challenges.

In compliance with the common guidelines adopted by the Member States for the structure and contents of National Strategy Reports, this report is divided into four chapters.

Chapter 1, "Current situation and main trends", assesses the social situation in Denmark and describes the general strategies for social protection and social inclusion.

The following chapters contain a more detailed description of the Danish strategy for social protection and social inclusion, including the objectives, challenges and initiatives in the area.

Chapter 2, "Social inclusion", describes the strategies for the inclusion of socially disadvantaged groups. Chapter 3, "Pensions", describes the structure of Denmark's pension system, and Chapter 4, "National strategies for health and long-term care" describes the Government's strategies in the two areas.

One of the annexes to the report provides examples of good practice in step with the strategies and initiatives described in the report.

¹ See Annex 1

² Chapter 1 of the national strategy report outlined the Danish strategies in broad, general terms, for which reason a description of their implementation has not been prepared. Nor has an implementation report been produced for the strategies described in the pensions chapter of the 2006 report as this chapter describes strategies that will not be implemented till quite a few years from now. The challenges for Denmark outlined in the Joint Report for Social Protection and Social Inclusion 2007 are listed in Annex 2.

³ Guidance Note for Preparing National Reports on Strategies for Social Protection and Social Inclusion

Current situation and main trends

Assessing the social situation

Denmark's economy is in the final stages of a strong boom. Real GDP growth in 2006 reached a very high level of 3.9%.⁴ Growth in 2007 was a more moderate 1.7% and is expected to be 1.2% in 2008.

Since the last National Strategy Report in 2006, Denmark's economy has seen a continued rise in employment and declining unemployment. The rate of unemployment declined from 4.8%⁵ in 2005 to 3.9% in 2006 and 3.7% in 2007 and is forecast to drop to 2.3% in 2008. The number of unemployed people decreased by just over 63,000 between 2005 and 2007 and is projected to go down another 28,000 in 2008. Falling unemployment figures have been recorded both among those covered by unemployment insurance schemes and among claimants of social assistance.

Employment is key to ensuring social cohesion and inclusion as well as an economically sustainable welfare society. The Danish society has very high activity rates, also compared with other EU Member States. 81%⁶ of the working population (15 to 64 years) are members of the labour force. That is the highest activity rate among all Member States. The EU-25 reported average activity rates of 71% in 2006, and several Member States had activity rates of less than 65% of the working population.

Men still have higher activity rates than women. In 2006 the activity rate for men was 84.1%, against 77.0% for women. The activity rate for Danish women is the highest among all Member States, with the EU-25 average being 63.2%. Danish women's activity rate has been increasing slightly by just over 1 percentage point since 2000. Danish women's activity rate is, however, increasing at a slower pace than average activity rates for women in the EU-25, which has seen a more than 3 percentage point increase over the same period. The slower increase in Denmark should be seen against the backdrop of a high starting point. Men's activity rates in the same period have been stable at around 84% in Denmark and just under 78% in the EU-25.

The rates of economic activity for 55 to 64-year-olds are relatively high in Denmark. Rates averaged at 60.7% in 2006 (67.1% for men and 54.3% for women), against 43.5% for the EU-27 (52.6% for men and 34.8% for women). The activity rate for the age group has been rising in recent years, but is still nearly 20 percentage points down on the average for the whole population aged between 16 and 64. Furthermore, in the last few years Denmark has experienced a shortage of labour, resulting in various incentives for people to postpone their retirement, for instance the introduction of a tax credit for 64-year-olds, more favourable opportunities for setting off earned income against old-age pension and more flexible rules on deferred pension; see Chapter 3 on pensions.

All employment indicators exceed the Growth and Stability Pact on employment rates, which set out that over 70% of the entire workforce (16 to 64 years), over 60% of women and over 50% of older employees (55 to 64 years) must be in active employment in 2010.

⁴ Source: Economic Report - August 2008, Ministry of Finance.

⁵ Source: Economic Report - August 2008, Ministry of Finance. Unemployment rates have been calculated according to the EU definition.

⁶ Source: Eurostat 2006 - common OMC indicators. The indicators are downloadable from http://ec.europa.eu/employment_social/spsi/common_indicators_en.htm

Denmark has more equal income distribution than most other Member States. The ratio of the income earned by the fifth of the population with the highest incomes to the fifth of the population with the lowest is 3.4 in Denmark (80-20 ratio)⁷, i.e. the richest fifth earn incomes 3.4 times higher than the fifth with the lowest incomes. The EU-25 has an average 80-20 ratio of 4.8.

In terms of the low-income share of the population, Denmark also ranks among the Member States with the lowest share.

Table 1: Share of population belonging to low-income group in EU-25 and DK, 2005 income year, per cent

	Total	Men	Women	0 - 17 years	18 - 64 years	65+ years	65+ men	65+ women
EU-25	16	15	17	19	15	19	16	21
DK- excl. imputed rental value and negative investment income	12	11	12	10	11	17	16	19
DK- incl. imputed rental value and negative investment income	13	13	13	12	13	14	12	16

Note to table: The low-income group defined in the same way as the Eurostat concept 'at-risk-of-poverty rate'. The group is defined as people with an equivalised disposable income of less than 60% of the median income. This limit is higher than the one usually used in discussions in Denmark, where the limit is set at 50% of the median income. The 50% limit is also used in OECD analyses. The income is calculated by Eurostat both inclusive and exclusive of the rental value of own housing and interest expenses on home loans. Although this practice is only applied to Denmark so far, it is expected to be Eurostat standard from the 2007 data onwards. Danish analyses always include imputed rental value and negative investment income because calculations without these elements provide a misleading picture of income conditions in Denmark. It should be noted that the figures inclusive of imputed rental value are preliminary.

Source: Eurostat 2006 - common OMC indicators. The indicators are downloadable from http://ec.europa.eu/employment_social/spsi/common_indicators_en.htm

It appears that Denmark's low-income share is below the EU Member State average.

The Danish figures show that the differences between the share of men and women in the low-income group are insignificant. The share of children in the low-income group is slightly below the average, whereas the share of older people in the low-income group is slightly above the average. When using a limit of 50% of the median income, inclusive of imputed rental value and negative investment income, the Danish analyses show the opposite result, which means that older people are underrepresented in the low-income group. One

⁷ Source: Eurostat 2006 - common OMC indicators. The indicators are downloadable from http://ec.europa.eu/employment_social/spsi/common_indicators_en.htm. The 80-20 ratio is calculated on the basis of equivalised disposable incomes. The 3.4 ratio has been calculated exclusive of imputed return on owner-occupied housing. Inclusive of imputed return, the ratio would be 3.6.

explanation is that the old-age pension without supplementary income (pensioners' rent allowance, interest income or other investment income, private pension, etc.) is just below the 60% limit.

Developments over time in low-income group

Analyses of developments over the last two decades show that the share of the population belonging to the low-income group declined from the early 1980s up to the mid-1990s. Since then, the share has been increasing and has today almost reached the level of the early 1980s. The growing size of the low-income group since the mid-1990s should be seen against the fact that the calculated low-income limit has increased by 22% in real terms during the period. In other words, the increase does not indicate that people with relatively low incomes today earn lower real incomes on average.

Table 2: Share of population belonging to low-income group 1983 - 2005, per cent

	1983	1994	2000	2005
Limit of 50% of median income	4.8	3.6	4.0	5.0
Limit of 60% of median income	9.2	6.7	8.4	10.1

Note to table: There are technical differences between the calculations performed by Eurostat and those performed by the Ministry of Finance, for instance in the method of income equivalisation. Similarly, there are differences in the basic data with Eurostat's analyses being based on a random sample survey of about 6,000 people and the Ministry of Finance's on a random sample survey comprising 33.3% of the population, corresponding to about 1.77 million people. Source: Income trends and distribution in Denmark 1983-2005, Ministry of Finance, January 2008.

Table 3 below shows the composition of the low-income group in 2005. The figures in this table have been calculated on the basis of 50% of the median income, which - as previously mentioned - is the limit used in discussions in Denmark.

Table 3: Composition of the group in 2005

	Share of population	Share belonging to low-income group	Share of low-income group	Index of overrepresentation
Total population	100	5	100	
Origin				
Danish origin	91.8	4	73.4	80
Immigrants and descendants	8.2	16.2	26.6	327
Family category				
Total adults	74.3	5.3	80	108
Of whom				
- Singles < 67 years without children	15.6	17.2	53.8	346
- Single parents	3.3	5.8	3.9	117
- Singles over 66 years	6.4	1.5	1.9	30
- Couples with children	22.6	2.5	11.2	50
- Under 67-year-old partners in couples without children	19.8	2.1	8.2	41

- Over 66-year-old partners in couples without children	6.5	0.7	0.9	14
Age group				
Under 18 years	22.1	4.2	18.8	85
18 - 24 years	7.5	23.1	34.9	465
25 - 29 years	6.1	11.9	14.6	240
30 - 39 years	14.5	4.5	13.1	90
40 - 49 years	14.5	2.8	8.2	56
50 - 59 years	13.7	1.7	4.8	35
60 - 66 years	8.3	1.5	2.6	31
Over 66 years	13.3	1.1	3	23
Employment status				
Total 18-66-year-olds	63.2	6.1	77.8	123
Of whom				
- Full-time employees	31.1	0.3	1.7	6
- Self-employed and the like	3.2	11.8	7.5	237
- Part-time employees	3.1	5.4	3.4	109
- Part-year employees	5.9	4.3	5.1	87
- Fully unemployed etc.	3.2	18.7	12.1	376
- Students	6.1	27.2	33.6	547
- Recipients of anticipatory pension	4.7	1.4	1.3	28
- Recipients of early-retirement benefits etc.	2.8	0.5	0.3	11
- Other 18-66-year-olds	3.1	20.5	12.7	413

Note to table: Index of overrepresentation is calculated as (share of low-income group / share of population) * 100. An index above 100 signifies that the category is overrepresented in the low-income group. By contrast, an index below 100 signifies that the category is underrepresented in the low-income group.

Source: Income trends and distribution in Denmark 1983-2005, Ministry of Finance, January 2008.

An in-depth analysis of the composition of the low-income group shows particular overrepresentation in some groups, for instance people from immigrant backgrounds, self-employed persons and students.

Almost half of the people in the low-income group are aged between 18 and 29. This should be seen against the fact that more than one fourth of students belong to the low-income group. Students alone account for one third of the low-income group. Although students have relatively low incomes, the group is not a socially disadvantaged group in a political context. After a few years, they will typically be in employment and, therefore, gain access to higher incomes. It should also be borne in mind that loans obtained under the Danish State Educational Grant and Loan Scheme are not included in the income.

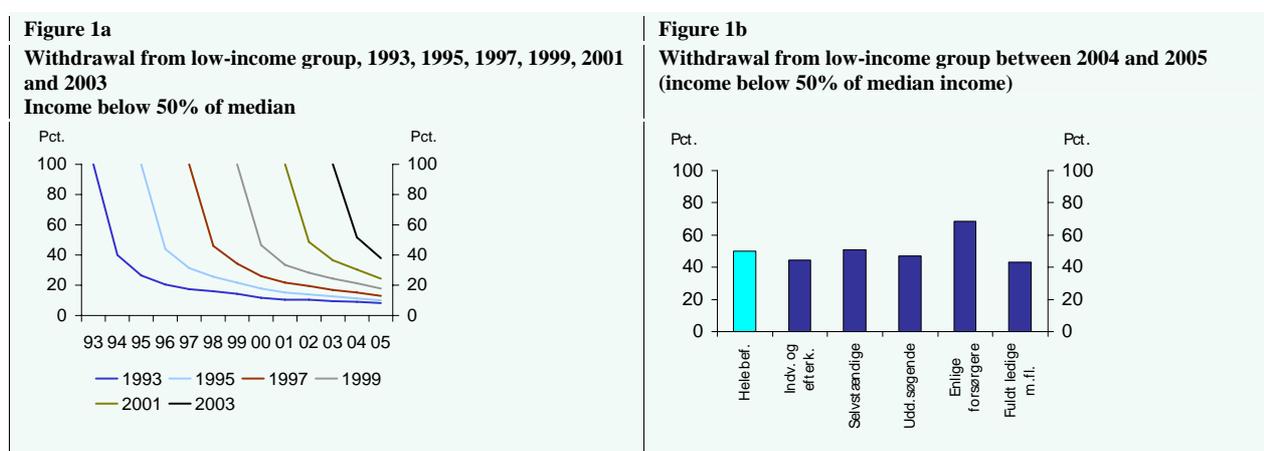
Fully unemployed persons are also overrepresented in the low-income group. This emphasises the importance of keeping the attention focused on the employment target in social policy, including the principle that working must pay off.

The group of ‘Other 18-66-year-olds’ is greatly overrepresented. These are persons who do not fall into any of the other groups, i.e. persons with no labour market affiliation. They could include homemakers, young people who have completed their education in that year or persons assessed as not liable to tax for the whole year.

Finally, it should be noted that pensioners are greatly underrepresented in the low-income group. Eurostat reaches a different result in its analyses; see above.

Withdrawal from low-income group

The low-income group has a high replacement rate, not being composed of the same people year after year. Between 50 and 60% of the people whose income, in a given year, is below 50% of the median income have left the low-income group again the following year; cf. Figure 1a.



[Per cent Per cent
Entire population
Immigrants and descendants
Self-employed
Students
Single parents
Fully unemployed etc.]

The graphs in Figure 1a show the percentage of people in the low-income group in 1993, 1995, 1997, 1999, 2001 and 2003, respectively, who remain in the low-income group the following years. The graphs include people who have returned to the low-income group the subsequent year.

Source: Income trends and distribution in Denmark 1983-2005, Ministry of Finance, January 2008.

Seen over a number of years, a steadily greater share of the original people in the low-income group in any given year have moved upwards in the income distribution and, therefore, withdrawn from the low-income group. Slightly more than 8% of the people who were in the low-income group in 1993 were still in the low-income group in 2005. That is about 0.6% of all people who were in the low-income group throughout the years. In addition to income mobility, these movements were also affected by deaths and emigration.

Figure 1b shows that the probability of withdrawal is highest for single parents (68%) and self-employed persons (51%), whereas it is lowest for fully unemployed persons (43%).

Services

An extremely broad and comprehensive range of social service offers available to children, disabled people, older people, etc. is an essential element of the Danish welfare model. These services are key to families' freedom of choice in relation to labour market affiliation and full labour market participation, independently of whether the employee has relatives in need of care (children, disabled people, older people, etc.).

Denmark provides public day-care facilities for all children aged 6 months and above, from the end of the maternity/paternity leave to the mandatory school age (guaranteed day-care). Practically all children, 96%⁸, between 3 and 5 years of age, are enrolled in day-care facilities. The corresponding figure for the 0 to 2-year-olds is 63%.

The public sector also provides services to older and disabled people in need of personal care or practical assistance and support, either in the form of home help services or, to a wider extent, assisted living accommodation for older people or residential accommodation facilities for people with disabilities. In 2005 206,900 people were recipients of permanent home help. More than half of these home help recipients are over 80 years old.

Overarching strategic access

The indicators for conditions in Denmark generally draw a picture of a social situation which - compared with other EU Member States - is well-functioning on many fronts. But in spite of a well-functioning economy, high employment rates for men, women and older people and relatively few people in the low-income group, broad and far-reaching initiatives are still needed in many areas to maintain and continually develop a well-functioning, financially sustainable and socially coherent welfare society now and in the future.

Recruitment of labour

Although employment rates are high, the Government finds it important to continue recruiting labour to the Danish labour market. The recent economic upswing is currently exerting some pressure on the labour market, and many industries are facing shortage of labour. Targeted efforts to improve the recruitment basis are needed to dampen this pressure and ensure continued progress in wealth and welfare. Denmark needs more employees, for private companies and public-sector institutions alike, and a multi-pronged approach has to be taken to alleviate the pressure on the labour market. Every avenue has to be explored in relation to older employees, citizens with immigrant backgrounds, people with disabilities and socially disadvantaged adults and young people as well as in relation to gender barriers and sickness absence in the labour market.

To this end, Parliament has adopted the Job Plan to ensure Denmark's ability to recruit more labour - in both the short and slightly longer terms. The Job Plan contains a range of initiatives aimed at encouraging people, including older people, to remain a little longer in the labour market, helping people move from transfer payments into employment and supplementing transfer income with earned income.

Another substantial challenge in the Danish labour market is sickness absence and expenditure on sickness benefits. Both are rising. Today the number of people not working because of sickness absence exceeds the number not working because of unemployment. That deserves special attention and calls for extensive efforts from all stakeholders: Employers, employee organisations, jobcentres, general practitioners, insurance companies, etc.

⁸ Source of figures on services: Statistics Denmark, Statistical News 2007:13 and 2007:9

In June 2008 the Government presented an action plan with 30 proposals for reducing sickness absence, which will help reach the objective of a 20% reduction in sickness absence by 2015. The action plan contains various initiatives to strengthen follow-up and dialogue measures during sickness absence, to conduct analyses and investigations in relation to sick employees and to support labour market affiliation during sickness absence.

Gender can in some contexts be a barrier to achieving certain jobs on the labour market. The companies, the job seekers and the employees working in the jobcentres must all contribute to solving the problem, for instance when helping job seekers find employment. The jobcentres must therefore always remember to ignore traditional presumptions and concepts of gender when placing job seekers into employment.

The establishment of the new employment system, effective as of 1 January 2007, coincided with the introduction of a new special function for gender equality in the employment system. The primary task of this special function is to disseminate knowledge on gender-specific problems in the employment area to the jobcentres and society at large.

Moreover, it has turned out that families may have difficulty reconciling family life and working life. The Government therefore set up a Family and Working Life Commission in 2005, tasked with preparing and submitting a variety of proposals for how to reconcile family life and working life. In 2007 the Commission presented a report, in which one of the most striking conclusions was that one fifth of all Danish families with children have difficulty reconciling family life and working life and that mainly families with small children and single parents are struggling with problems. The Commission further concluded that all stakeholders in society are bound to make an active contribution to the successful reconciliation of family life and working life.

Against this background, the Government has taken various initiatives to provide better opportunities for families with children.

The Government has received the Commission's recommendations about conditions connected with children's illness, working hours and flexibility in the workplace and passed them on to the social partners. At the time of the collective bargaining in 2008, entitlement to paid leave on the second day of a child's illness was agreed in the public sector. It was also agreed to increase the period of paid parental leave from 12 to 18 weeks. Moreover, the right to conclude individual agreements on "plus hours" has been introduced in much of the public sector, which opens up an opportunity for employees to save funds for a limited period that can finance a later period with part-time employment and a lower salary.

In addition, the 2008 Budget provides for the abolition of unconnected closing days in day-care facilities, combined with the launching of a debureaucratisation reform to enable the facilities to spend more time on their primary tasks. Furthermore, the amount of family allowance will be increased by DKK 2,000 a year in connection with the introduction of a parent-paid healthy meal in all day-care facilities.

Finally, some of the Commission's recommendations have already been implemented to a wide extent in existing legislation, for instance in the new Day-Care Facilities Act.

Citizens with immigrant backgrounds still offer a very high amount of unused labour potential. More immigrants have found jobs over the last few years, but their employment rates remain far below total employment rates. As a result, the Government strongly emphasises the need to help more citizen with immigrant backgrounds - both men and women - gain qualifying skills and is supporting workplaces in their efforts to become better at hiring this group of citizens.

It is important to support the disadvantaged groups in their endeavour to live a qualified everyday life and, at the same time, help them develop and use their competencies and potential. The ultimate goal is to make the socially disadvantaged groups capable of self-support in their future lives. The Government therefore

continues working on *Our Collective Responsibility II*, an action programme launched in 2006 for the specific purpose of helping disadvantaged people into employment through highly targeted initiatives.

As far as disadvantaged adolescents are concerned, the Government wants to strengthen this group's possibilities of completing a qualifying youth education programme.

A welfare society for everyone - today and tomorrow

In general, the welfare society's offers must be available to all citizens, and the public sector in Denmark is required to deliver services of high quality. Older people and people with disabilities need good care and support, children need attentiveness and challenges, and patients in hospitals need proper treatment in due time. Much of the credit for Denmark's present position as a rich and safe country without major social divides can be ascribed to a well-developed public sector. The Government's ambition is to ensure that the public sector remains an integral part of innovation, development and competitiveness in Denmark in the years ahead.

A sustainable welfare society is founded on a platform of healthy government finances, high employment rates and a well-functioning labour market, coupled with an efficient and well-operating public sector. However, public services face a great challenge in the years ahead. On one hand, citizens expect services of steadily higher quality in parallel with growing prosperity and resources for higher private consumption. By the same token, citizens expect to be able to select an offer that suits their own specific needs and situations.

The number of older people will also be growing - and although more older people will probably be in good health, there will be a greater need for eldercare and health care services for this segment of the population. On the other hand, hiring many more people in the public sector is not a viable way of dealing with the pressure of expectations. Quite simply because there are not sufficient idle hands. Every fourth public sector employee will retire within the next 10 years. At the same time, the young generations entering the labour market in the coming years are small, which will mean relatively fewer Danes of working age.

This requires innovation and creativity in the public sector to make it possible to find an approach between citizens' growing expectations for the welfare society and the fact that recruiting more nurses, doctors, childhood educators and home help providers is not an available solution.

As a consequence of the present and future challenges involved in securing welfare, the quality of public sector services and, therefore, cohesion in society, the Government has presented a quality reform aimed at ensuring the continued innovation and development of quality child care, care for older people and hospital care and, thus, everywhere in the public welfare service system. With a total of 180 specific initiatives, the quality reform provides the framework for high quality in public services. Focus will be directed towards creating better jobs in the public sector with professionally competent managers and more staff to provide attentive and quality service with users at the centre of attention. Developing the creative potential of public-sector institutions will also be in focus, and steps will be initiated for debureaucratising the sector.

Besides ensuring a well-functioning public system and labour market, the Government attaches importance to providing a strong foundation for an active civil society as a third sector which - in alliance with the public system and the labour market - can contribute solutions to the challenges of the welfare society. The organisations of civil society can often contribute alternative and innovative solutions in relation to the welfare society's wide variety of users and target groups and be more capable of, say, establishing contact to citizens - mainly socially disadvantaged groups - to whom the public system may sometimes find it difficult to establish contact. Cooperation between the three sectors - the public system, the labour market and civil society - is therefore also an essential part of the Government's strategy for creating a sustainable welfare society today and tomorrow.

In addition to the above initiatives, the Government is taking action in a broad spectrum of other areas. In spite of many efforts targeted at disadvantaged children and young people, this area still requires action that

will strengthen children and young people's personal resources, networks and educational development/learning. In 2007, the Government therefore publicised a large-scale action programme in the area.

Several disadvantaged groups - besides difficulties finding employment - are also struggling with the problems of adjusting socially and coming to terms with society at large. The Government therefore gives priority to ensuring that these groups have access to the welfare society's offers, which are necessary for these groups to attain a dignified and qualified everyday life in the form of improved health, suitable housing and social networks.

A cohesive welfare society fully depends on successful integration, and integrating all citizens with immigrant backgrounds into society is still a challenge for Denmark. Denmark has groups of socially disadvantaged children and young people who are incapable of understanding and accepting democracy, equality and responsibility, and the Government therefore pays special attention to establishing activities aimed at this particular group and the forms of extremism displayed by the group. Generally, it is crucial for the Government to fight extremism and the non-acceptance of democracy, regardless in which social groups these attitudes are manifested. Denmark is currently seeing tendencies to the emergence of conflicts between different groups of citizens with immigrant backgrounds and between these groups and citizens affiliated to the biker community, and the Government is very focused on the need to stop these clashes.

Equality in society is another essential precondition for maintaining a socially coherent welfare society. Equality creates equal opportunities for all and is therefore a fundamental social value the Government wants to safeguard. Equality is for everybody - from all strata of society - and it remains a great challenge to disseminate knowledge of rights and equal opportunities for all citizens. Information is needed for socially disadvantaged groups, in particular.

The Government has therefore presented its *Perspective and Action Plan 2008*, which identifies key action areas in relation to the equality challenges confronting Danish society. A crucial task is to identify the barriers preventing women of immigrant backgrounds from achieving gender equality and determine what can be done to break down those barriers. Old-fashioned gender roles among children and young people need to be eliminated, and the Government will encourage more women to run for the local elections in 2009. Steps must also be taken to ensure that more companies have more women on their boards and in senior management positions.

Older citizens who have retired must be offered reasonable earnings that will provide a continued basis for a financially secure old age and integration in social life. As some groups risk having inadequate pension savings at the time of retirement, the Government is taking action to launch compensatory financial measures and will also improve the level of information in the pension system to give all citizens more extensive knowledge about pension savings and financial risks. Finally, securing a financially sustainable pension system is a central challenge, and the Government will therefore - as previously mentioned - create improved employment opportunities for more people, including pensioners still capable of work.

Organisation and embedding of welfare society policies

User and citizen involvement and participatory democracy are truly fundamental principles of the Danish welfare model, which ensures a broadly embedded and targeted welfare service system.

Denmark has divided its welfare tasks between various ministries: the Ministry of Social Welfare, the Ministry of Health and Prevention, the Ministry of Refugees, Immigration and Integration Affairs, the Ministry of Employment and the Ministry of Education. It is important to underscore, however, that the local authorities are responsible for performing a considerable number of Denmark's welfare tasks. The area of social matters is widely governed through legislation, but it is up to the local authorities to assess the need for social services and, in that manner, ensure that public welfare services are organised as efficiently as

possible with respect for the citizen's specific circumstances and needs and in the interests of local conditions, via public and private suppliers alike.

In addition, various pools have been established, aimed at supporting local activities and assisting in method development as well as attracting local authorities' attention to special target groups and useful methods.

Hence, in Denmark the local authorities have the primary responsibility for social services and the main responsibility for promoting citizens' health and disease prevention.

Local self-government has traditionally been embedded in the Danish policy of mobilising and involving all players and citizens in society. A key element of Danish legislation is citizens' possibility of gaining influence in arranging their own lives. According to legislation, consulting and advisory user councils must be set up to represent citizens' interests vis-à-vis the local authorities. In addition, a range of independent complaints boards have been set up with representatives from the labour market and interest groups.

Resident and user councils have to be set up at the institutional level, and the central government will provide financial support to new user associations for disadvantaged groups. At the individual level, established legal guarantees ensure that the individual plays a role in organising his or her own case. As regards refugees and immigrants, local authorities can set up integration councils, which will also elect representatives to the national Council for Ethnic Minorities. This council advises the Government on matters concerning refugees and immigrants. The Government is also planning - inspired by the Council for Ethnic Minorities - to set up a democratic platform for young people of immigrant backgrounds.

In replacement of the former Council on Voluntary Effort, the Council for Social Volunteering has been set up in 2008. After the term of office of the Council on Voluntary Effort expired, a new council has been appointed. Compared with the Council on Voluntary Effort, the objectives of the Council for Social Volunteering are of a more cross-sectoral nature as reflected in the composition of the new council, which also includes competencies from policy areas and sectors other than the world of voluntary social work. The Council for Social Volunteering is tasked with advising the Minister for Social Welfare and Parliament on the voluntary sector's role and work in relation to social challenges. The aim of the Council is to contribute to public debate on the voluntary sector's roles in developing the welfare society, including the sector's interrelation with the public sector and trade and industry. The Council will advise the Minister for Social Welfare on innovative welfare policy initiatives where the voluntary sector can advantageously be part of the solution. The Council will focus special attention on solution models that will help promote cohesion in society.

A particularly important player in the area of social disadvantage is the Council for Socially Marginalised People, charged with handling and communicating the interests of the most disadvantaged people in society. The Council seats 12 members appointed for their expertise and experience in practical work with disadvantaged groups. Finally, it should be mentioned that some of the local authorities have also established local councils of socially disadvantaged groups.

Conference on Social Protection and Social Inclusion

In line with the fundamental principles of actively involving citizens and users in the organisation of the welfare society's policies, the Government lends weight to ensuring that all players and citizens interested in the Danish National Report on Strategies for Social Protection and Social Inclusion participate in the debate on the report.

With this in mind, on 10 April 2008 the Ministry of Social Welfare and the Ministry of Health and Prevention hosted a conference on possible priorities in the National Strategy Report and on the challenges of Danish and European welfare today and in the years ahead.

Participants in the conference included relevant ministries, local and regional government organisations, the European Commission, the social partners, the Danish National Centre for Social Research (SFI) as well as voluntary organisations, including representatives from the NGO project on the Danish National Strategy Report of 2006.⁹

The European Commission gave a presentation on the dynamics of the open method of coordination and on how cooperation between Member States, based on this method, can be used to develop analysis tools - indicators - for monitoring and developing policies in the area of social protection and social inclusion.

A representative from the NGO project outlined the NGO discussions on the 2006 Strategy Report. The main message from the NGO project was that Denmark's strategy for social protection and social inclusion was comprehensive and full of initiatives, but that it could appear random because a strategic approach was absent and the reasons for launching the chosen initiatives were unexplained. Another message from the NGO project was that Denmark should introduce a poverty line based on objective criteria which, according to NGOs, would facilitate the targeting of initiatives that can help socially disadvantaged people and break the vicious circle of deprivation

Possible priorities in the various dimensions in the present National Strategy Report were discussed during the conference.

In relation to social inclusion, the conference found it important to define who is socially disadvantaged as people in these groups are struggling with a broad spectrum of social problems. The conference also pointed out that initiatives targeted at disadvantaged groups should be holistic and cross-sectoral and focus attention on the disadvantaged citizen's difficulties in relation to health as well as social and employment aspects. In that connection, it was emphasised that employment should be practised as a broad phenomenon and that the labour market can still be made more open and capable of absorbing a greater number of diverse types of citizens. Examples of initiatives were mentioned, including social activation or jobs in a transitional stage involving various support measures and possibilities of a place of "refuge" or "retreat". It was also pointed out that disadvantaged groups need access to a qualified and dignified everyday life where they experience that they are able to contribute something and that someone needs them. Finally, it was pointed out that it is important to pay attention to disadvantaged children and to securing coherence between the help offered to parents and children, respectively.

In relation to pensions, it was discussed whether the pensions system is sufficient in the light of demographic trends and which pillars in the pensions system cover the remaining groups. Some mentioned that inclusion in the pensions area is achieved through employment and that there is uncertainty about how to ensure adequate pensions for men, women, immigrants and self-employed persons in a way that avoids inequality among pensioners. Some participants underlined that other assets (owner-occupied home etc.) should be included in the assessment of the pensioner's finances and taken into account in determining pension benefits. Others mentioned the savings dilemma by questioning whether it is worthwhile for an employee to save up for retirement and postpone his or her withdrawal from the labour market in the light of the substantial equalisation of social benefits. Finally, it was emphasised that to make the necessary choices for pension savings, the individual citizen must have information and knowledge, and attention was drawn to a profound need for a higher level of information.

One theme in the health area was the health of disadvantaged people, which is generally poorer than the health of the average citizen. For example, it was discussed what the causes of this social inequality in health can be. It was emphasised that the effort to improve the health of socially disadvantaged groups should be based on a holistic approach and that increased awareness of the correlations between weak labour market affiliation and a person's health may be productive. It was further pointed out that the use of indicators for continuous monitoring of the health sector's activities and developments in the health of various groups, etc.

⁹ The NGO project on the National Strategy Report of 2006 received funding from the European Commission under the EU Progress programme, from the Ministry of Social Welfare and from the Council for Socially Marginalised People.

should be given higher priority. Only by adopting such a strategy will it be possible to evaluate whether health in Denmark and general health-promoting measures are improving. Some people mentioned that in relation to such a monitoring strategy, it would be useful to compare Denmark to an even higher degree with other countries with which we usually compare ourselves. This would give us a platform for mutual learning between the countries for our mutual benefit. Finally, Denmark's policy of preventive measures was discussed, including the necessity of arranging for socially targeted prevention in the health sector. As the most pressing health problems exist in the group of socially disadvantaged people, it would be sensible to make a differentiated preventive effort that specifically focuses on the problems of socially disadvantaged groups.

In relation to long-term care, participants found that the local authority should pursue a policy of openness in its assistance. They underlined that assistance should be sufficient and adapted to suit the citizen's specific needs and that experiments with "self-assessment of eligibility" may be an advantage. At the same time, it was emphasised that the most disadvantaged groups need protection in relation to freedom of choice. In regard to the quality of the care sector, someone expressed the view that it is necessary to have well-educated staff while ensuring continuity and respect in health care services through the help of assistants close to the user. Finally, they stressed the need to improve the status and reputation of health care staff with a view to ensuring a sufficient level of recruitment in the care sector.

Generally, the participants also discussed the welfare challenges Denmark and Europe are facing now and in the years ahead. Some claimed that Denmark and the EU attach excessive importance to growth and employment and insufficient importance to social inclusion. Others pointed out that social inclusion is achieved through improved employment, but that social inclusion of disadvantaged groups requires a multi-dimensional approach capable of dealing with these people's complex problems. In that connection, it was mentioned that the voluntary social organisations are a necessary part of the solution as they excel at coming into close contact with socially disadvantaged groups and building contact with them on equal terms.

Criticism was also raised over the excessive number of guidelines for how to solve welfare tasks, which may endanger staff commitment. Finally, someone expressed the view that there is not enough money for welfare for all and in all areas, so priorities need to be set.

The Ministry of Social Welfare and the Ministry of Health and Prevention have compiled the messages from the consultation conference and included them in their deliberations for the work on the report. After the conference, the two ministries - in collaboration with other government departments - began preparing a first draft report. Besides the Ministry of Social Welfare and the Ministry of Health and Prevention, the following ministries participated in the work: The Ministry of Finance, the Ministry of Employment, the Ministry of Education and the Ministry of Refugees, Immigration and Integration.

In September 2008, the first draft report was sent for consultation to all the players participating in the conference on 10 April and to the ministries involved in the preparation of the National Strategy Report.

At the same time, the Ministry of Social Welfare opened a website featuring a debate forum where all players - at both the organisational and individual levels - were given the opportunity to contribute spontaneous comments and useful ideas for the National Strategy Report and Danish and European welfare policy. The website also provided relevant information about the conference held on 10 April, the process for preparing the National Strategy Report (time schedule etc.) as well as links to relevant guiding EU documents used in preparing the Strategy Report (*Guidance Note for Preparing National Reports on Strategies for Social Protection and Social Inclusion and Manual for Gender Mainstreaming – Social Inclusion and Social Protection Policies*).

After the deadline for responses to the written consultation and the debate forum had passed, all contributions were compiled and taken into consideration in determining the contents of the final report. The report was then submitted to relevant government committees before being forwarded to the European Commission in September 2008.

The National Strategy Report has been sent to relevant parliamentary committees for briefing purposes.

Chapter 1 - Social inclusion

1.1 Implementation of strategies in the area of social inclusion 2006 – 2008

The following outlines the implementation of the key strategies as described in the National Strategy Report of 2006. For clarity reasons, the terminology used below is identical to the one used in the previous Strategy Report (in relation to action areas etc.).

Cross-cutting and basic activities

In 2006 the Government presented the action programme entitled *Our Collective Responsibility II*, designed to help improve social inclusion of disadvantaged groups in society and the labour market. The Government wanted to break down societal barriers, also in the labour market, and give the most socially disadvantaged groups better opportunities for developing and utilising their own resources and competencies.

With the action programme, the Government aimed to enhance outreach work and supportive activities, provide more means of accessing the labour market and improve local authority casework. In all three areas, specific projects and initiatives have now been undertaken. To offer a clear and coherent presentation of the contents of this National Strategy Report, we have described them in greater detail in the chapter on strategies for the inclusion of socially disadvantaged groups.

Moreover, Parliament adopted a welfare agreement in June 2006, introducing reforms for a wide range of areas of the Danish welfare society, also in relation to socially disadvantaged groups.

Breaking the vicious circle of deprivation

Fostercare reform

In January 2006, the Government's *Fostercare Reform* came into force. The reform aims to strengthen early preventive activities for disadvantaged children and young people and their families, while also improving casework in local authorities. Another objective of the reform is to raise awareness of the schooling of children and young people in care.

In connection with the implementation of the Fostercare Reform, funds have been earmarked for improving local authority activities targeted at socially disadvantaged children and young people. These include efforts to upgrade the management of local authority casework and a dialogue group comprising a number of local authorities tasked with accumulating knowledge on specific preventive initiatives and their effects, as well as a project on how to prevent sexual abuse of children in care. Furthermore, all local authorities in Denmark have formulated cohesive child policies.

Day-care facilities

As mentioned in the 2006 National Strategy Report, research shows that day-care facilities can play an important role in breaking the vicious circle of deprivation, which brought about a requirement for day-care facilities to prepare educational curricula. Practically all day-care facilities have managed to implement the curricula, and the experience gained in this respect is largely positive.

In 2006 the Government earmarked DKK 2bn for improving the quality of day-care facilities. Some of the funds (DKK 170m) will be spent on projects that are focused on helping socially disadvantaged children. Means have also been allocated for staff upgrading efforts in day-facilities in relation to socially disadvantaged children, the promotion of diet and exercise, and DKK 200m goes to local authorities for improving the quality of day-care facilities.

Some of the DKK 2bn has been earmarked for developing materials for language screening, and from 1 August 2007 it became compulsory for all local councils to offer all three-year-old children language assessment and follow-up as needed.

The remaining one billion Danish kroner has been earmarked for a broad range of initiatives, including meal arrangements, reduction in the number of closing days, basic education programme for early childhood educators and upgrading of staff in day-care facilities for children.

In 2009 and 2010, new methods for achieving improved cooperation between day-care facilities, social authorities and parents of socially disadvantaged children will be tested.

Schooling

In the welfare agreement, one of the key goals was that 95% of a youth year should complete a qualifying youth education by 2015. As a follow-up to the welfare agreement, Parliament has provided additional funding of half a billion Danish kroner from the *Globalisation Pool*¹⁰ for vocational training programmes. In addition, a wider range of initiatives (mentor schemes, more practical training places, supplementary training of teachers and action plans) will be launched to reduce drop-out rates and help more students complete their education.

Initiatives have also been initiated to assist adolescents in the eight and ninth forms in their transition from lower secondary school to youth education programmes, and even sixth-grade pupils can now be offered guidance on the contents of and the transition into further education. At the same time, the tenth form has been made more targeted.

The National Strategy Report of 2006 mentioned various initiatives aimed at strengthening socially disadvantaged children's schooling. Projects have been launched to establish cooperation between the school and the social authorities on the teaching of children in care, on children without tuition offers and on parental counselling.

In relation to the first project on cooperation between the school and the social authorities on the teaching of children in care, a partial survey has now been concluded about cooperation at the stage of eligibility assessment and data on foster children's schooling have been compiled. A final, qualitative partial survey about foster children's schooling is about to commence, after which all accumulated knowledge will be analysed and presented.

In regard to the other project on children without tuition offers, a survey conducted has led to a decision to stimulate broader local cooperation between schools, school authorities and social authorities on pupils who are guilty of sustained, illegal absenteeism. The Ministry of Education is cooperating on this issue with the Ministry of Social Welfare and Local Government Denmark¹¹.

The parent counselling project will be concluded with an evaluation at the end of the year.

¹⁰ The *Globalisation Pool* is a pool for investments in research and education.

¹¹ Local Government Denmark (LGDK) is an interest group and member organisation serving the 98 local authorities in Denmark. All Danish local authorities are members of LGDK.

Parental responsibility

The objective of the Danish Parental Responsibility Act of March 2006 is to improve parents' responsibility for their children. The Act has entered into force and turned out to have a positive impact in some of the cases in which it has been applied. The Act typically instructs parents to take action in circumstances where it has not earlier been possible to establish well-functioning cooperation between parents and authorities on the welfare of a child.

Violence and abuse in families

For the period 2006 - 2009, a pilot project has been launched for children who are exposed to physical abuse or witness episodes of domestic violence. The pilot project has been implemented through a bigger project dealing with issues such as the development of local authorities' models for treating battered children.

Another objective is to offer assistance and treatment to children and adolescents who have sexually abused other children and adolescents. An initiated project is progressing according to plan, and the target group has now been expanded to include children down to six years old who show abusive behaviour.

Crime

The National Strategy Report of 2006 concluded that crime among young people below the age of 15 rose and fell in the period from 1992 to 2005 and that the figure was high for the last two years of this period. New surveys, however, have shown somewhat more positive results in recent years.

A survey on self-reported crime shows that the period 1999 - 2005 saw a decline in crime rates among young people and a falling number of crime suspects among the 10-to-14-year-olds. But in spite of the general decline, the number of violence offences increased.

Up to 2005, the group of 15-to-17-year-olds saw an increase in the number of convicted criminals. General crime has since fallen slightly. An actual increase in violence offences has also been reported for this age group.

As mentioned in the National Strategy Report of 2006, citizens with immigrant backgrounds were overrepresented among those who have committed crime. For young people of immigrant backgrounds aged between 15 and 19, crime frequency is 72% higher than for all young people in the same age group, without adjustment for social and demographic differences. New surveys from Statistics Denmark still confirm this picture as the surveys show an overrepresentation of immigrants and their descendants among convicted 15-to-17-year-olds. The rate of overrepresentation is 61% before adjustment for age and socio-economic differences and 18% after such adjustment. Against this background, the Government has set up a pool where the local authorities can apply for subsidies to prevent young immigrants below 15 years of age from developing into juvenile delinquents.

At the same time, a commission on juvenile delinquency has been set up to review Denmark's combined initiatives to combat juvenile delinquency and, on such a basis, submit recommendations for how to target these initiatives most effectively.

Teaching, education, etc.

The welfare agreement from 2006 also focused on the need to strengthen the area of adult and supplementary training so that adults with difficulties in the educational system and in the labour market can more easily gain the skills and competencies demanded by the labour market. In these circumstances, one billion Danish kroner will be earmarked for education and training activities in 2008 and 2009 to meet the welfare agreement target of 40,000 participants annually in reading, writing and math courses.

The 2006 strategy report also mentioned the necessity of starting a survey of whether children and young people with disabilities achieve poorer results from their tuition than children and young people without disabilities. The results of this survey are expected to be available for publication in the first half of 2009.

Employment

The welfare agreement contained many initiatives aimed at increasing the labour supply in the Danish labour market, for instance efforts to systematise and streamline cooperation between the jobcentres and the unemployed, bring forward the time of activation of unemployed people and abolish special rules for older unemployed people.

As a follow-up to the welfare agreement, employment opportunities for older people (over 55 years) have improved with the introduction of a temporary wage subsidy scheme for those aged 55+ who have been unemployed for 12 consecutive months and are recruited for positions in private-sector companies.

Moreover, January 2008 saw the introduction of a scheme under which people over 55 who lose their entitlement to unemployment benefits are allowed to have an older worker job in their local authority on ordinary pay and working conditions. Basically, the person is ensured employment up to voluntary early-retirement age.

Long-term unemployed

As mentioned in the National Strategy Report of 2006, the Government has presented the employment strategy, *A new chance for everyone*, the purpose of which is to give passive claimants of social assistance and start-help assistance another chance of finding employment.

The first goal in *A new chance for everyone* states that 25% of the group of passive claimants of social assistance and start-help assistance should have enrolled in an education programme or started a job after two years. Before *A new chance for everyone*, only 12% of the passive claimants two years before were in jobs. When the employment strategy had been in force for 1.75 years, 20% of the target group were in jobs or enrolled in an education or training programme.

The second goal was that the group – after a period of two years – should become able to support itself 15% of the time on average. In the previous two years, the passive group had only been self-supporting 7% of the time. When the strategy had been in force for 1.75 years, the target group was capable of self-support 13% of the time.

The third goal stated that on average the group should be in activating jobs at least 40% of the time after a period of two years. The previous two years, the figure was 11%. After 1.75 years of *A new chance for everyone*, the target group was in activating jobs 24% of the time.

Citizens with immigrant backgrounds account for about one third of the target group in *A new chance for everyone*. There are no data specifying to what extent citizens with immigrant backgrounds - prior to *A new chance for everyone* - were able to start an education, find employment or be self-supporting. But the data in *A new chance for everyone* show that immigrants perform just as well as the remaining part of the target group when it comes to goal 1 of enrolling in an education programme or finding employment and when it comes to goal 2 of becoming self-supporting 15% of the time.

Debt remission pilot project

In June 2006, to reinforce the financial incentive to find employment, Parliament adopted an act on a pilot scheme involving remission of public-sector debt for socially disadvantaged groups who have received social assistance for four years or longer. The scheme will run for a four-year trial period and be assessed annually.

The first evaluation shows that the scheme is used to a much smaller extent than expected. It will therefore be assessed whether the rules for entitlement to remission of public-sector debt should be eased so that more people can be covered by the scheme.

Housing

Socially disadvantaged housing estates

On the basis of the 2005 housing agreement, more than DKK 2.2bn has been allocated in 2006-2010 for the strengthening of socially disadvantaged housing estates through social and preventive activities. In addition, rental housing and allotment rules have been changed to restrict the influx of socially disadvantaged groups into these estates and, in this manner, contribute to achieving a more diverse and sustainable resident composition.

In the disadvantaged housing estates, the share of residents outside the labour market dropped by 1.1 percentage points to 45.2% between 2004 and 2006, which is deemed to result mainly from the improved employment situation. The share of immigrants and their descendants showed a stable rate of increase during this period, which resulted in aggregate growth of 2.4 percentage points between 2004 and 2007, to 55.9% in 2007.

Strategy against ghettoisation

In a move to change the composition of residents in socially disadvantaged housing estates, the Government launched a strategy against ghettoisation in 2004. The share of residents in non-profit housing who are outside the labour market - following a marginal increase during the years up to 2006 - has so far declined by 1.4 percentage points up to 2007 as a result of the strategy. Since 2004, the non-profit housing sector at large has seen only a moderate change in the distribution of residents by origin. The Government's *Programme Board against Ghettoisation*, which has been monitoring developments in socially disadvantaged housing estates since 2004, will conclude its work by presenting a report in late 2008.

Urban development

As mentioned in the National Strategy Report of 2006, funds are appropriated annually for renovating rundown and outdated housing. Basically, the funds must be used for the properties in greatest need.

There will be a future need for initiatives regarding properties where the market does not ensure the desired development and renewal. That applies both to the social housing task of ensuring healthy and up-to-date dwellings in big cities and to problems involving a large number of sub-standard dwellings in the peripheral regions of Denmark. Focus has also been directed at mould growth problems in housing.

To improve local authorities' possibilities of taking action to tackle the poorest housing conditions, 2008 has seen the implementation of adjustments and the introduction of new urban development tools. Today local authorities are for instance entitled to order remediation measures against condemnable conditions, support the demolition of owner-occupied and cooperative housing and condemn empty dwellings. Moreover, the expenditure limit for area renewal in small towns has been lifted from 20 to 25% of the total funds set aside for urban development projects of DKK 50m.

Alternative residential facilities

As outlined in the National Strategy Report of 2006, the pilot project *Freak Houses*¹² (established in 1999) yielded such excellent results that another DKK 40m was allocated for the period 2005-2008 to establish

¹² The *Freak Houses* scheme was set up with a view to granting financial support to the establishment of permanent housing for people who have difficulty - despite offers of social support - settling down in conventional residential estates or existing residential facilities.

more homes for the homeless and particularly disadvantaged groups, combined with housing assistance during the moving-in phase. The Government has now decided by law to make the scheme permanent as of 1 January 2009, so it will still be possible to apply for subsidies to establish the housing.

Integration

The welfare agreement from 2006 contained several initiatives aimed at strengthening the integration of citizens with immigrant backgrounds in society and in the labour market. Hence, initiatives in the autumn of 2006 included four-party negotiations between the Government, the local authorities and the social partners, the allocation of DKK 300m for the recruitment of company-oriented job consultants as well as extended rights and duties of job activation for social-assistance claimants.

The four-party negotiations resulted in a new four-party agreement on local testing and development of the progressive template¹³, more "Job Packages" on a cohesive integration process for unskilled unemployed people in areas experiencing a shortage of labour as well as initiatives to encourage the use of mentor schemes. To give high priority to the labour market integration of immigrants and refugees in 2009, the Danish Employers' Confederation, Local Government Denmark and the Danish Confederation of Trade Unions have - in keeping with the four-party agreement - launched the *VIP2 Project* to extend the use of "Job Packages", among other objectives.

In the period from 2007 to 2010, the amount of DKK 300m for company-oriented job consultants will be spent on recruiting 190 consultants in the 15 local authorities who have most unemployed immigrants and descendants claiming start-help assistance, social assistance and introductory benefits.

Because of the initiative of extended rights and duties for social-assistance claimants, young people (18 to 25 years) claiming social assistance without qualifying educations can now be required to enrol in a relevant qualifying education programme. Social-assistance payments can be suspended if the young claimant refuses to cooperate.

These initiatives already show positive results. A mere three years ago, one out of six young immigrants were social-assistance or start-help assistance claimants. Today it is only one out of eleven.

Versatility Programme

As mentioned in the National Strategy Report of 2006, the Government has launched a *Versatility Programme*, which will compile, develop and communicate companies' good experience in managing diversely composed groups of employees. To date, support has been granted for 15 projects under the Versatility Programme. The projects have held about 100 workshops and dialogue meetings and visited 1,000 enterprises to inform them about diversity.

A survey on religion in the Danish labour market has been carried out, and three general publications on diversity are in print.

Dialogue activities

In 2006 the Government planned to launch a wide array of activities centred around dialogue with citizens from immigrant backgrounds and associations and networks for immigrants.

In this connection, the Government met with women from immigrant backgrounds several times, and these meetings served as a forum of useful dialogue. The Government has also visited various groups of mothers

¹³ A phased model for step-by-step introduction to the labour market with offers tailored to suit individual needs. The model provides for an active start, including Danish language courses, on-the-job training/wage subsidies, maybe combined with Danish language courses and skills enhancement.

with immigrant backgrounds, the purpose of which has been to obtain contact with the most isolated women and gain experience about their needs.

As part of the dialogue activities, a special pool concerning dialogue on community and diversity was established in 2006. The pool would contribute to fostering, strengthening or embedding a specific dialogue aimed at consolidating local communities - for instance in schools, in housing estates, etc. - or consolidating the spirit of community and solidarity in society at large. Funding is primarily granted for initiatives made up of a broad and non-homogenous target group and involving a diversity of people cutting across lines of gender, ethnicity, religion, etc.

Drug and alcohol misuse

Aimed at improving social measures for drug misusers, about DKK 26m was allocated annually for an application pool in the period 2006-2008. Local authorities, voluntary social organisations and associations as well as other private players may apply for project funding. The results of the application pool will be evaluated in 2009.

As mentioned in the National Strategy Report of 2006, the *National Alcohol Treatment Registry* was established on 1 January 2006. The registry presents an opportunity for continuous and national monitoring of alcohol misuse treatment in Denmark. Now it is possible to follow developments in the scope of treatments in Denmark. The registry contains data compiled at the time the client was admitted to alcohol misuse treatment. These data relate to various socio-economic characteristics, the client's misuse pattern, including the amount and type of alcohol consumed. In addition, the registry also contains data about the treatment provided.

Qualified everyday life

Digital inclusion

As emphasised in the National Strategy Report of 2006, political efforts need to be intensified to ensure that as many people as possible benefit from the full potential of the knowledge society, for instance that people with impairments do not experience technology as an obstacle. These efforts included a goal of implementing digital inclusion in various political agreements and decisions and providing counselling on implementation of accessible public solutions on information and communication technology (ICT solutions).

The Government, Local Government Denmark and Danish Regions have therefore agreed that certain compulsory open standards for, say, accessibility requirements for public-sector websites will apply from 2008 onwards. The standard for IT accessibility applies to new systems or to systems that undergo significant changes after 1 January 2008. The National IT and Telecom Agency has prepared guidelines in the area to encourage the implementation of solutions that observe the standards.

At the same time - in spring 2008 - accessibility of public-sector websites was mapped out, and the result for the individual institution was published on the Internet. Against this background, there are plans of an information campaign targeted at managements and webmasters in public institutions and at local authority disability councils to attract even more attention to accessibility and provide a forum for exchanging knowledge and experience. Two additional surveys are planned for the period 2010-2012.

Country-specific challenges listed in the 2007 Joint Report of the European Council and Commission on social protection and social inclusion

The report listed the following challenges for Denmark in the area of social inclusion:

- Developing labour market tools aimed at improving citizens with immigrant backgrounds' integration into the labour market;
- Ensuring that more older employees and disabled people can remain in the labour market.

Integration of immigrants into the labour market

The employment rate for immigrants and descendants from non-Western countries increased from 45% in 2001 to 55% in 2007. This means that nearly 43,000 more people found employment during the period. As mentioned, by presenting *A new chance for everyone*, the Government has created an effective tool which has contributed to helping several citizens with immigrant backgrounds into employment. For an in-depth description of launched initiatives designed to improve the integration of immigrants into the labour market, see the implementation description above.

More older people in the labour market

As mentioned in the implementation description above, employment opportunities for people over 55 years of age have improved. A temporary wage subsidy scheme for older unemployed people who obtain jobs in private-sector companies has been introduced, and persons who lose their entitlement to unemployment benefits are allowed to have an older worker job in their local authority on ordinary pay and working conditions. The local authority receives a wage subsidy for each older worker job.

More disabled people in the labour market

In 2004 the Government presented *Disability and job – an employment strategy for disabled people*, aimed at helping more disabled people into employment. In late 2008, a report will be prepared on the result of the employment strategy, and to keep attention focused on the area, there are plans of launching new initiatives to follow up on the present strategy when this ends at the close of 2008.

Supplementary initiatives for the employment strategy have already been rolled out, however. 2007 saw the enactment of a legislative amendment, which expanded the personal assistance scheme to include people with mental disabilities and not only people with physical disabilities. By agreement with the political parties of Parliament, a trial has been introduced to test the appointment of social mentors for persons suffering from a temporary mental disorder. 2007 saw the introduction of another trial and the preparation of a “flex job certificate”, which will clearly describe that a person has for instance been found eligible for a flex job and will contain information about the assistance schemes available.

1.2 Strategies for social inclusion 2008 - 2010

Three general action areas have been selected for presentation below:

- Support for disadvantaged children and young people
- Support for socially disadvantaged groups
- Integration

These activities were also described in the 2006 report, but since the Government still gives high priority to these areas, it has been found relevant to elaborate on them in this report, as well.

The first category comprises the socially disadvantaged children and young people who, for different reasons, find it difficult to gain a foothold in society on an equal footing with other children and young people, to utilise their own resources and to make use of the opportunities available in society.

The second category comprises adults who - because of homelessness, alcohol misuse, bad health, mental diseases, unemployment, etc. - have difficulty finding their place both in the labour market and in society at large.

The last category comprises citizens with immigrant backgrounds who have difficulty being integrated in the Danish society and in the labour market as a consequence of barriers related to language, cultural values and traditions.

1.2.1 Support for disadvantaged children and young people

Objectives

The objective of the activities is to give all children and young people access to the resources and offers available in the welfare society and, in that manner, improve the opportunities for children and young people who are or risk being socially disadvantaged. All children and young people must be capable of making use of the opportunities in society and creating meaningful lives for themselves with complete personal responsibility. The opportunities and personal resources of disadvantaged children and young people will be improved through early action in several areas where assistance in public systems and institutions is made more targeted and effective while support is provided to the children's parents.

The effectiveness of public sector assistance will be enhanced by ensuring that the authorities take more cohesive initiatives across jurisdiction borders. Help and services offered to citizens must not be restricted by how the borders of administrative units have been drawn. Moreover, initiatives must be based on a holistic approach to ensure that children with complex problems obtain targeted assistance in dealing with all aspects of their problems.

Action therefore needs to be taken in many areas of the public system. Early preventive measures for children need to be further strengthened to prevent the children's potential difficulties from developing into big and complex problems. Here day-care facilities and schools play a central role in ensuring that children attain many of the academic and social skills necessary to be successful in society and in the labour market. It is therefore the Government's goal that Denmark becomes a world leader in primary and lower secondary schools.

Education in general is a key action area, especially in relation to socially disadvantaged young people who have difficulty finding their place in society and in the labour market. Here the youth education programmes play a pivotal role as they can help adolescents with limited academic skills who are motivated to study. It is the Government's goal that all children and young people are capable of completing a youth education programme.

The Government also attaches importance to strengthening young people's social networks to alleviate problems of loneliness and isolation. In some cases young people may encounter special social problems (such as misuse, crime, mental disorders, etc.), which require particularly urgent and effective action.

Support to parents is a central element of the Government's strategy for socially disadvantaged children and young people. Parents have a natural responsibility for the children they bring into the world and, as the nearest relatives, are expected to protect the interests of the child and the young person. Parents therefore have a special responsibility for taking care that the child and the young person grows up and becomes a responsible and independent individual.

It is important to take steps on all above-mentioned fronts simultaneously to ensure that all initiatives combined have a real impact on the multifarious problems socially disadvantaged children and young people may be struggling with. But it is not enough to launch an extensive range of initiatives. It is equally important to ensure that the initiatives actually work. Therefore, the Government finds it is essential that all initiatives launched, to the widest possible extent, are based on research knowledge while continuous steps are taken to follow up on the initiatives and document how the initiatives work and how they can be improved and carried into effect.

Challenges

Problems need to be identified in time

Early action requires the problems to be identified in time. Denmark provides a good framework for this. By far the majority of children are in contact with a health visitor immediately after birth and are later enrolled in day-care facilities. The professionals who are in contact with the child must react responsibly to the problems. They have to know the danger signals and inform the social authorities if they have concerns for the safety of well-being of a child. It is also important that the social authorities follow up on the reports and take the right action. Early action is not very useful if it is not the right action, too.

This is an area with room for improvement. The persons who are in daily contact with the children (childhood educators, teachers, etc.) must become even better at detecting children's social problems, and at the same time steps must be taken to prevent knowledge of the child's problems from being lost in the transition from one institution to the other. Finally, expecting and new parents are a particularly vulnerable group who may need help.

Day-care facilities must compensate for lack of parental support

As part of the early action, it is important to pay attention to ensuring that children's natural curiosity for learning and developing is stimulated. Children's learning process starts early. As early as at the infant stage, the seeds of conceptualisation, communication and vocabulary are sown, and it is of utmost importance that the parents are capable of motivating the children and supporting them in their development, for instance by reading aloud to them and helping them with their homework. Research also shows that children become better readers if their parents read aloud to them.

Not all children receive sufficient support from their parents, though, and it is therefore important to support these children in their learning process. Day-care facilities are particularly important in relation to ensuring the development of children who receive inadequate stimulation at home. In day-care facilities, attention is

focused on children's language development, and the children learn to socialise with their peers. Surveys show that the development of children's learning skills and performance is closely linked to their social development. To provide equal opportunities for all children, it is essential that more children are offered high teaching standards.

Schooling of socially disadvantaged children

Poor school performance and, consequently, limited qualifications have great implications for children later on in their lives, for instance in relation to their ability to complete a youth education programme. In primary and lower secondary schools, some children risk a considerably lower learning outcome unless special targeted initiatives are launched to improve educational standards and achieve greater open-mindedness in schools. It could be children with academic problems in the form of learning difficulties or as a result of impairments, pupils with social problems due to loneliness, bullying and behavioural difficulties, as well as pupils who are guilty of illegal absenteeism and, consequently, do not attend school for an extended period of time.

In this connection, measures to enhance the schooling of children in care present a special challenge. A survey by SFI - the Danish National Centre for Social Research - shows that about four out of five children and young people in care are of school age, and many of these children have had inadequate schooling before they were taken into care, which means that they do considerably worse than other children in later education programmes and in the labour market.¹⁴

All young people must complete a youth education programme

The difficulties socially disadvantaged young people experience in gaining a foothold in the educational system and in the labour market often result from their lack of basic qualifications for making the right decisions in their lives. Many of the socially disadvantaged young people have difficulty moving through their transition from child to adolescent and from adolescent to adult. One sixth of adolescents have no education beyond lower secondary school. That is a problem. Especially because education is increasingly important for the achievement of success later in life.

Actually, by far the majority of young people enroll in an education programme, but some have to drop out later on. Vocational training programmes have particularly high drop-out rates, for which many reasons may be given. Some have enrolled in the wrong programme, while others have difficulty meeting the academic requirements of youth education programmes. Others again find it hard to adjust socially and have insufficient knowledge of norms and social conventions, while others again struggle with their self-esteem and may lack support from their parents. A special target group in this context is young people of immigrant backgrounds. Drop-out rates in this group are double those of young people of Danish ethnicity.

Heavy social problems and loneliness pose a special problem

A minor group of young people is struggling with special problems such as misuse, crime, mental disorders, etc. The problems dominate much of these people's lives and make it hard for them to lead a normal everyday life and complete an education. Young people with special social problems make up a highly heterogeneous group. In many cases they are vulnerable young people with low self-esteem. Some encounter misuse problems, ranging from weekend misuse to actual physical dependence. This may engender mental problems, which can range from continuous concentration disorders at school to actual psychiatric diagnoses. Besides, some are steering into the path of crime, which can range from single cases of petty crime to regular - and maybe very serious - legal offences. Whenever these problems are encountered, it is essential to take

¹⁴ Focus on schooling in connection with assessment of children and young people's eligibility for being taken into care, SFI - Danish National Centre for Social Research 2008

urgent action and adopt a holistic and cohesive approach as the young people often struggle with more than one problem at a time.

Some young people lack the necessary social and cultural skills and find it difficult to function in social contexts where they experience being different, outside and isolated. Poor networks can have great implications for the young people's possibilities in life. Without other adolescents or adults to lean on, they can easily become lonely. They may have difficulty setting boundaries and resisting group pressure, and it can not least be difficult for them to complete an education. In addition, the young people may have difficulty finding a suitable home and functioning in an ordinary student environment.

Young people currently or previously in care are one particularly disadvantaged group. They are often quite alone when returning from care, and several of them have weak family relations and are suddenly forced to create a life for themselves. Adults play a significant role for children with weak networks. Model breakers - i.e. children escaping their social roles - have often met an adult who used to be a major influence on their lives. It may be the kindergarten educator, the school teacher, the football coach or maybe a friend's parent. Through stable contact to adults, the children can find the support and continuity they have not necessarily found at home. But it requires personal resources to become a member of positive social networks. To give the lonely and socially disadvantaged young people an chance to find their place in society, it is important for them to have a well-functioning network to lean on.

Parents must be supported in taking responsibility for their children

Parents play a key role in their children's development. As the nearest relatives, parents are assumed to protect the child, promote its interest and make sure that the child grows up to become a responsible and independent individual. It is the parents' responsibility to ensure that the child lives healthily and has control over its life. They should provide emotional support to the child, stimulate its development and actively support its schooling. Parents' own behaviour is one of the most important influences on the development of the child.

Some parents are incapable of supporting their children in developing the personal resources and skills that are necessary to cope in society. Parents who are unable to care adequately for their children need help. Most parents are willing to take responsibility for their children, but they lack the tools. Other parents lack the fundamental awareness of their responsibility and what it implies. It is essential to take early action and help these parents - in some cases even before the child is born. As early as in the child's first year, the seeds of skills required throughout life are sown. In other words: the earlier steps are taken to improve parental skills, the better.

Young mothers are an especially vulnerable target group. Besides their young age, the mothers are often alone with their responsibility and have weak networks. It can be hard to find the surplus needed to overview, plan and take care of the child's development of social aptitude and competence. Many of the children who receive public sector assistance are children of young, single mothers. It is therefore important to take action targeted specifically at this group of parents.

Actions

Based on the Government's objectives in regard to supportive activities for socially disadvantaged children and young people, coupled with the challenges still existing in the area, the Government has allocated a total amount of DKK 600m from the rate adjustment pool over a four-year period, distributed on the three main action areas of children, young people and parents, respectively. The actions have been pooled in the action programme entitled *Equal opportunities - strengthened personal resources and social cohesion* and broken down into seven areas:

- Early and cohesive intervention
- Academic proficiency and early learning

- Youth education
- Special social problems
- Networks
- Parental responsibility
- Documentation and effect

Early and cohesive intervention

Over the last few years, the Government has taken a number of initiatives to strengthen early intervention. In 2006 the Government launched the *Fostercare Reform*, mainly to enhance the quality of casework and tighten the requirements for investigations in cases involving children. Moreover, local authorities have been presented with a statutory requirement to formulate child policies, linking their general and preventive work with their targeted initiatives. Supportive measures for expecting parents have been instituted in parallel with efforts to strengthen early action in the socially most disadvantaged families, especially disadvantaged pregnant women, marginalised mothers of infants, socially disadvantaged fathers and socially disadvantaged families with infants from immigrant backgrounds.

The Government assesses, however, that more initiatives in relation to early intervention are still called for. The preparation of enhanced tools is required to offer health visitors, childminders, early childhood educators, teachers and other professionals better chances of identifying socially disadvantaged children, and cooperation with local authorities will reduce the average age when disadvantaged children start receiving help and support. Besides, local authorities' handling of reporting and notification issues needs to be examined to ensure the spreading of valuable experience.

In regard to the challenge of preserving institutions' knowledge about the child, attempts will be initiated - in alliance with local authorities - to introduce interviews in connection with the transition from health visitor to crèche, from crèche to kindergarten and from kindergarten to school. With this in mind, cooperation between health visitors and day-care facilities on the socially most disadvantaged children will also be strengthened.

To provide special support to expecting or new parents, a pool has been established to strengthen the health care initiatives targeted at this group and to strengthen these parents' social networks.

Academic proficiency and early learning

The Government has already taken various initiatives to strengthen academic proficiency and early learning. A wide range of offers have been introduced to improve children's reading proficiency and address language difficulties, including offers of a language assessment of all three-year-olds and compulsory language stimulation of bilingual children who need this. Moreover, it has been decided to start supplementary training courses for early childhood educators on socially disadvantaged children in day-care facilities, on children's learning difficulties, etc.

Because of the mentioned challenges in the field, however, reinforced initiatives are still needed. Based on the experience from Great Britain, a Book Start programme will therefore be established under the auspices of the health care system where the health visitor - in cooperation with specially trained librarians - will support parents in reading with their children.

In relation to the schooling of socially disadvantaged children, quite a few initiatives have already been launched to improve educational standards in primary and lower secondary schools and, by doing so, provide better opportunities for socially disadvantaged children. One project deals with cooperation between schools and social authorities, including on tuition of children and young people in care. Two other projects deal with children who, for various reasons, have no tuition offers and on school-parents cooperation, respectively. Finally, the Government has implemented an action plan for reading

As the Government still supports reinforced action in primary and lower secondary schools, a broad spectrum of initiatives have been launched. Under the action programme *Equal opportunities - strengthened personal resources and social cohesion*, an advisory unit for primary and lower secondary schools will be established to facilitate the learning of bilingual pupils. The central task will be to formulate action plans targeted at bilingual pupils with special needs.

In addition, funds from the rate adjustment pool for the period 2007-2010 have been allocated to a project for primary and lower secondary school pupils who, without special targeted measures, risk a considerably lower learning outcome and/or referral to remedial instruction. Within the framework of the project, local authorities have been allowed to apply for subsidies for development, implementation and evaluation within three themes:

- Local government strategies, organisational forms and stand-by measures involving social authorities
- Framework conditions for learning at the school or class level
- Supplementary or alternative pupil activities organised in connection with the other tuition offered to pupils

Youth education

As mentioned earlier (see the implementation description in this chapter), mentor schemes and more practical training places in the vocational training programmes have already been introduced. Moreover, local authorities are now obliged to ensure that young people under 30 years of age from limited educational backgrounds can enroll in education programmes. Young people (up to 25 years) with special needs have also obtained a right to a three-year youth education programme, which will ensure that mentally disabled young people and other young people with special needs attain personal, social and academic competencies for independent and active participation in adult life and, if possible, for further education and employment. Finally, young people with immigrant backgrounds are supported in the form of improved educational and occupational counselling for this group.

Even so, the above-mentioned challenges in relation to young immigrants point to a continued need to strengthen activities targeted at this specific group, and the advisory unit for bilingual pupils in vocational training programmes is therefore expanded. The unit is targeted at pupils with a drop-out risk, and the offer comprises mentors, study and training workshops, optional classes, parental involvement and teaching of Danish for business purposes.

Special social problems

Danish legislation presents ample opportunities for helping young people with social problems, and the Government has also bolstered activities in this field. A treatment guarantee has been introduced for young people with severe substance misuse problems. Funding has also been allocated for psychology assistance, intensified efforts to help young people with mental problems and improved crime prevention activities.

The Government will continue to step up its efforts in the field and will therefore, in cooperation with a wide array of local authorities, establish a 24-hour counselling service on a trial basis to support young people as quickly as possible in addressing their social problems when they are motivated to do so. When a young person contacts the service, the local authority will contact him or her within 24 hours and launch the necessary initiatives quickly. Accessibility is a key element, and the young people must therefore be contacted through the communication channels they use themselves, i.e. text messages, e-mails, etc.

In relation to young people previously in care, an experiment will be conducted where all these people become entitled to support when returning from care. The young people will, through guidance and counselling, be supported in completing an education and leading an independent life.

To support young substance misers, an application pool will be established for the purpose of contributing to a more widespread use of effective types of treatment in local authorities. The point of departure will be a well-documented US programme, but attention will also be focused on the dissemination of useful Danish experience to ensure that local authorities can learn effectively from one another.

Finally, a national research centre on substance abuse will be established. Here professionals and others will find advice and counselling on how to deal with problems of substance misuse in the best possible manner.

Networks

Also in relation to the networking problems of children and young people, a range of initiatives have been initiated, for instance in relation to those currently or previously in care. Funds have for instance been allocated for attempts to establish peer-to-peer counseling at the basic level of the vocational training programmes with a view to retaining the weak students in the programme. It is assessed, though, that concentrated action in the area still holds a potential.

The Government will therefore open up an opportunity for the employment of social janitors in connection with youth housing projects. The janitors will be at the young person's service, identify possible problems at an early stage and build bridges between the young person and the other residents.

In relation to lonely children and young people in care, the Government finds it essential to strengthen the social network of these highly vulnerable groups. Several voluntary associations today expend major efforts in offering these young people a network, and a pool is being established to support the valuable efforts.

At the same time, it is important to strengthen lonely children's contact to adults. Based on the useful experience from Adult Friends for Children¹⁵, schemes will therefore be established to build relations between vulnerable children and privileged older people. The children obtain a "best friend". A pool is being established from which voluntary associations, among others, can apply for funding.

Parental responsibility

A wide range of initiatives have also been launched to make parents take more parental responsibility. An Act of Parliament on parental instructions (see also the implementation description earlier in the chapter) has come into force, and attempts at the development, evaluation and dissemination of model contracts to strengthen parental responsibility have been made. Moreover, various steps have been taken to strengthen parents' support for the child's academic and social development, including homework cafés for parents, experiments with kindergarten libraries where parents are encouraged and helped to read to and with their children as well as interdisciplinary cooperation in the introduction period of school attendance where parental involvement is a central element. Pregnant alcohol and drug abusers are the target of an early intervention approach in the form of family treatment units and early tracking. Local authorities have also been given the possibility of applying the measures of children's rules even before the birth of the child and of offering pregnant alcohol misusers retention in treatment.

The Government wants to supplement these steps with additional measures. It will for instance give local authorities an opportunity to apply for funding for, say, the establishment of family courses at folk high schools where the emphasis is placed on the parents' ability to support their children's school attendance. Families with non-Danish immigrant backgrounds constitute a special target group.

¹⁵ The Danish National Association of Adult Friends for Children is an umbrella organisation of independent associations and groups of people, all of which refer to themselves as Adult Friends for Children. The associations establish connections of friendship between privileged adults who act as volunteer visitors and children and young people who have inadequate contact to adults in their everyday lives.

The involvement of immigrant parents in primary and lower secondary schools will be strengthened, as well. Parents need to be informed about the Danish school system, how they can involve themselves in school life and contribute to the development of their child, academically as well as socially.

Parent programmes have appeared to have a positive impact on participants' parenting skills. The Government therefore finds it important to channel even more resources into this field and to build on the foundation of well-documented results in the work on parenting skills. The programme *Multidimensional Treatment Foster Care* should therefore be used more extensively, and a pool will be established from which local authorities can apply for funding. The programme is targeted at young people who, for various reasons, are about to be taken into care. The programme implies that the young person is placed temporarily with a specially trained foster family while the parents receive intensive family treatment and are made capable of supporting their child.

As mentioned earlier, the group of young and vulnerable people presents a special challenge, which the Government intends to address. A pool will be established from which local authorities and voluntary associations can apply for funding, and initiatives must encourage young mothers to take an education, find employment and build a network.

At the same time, a pool has been established for the construction of special student resident halls for the target group with accommodation for 10-15 residents each. Each resident hall will feature the principal's flat as well as premises for other adult support staff and common premises. Support staff must offer the mothers support, guidance and assistance in organising their everyday lives.

To help socially disadvantaged children with their homework, a number of community centres will be established in the disadvantaged areas. The community centres will provide homework cafés where the children, maybe accompanied by their parents, can obtain help with their homework. The homework cafés will ensure that bilingual pupils who receive insufficient support from their parents attain the necessary academic skills.

Documentation and effect

The actions should result in specific, measurable improvements for children and young people with social problems, and it is therefore essential that all actions actually work.

Three steps will ensure effective actions: First, the initiatives have been selected on the basis of knowledge about what works. They are based on positive experience from Denmark or abroad. Some initiatives aim to provide new knowledge about how best to strengthen the resources of socially disadvantaged children and young people as more knowledge is needed about the impact of activities targeted at children and young people.

Second, the implementation of the initiatives will require the formulation of specific objectives for the individual activities. At the same time, it must be clear how the objectives can be achieved in practice.

Third, results and experience - positive and less positive alike - will be followed up on a continuous basis. The documentation from the individual projects and initiatives therefore has to be compiled. This is a manner to ensure systematic compilation of knowledge, which will provide a platform for taking even better action in the future.

1.2.2 Support to socially disadvantaged groups and groups in risk of social exclusion

Objectives

Support must be given to all disadvantaged persons who – because of limited personal resources, structural barriers in the environment or both – have difficulties gaining a foothold in society and in the labour market. They include drug and alcohol misusers, mentally ill people and the homeless.

The aim with socially disadvantaged groups is to create better opportunities for self-support in the form of employment and to support disadvantaged people and thus enable them to become part of a greater whole, one that gives structure to the day and extends the individual's social network, thus boosting the individual's dignity and self-respect.

Having a home is an important precondition for enabling disadvantaged groups to give structure to the day and achieve a qualified everyday life. This is why the Government finds it important that all groups in Danish society are able to find modern housing that suits their needs and financial circumstances.

In this connection, creating a homogenous housing sector that is neither segregated nor divides towns into attractive and less attractive housing areas is crucial for social cohesion and inclusion of the disadvantaged groups. Consequently, the Government also finds it important to continue countering ghettoisation and initiating a positive development in troubled urban areas.

Combating homelessness is a special objective in the Government's efforts to create suitable housing for everyone. The number of homeless people who sleep in the street must be reduced, and young homeless people must be offered an alternative to a place in a reception centre. The stay in reception centres must be limited to three or four months for citizens ready to move into a dwelling with the necessary support, and citizens must be ensured housing before being discharged from a treatment institution or released from prison.

Improving the health of disadvantaged people is another key objective in the Government's initiatives. Disadvantaged people are in much poorer health than the rest of the population, and health problems may prevent disadvantaged people from having a meaningful everyday life with contact to the surrounding society and from getting employment. For this reason, the Government wants to improve the health of disadvantaged people.

Improving disadvantaged people's housing situation and health goes hand in hand with intensifying employment measures for these groups. In the opinion of the Government employment is one of the chief paths to social inclusion in society and a strong tool for creating an active and dignified life for the individual. Employment creates better opportunities for being part of a greater whole, getting structure in the day and extending the social network, which will boost the individual's dignity and self-respect. Therefore, the Government will continue the work of helping disadvantaged people get work.

As mentioned above, the strategy for including disadvantaged groups in society must be based on the principle of gender equality. Men and women in all parts of society – whether in disadvantaged groups or other parts of the population – have different starting points, and thus efforts will be most effective and targeted when these differences are taken into account. In the efforts to combat homelessness, the Government has so far integrated the gender equality aspect at a level where homeless men's and women's differing needs are now taken into account.

Challenges

Continued need for stabilisation and development in disadvantaged housing estates

A need still exists for strengthening the disadvantaged housing estates and countering ghettoisation trends by improving the employment and letting situations in the troubled areas. The areas must become well-functioning towns and urban areas that are attractive to live, work and invest in. It remains a challenge to ensure a suitable range of rental housing at reasonable prices, and to ensure that rundown housing without installations (such as no toilet, bath or central heating) is renovated to modern standards.

In this context, collecting knowledge and experience about the initiatives that work with the disadvantaged housing estates is important. The numerous and varying initiatives and support programmes implemented during the last decades make it a challenge to ensure that experience and knowledge are passed on with a view to qualifying social housing initiatives, both those already launched and future ones and creating potential for holistic and coordinated efforts in troubled housing estates.

More people are being evicted from their homes

Recent years have seen an increase in the number of tenants being evicted from their homes because they do not pay rent on time.

”SFI – Danish National Centre for Social Research” has carried out a survey in this field, which shows that the number of tenants evicted from their homes has increased from 1499 in 2002 to 2589 in 2006.

The survey assesses that tenants are being evicted from their homes because they have low incomes – a relatively large proportion of which they spend on rent – and also have difficulty managing their finances. Many tenants being evicted from their homes also have large debts.

Furthermore, SFI’s report shows that especially young people without education, citizens with immigrant backgrounds, single men and benefit claimants risk being evicted from their homes. Forty-three per cent of evicted households are families with children.

Tenants who have been evicted from their homes may risk being homeless and lose contact to their families and networks.

Number of homeless

Homelessness is a particularly striking expression of a person’s difficulties in finding a place in society and attaining suitable housing. To identify the scope of homelessness in Denmark and establish a better basis for developing future initiatives for the homeless, the Government initiated a census of homeless people and a mapping of the demand for dwellings and residential housing for homeless people.

The census showed that in the week from 5 to 11 February 2007, at least 5,200 people in Denmark were homeless and that approx. 3,000 of them were staying in Copenhagen and its environs. In a mapping from the same period of residential housing aimed at homeless people, the local authorities assessed that a further 1,000 dwellings and residential housing units were needed for the local authorities to be able to solve the homelessness problems.

A special challenge in combating homelessness is targeting initiatives at homeless men’s and women’s different circumstances and needs. Taking into account the fact that homeless men often find it difficult to establish and maintain social networks and conduct a non-violent dialogue with the authorities is particularly important.

Disadvantaged people have significantly poorer health than other citizens

The National Institute of Public Health has carried out a health and ill-health survey (“SUSY UDSAT”) for the Council for Socially Marginalised People. The survey is based on self-administered questionnaires distributed in some 120 shelters, shelter cafés, reception centres, etc., in more than 40 Danish towns. The survey gives the most comprehensive and detailed description so far of health among alcohol and drug misusers and homeless, mentally ill and poor people (the group of poor people has been defined as persons who state that they often do not have enough food because they cannot afford it).

The health of socially disadvantaged people is significantly poorer than in the general population. If we look at ill-health and specific diseases, there are significant differences between the Danish population in general and the socially disadvantaged groups. Thus, 61% of the respondents suffer from long-term illness (i.e. illness of at least six months' duration), while this share is 39% for the general population.¹⁶ A total of 20% of the respondents have ulcers – against 2% of the general population. As regards health habits, 68% state that they never exercise, and 52% that they are heavy smokers (i.e. smoke 15 or more cigarettes per day). In comparison, only 18% of the general Danish population state that they are heavy smokers. A key and valid measurement of health, which has also turned out to be an extremely good indicator of subsequent ill-health and death, is the assessment of own health. The survey shows that the share that assesses their own health as very good or good is about 20% for the group of drug and alcohol misusers and mentally ill and poor people. In the general population, this share is about 85%.

The survey also shows that the general well-being of socially disadvantaged groups is significantly poorer than that of the population at large. For example, 43% of the respondents have attempted suicide. This share is 1% for the population in general. A total of 25% of socially disadvantaged people have been exposed to violence within the last year, while this applies to 2% of the Danish population in general. Twenty-seven per cent of the respondents state that they often do not eat the quality and variety of food they would like to because they cannot afford it, and 24% only sometimes, rarely or never bathe to the extent needed. For all the measurements of health applied – including self-assessed health, stress, mental health, health behaviour, ill-health, use of health services, general well-being and social relations – the socially disadvantaged groups are significantly worse off than the general Danish population.

10-11% of disadvantaged people are assessed to be in employment

No exact statement exists of the share of socially disadvantaged people that is without employment, already for the reason that socially disadvantaged people are not a precisely defined group. However, it is assessed that only about 10% of the group have paid employment. In connection with the above survey on the health of socially disadvantaged people, the share of those in employment was stated at 11%. Some 41% received social assistance, some 38% received anticipatory pension, while the remaining 10% had another basis of income.

Helping socially disadvantaged groups get work continues to pose major challenges. It is important that they receive support in establishing a stable life by having a suitable home and good health. At the same time, they must receive help extending their social networks and contact to the community. Similarly, it is important that they receive support in upgrading their competencies, and that flexible accesses to the labour market are created for these groups.

Access for everybody to the opportunities of the knowledge society

International surveys on accessibility in the public system and citizens' IT preparedness show that Denmark is often at the front in these areas. Good IT skills mean that Danes generally have a solid basis for getting on in the digital information society, regardless of occupation, education and age.

¹⁶ The health of the general population was examined in a major survey from 2005 called “SUSY-2005”. All references in the above text to the health of the general population come from this survey.

Today, considerable resources are spent – in the education sector, in the business sector and in connection with the development of digital administration – to secure and develop Danes' IT skills. But there are also Danes who for various reasons have failed to achieve the IT skills needed to make it in the digital world. In this context, targeting investments in Danes' IT skills at the activities that work as well as targeting efforts are important.

Actions

Action in relation to disadvantaged housing estates and ghettoisation

Action to improve the situation in the disadvantaged housing estates is being taken on several fronts.

As mentioned above, funds are appropriated annually (government funds for building renewal) in the Budget to renovate rundown housing. Basically, the funds must be used for the properties in greatest need. An amount of just under DKK 300m annually is appropriated for building renewal.

Furthermore, several initiatives and agreements have been launched to improve the social housing sector. For social housing renovation, the National Building Fund has allocated an investment limit of DKK 21bn for the period 2001-2012. For the period 2007-2012, the investment limit is DKK 2.4bn annually. Moreover, for the period 2007-2010, an amount of DKK 1.6bn has been earmarked for enhanced efforts to curb ghettoisation by reducing rents and taking social and preventive measures in troubled social housing divisions.

For the period 2008-2011, an amount of DKK 40m has been earmarked for establishing a social housing development centre intended to qualify social housing initiatives already launched as well as future activities. The importance of the centre will be assessed before the end of 2011.

Finally, an annual amount of DKK 50m has been allocated – via public urban development – to area renewal in rundown urban areas in large and small towns and recently built housing estates with severe social problems. Between 2004 and 2008, 51 area renewal projects were launched. The results of the area renewal projects must be reported during the five-year project period.

The number of evicted tenants must be reduced

To help citizens who risk being evicted from their homes because of failure to pay rent, the Government will – in connection with the distribution of the 2009 rate adjustment pool funds – apply for funds to initiatives in this area.

According to the plan, the initiatives will focus on securing earlier action than so far in relation to all tenants at risk of eviction (and not just certain target groups that have the local authorities' attention) as well as helping the target group manage their personal finances.

Combating homelessness

As part of the 2008-2011 rate adjustment pool agreement, the Government and the parties behind the rate adjustment pool allocated DKK 500m over four years to implement a strategy targeted at reducing and ultimately eradicating homelessness in Denmark.

The rate adjustment pool grant will be used to establish housing and socio-pedagogic initiatives for the target group. The rate adjustment pool parties have agreed that the funds in the homeless strategy will mainly be

distributed following negotiation with the local authorities in which the problems of homelessness are largest and where the local council wishes to contribute to a solution. The trends in homelessness are being followed locally and nationally in the period. The next national census of homeless people will be conducted in 2009. This will also include continued development of Freak Houses, which are special dwellings for persons who can only be fitted into ordinary housing with difficulty.

Help to victims of human trafficking

The Government has committed itself to ensuring that multi-agency activities are undertaken to help victims of human trafficking. The action plan includes preventive, supportive and investigation-related activities as well as increased coordination of cooperation between social organisations and authorities.

It appears from the progress report on the implementation of the action plan from June 2008 that the targets set by the Government for the period have been reached. In 2007, the Government established the Centre against Human Trafficking (a knowledge and coordination centre in this field); ensured that more shelters can receive women trafficked into prostitution; established a practice so that all people registered as victims of trafficking are offered prepared repatriation; and, finally, put the social aspects of human trafficking on the international agenda.

Furthermore, the implementation efforts have concentrated on spreading the social initiatives taken so far to all of Denmark; ensuring quality and continued development in the social services offered to victims of human trafficking, including establishing a new meeting place in Copenhagen for foreign women in prostitution; creating cooperation structures between the stakeholders in this field; adapting legislation in accordance with the individual's possibility of a 100-day reflection period; and improving rehabilitation possibilities in the home countries as well as reinforcing police efforts.

Combating social inequality in health

Combating social inequality in health must be a key element in a new prevention plan. The Government has used and will continue to use the annual rate adjustment pool agreements to alleviate social inequality in health, especially for socially disadvantaged groups. The 2007 rate adjustment pool agreement earmarked funds for the action programme Our Collective Responsibility II, which contains health and prevention initiatives targeted at disadvantaged groups. The initiatives include incorporating sports, exercise and dietary advice as part of the shelters' services to disadvantaged people. The shelters are assessed to be an obvious place to help socially disadvantaged people achieve a positive development, since the shelters help disadvantaged people develop fundamental social competencies, which are of major importance to the disadvantaged people's ability to establish contact with the surrounding community, improve their own health and be successful in the labour market.

For example, five sports power centres have been established in Odense, Esbjerg, Aarhus, Horsens and Aalborg, respectively. The primary task of the power centres is – independently or in cooperation with the Sports Organisation Danish Shelter Sports – to offer disadvantaged people and shelter users the opportunity to participate in sports and exercise-promoting activities. The initiatives of the power centres are diversified, but may, for example, include weekly sports activities with free, healthy meals, establishment of sports clubs in shelters or instruction in health, diet and exercise.

The long-term goal is that the sports networks established will enable the power centres to form the basis for a self-sustaining exercise and sports culture in the Danish shelters. As part of this work, the Sports Organisation Danish Shelter Sports is holding two large sports rallies in Odense in the summers of 2008 and 2009 jointly with Odense Local Authority and with support from the Ministry of Social Welfare. The rallies strongly raise awareness of the health and personal resources of socially disadvantaged people as well as the beneficial effects of sports.

Furthermore, the Government has set up a prevention commission with a view to launching a national action plan for prevention. This work will include the individual's personal responsibility for his or her own health. The Government's target is for average life expectancy to increase by three years over the next decade.

Employment of socially disadvantaged groups

To improve inclusion of the socially disadvantaged groups in society and in the labour market, the Government published the action programme *Our Collective Responsibility II* in 2006. To be able to plan the initiatives in the best possible way, the Government prepared the action programme on the basis of a hearing in the Council for Socially Marginalised People and among other organisations in society that represent the disadvantaged groups. In accordance with the wishes of the Council for Socially Marginalised People and the organisations, the resulting action programme contained initiatives in several areas. The programme contains specific out-reach and contact-creating initiatives, where the authorities and civil society organisations, which often find it easier than the authorities to create the first successful contact to the disadvantaged people, will initiate a positive development that may help disadvantaged people into employment in the long term. Moreover, the action programme also contains more targeted employment initiatives that help create more opportunities for employing disadvantaged groups in the labour market and upgrade the competencies of disadvantaged people. An account is given below of the initiatives initiated so far in relation to *Our Collective Responsibility II*.

Mentor schemes

With a view to helping disadvantaged people into employment, projects have been established with mentors who are affiliated to the shelters where many disadvantaged people stay.

A follow-up to the projects in the first year showed that the target groups in the projects are burdened by more problems than assumed. This is due to the generally favourable employment situation, which means that the best-functioning of the disadvantaged people have found paid employment themselves.

The largest target groups for the projects were mentally ill substance misusers and persons with physical complications. Approx. 53% of them have bad labour market experience. Seventy per cent of the enterprises cooperating with the projects are private ones. No information is yet available on the effect of the initiatives.

Establishing enterprise centres

Since 2006, more than 100 private or public enterprises have established enterprise centres according to agreement with the local job centre. An enterprise centre employs a group of at least four benefit claimants that have problems other than unemployment. Work is integrated in the enterprise's normal operations and can be supplemented by various forms of activities that support the unemployed person on his or her way to the labour market. Experience gained so far shows that participants have very poor qualifications for performing a job, including a very long period of unemployment. Still, the results are better than for other forms of activation.

A pilot project following the same model has subsequently been launched, but for vulnerable young people. Young people's social psychological problems are solved in an integrated effort with an employment-oriented programme in an enterprise. The pilot project is expected to include eight enterprises.

Special supplementary training courses for socially disadvantaged groups

A supplementary training project will be set up, under which socially disadvantaged people with qualifications in a certain field can complete a special supplementary training course, an initiative that will eventually ensure that they can get a job within their field.

Establishing special training programmes for caseworkers

In autumn 2007, the Danish School of Public Administration held 20 courses for up to 500 caseworkers. The courses were based on the challenges that caseworkers face with disadvantaged groups. Much time was spent on identifying caseworker processes, i.e. training skills. A special training programme aimed at both outreach social workers and caseworkers in the administrations will be established. External providers will conduct the training programme.

One example is the project *From disadvantaged to appreciated*, which aims at helping socially disadvantaged people set up their own businesses. Almost 100 users submitted proposals for business plans, eleven of which were chosen. These users can use business managers as personal sounding boards for six months. Other projects involve the granting of micro loans to entrepreneurs among socially disadvantaged people and the launch of recycling projects.

Forming marginalised-people teams in the local authorities

Pilot projects will be launched on establishing special interdisciplinary teams of local authority social workers. On an equal footing with the rest of the population, socially disadvantaged groups need assistance through public social, health and employment services. Moreover, they need special support with problems that are often severe and complex. The aim of establishing marginalised-people teams is thus to make it possible to take swift action when a citizen approaches a social worker for help handling substance misuse or health problems or finding a road towards employment. Ten local authorities have received grants.

Establishing satellite offices in socially disadvantaged areas

“Satellite offices” are being set up in places where many people with severe social problems live, ghettos for example, to provide easy access to help and support from public authorities. Easy access to caseworkers is crucial when citizens run into a situation requiring assistance from the social authorities. Locating satellite offices in socially disadvantaged citizens’ neighbourhoods creates an organisation that promotes a more informal contact with public authorities. This makes it easier for disadvantaged citizens to learn of and benefit from the services offered by the public system. Eight local authorities have received grants to establish satellite offices.

The initiatives are aimed at better qualifying local authorities to provide the right help at the right time to socially disadvantaged citizens. The initiatives will mean that the local authorities’ services and other support to socially disadvantaged citizens are given where the citizens live, and that all problems are considered as part of the case work. The initiatives help ensure that assistance is provided at the right time, namely when the citizen is ready to re-enter his or her life.

Results of the efforts must be documented for each initiative and in each project launched as part of the realisation of Our Collective Responsibility II.

In autumn 2008, a progress report will be prepared for the results of Our Collective Responsibility II, it being expected that at that time more specific conclusions can be drawn about the results for individual participants in the projects.

Skills upgrading for groups with reading and spelling difficulties

Another major initiative in 2007 was upgrading the skills of persons who lack reading/spelling competencies. The project is part of the Welfare Agreement, and the objective is to assess the reading and spelling skills of 5,000 unemployed persons. If necessary, they will be offered upgrading of their skills. One thousand persons are expected to have such need.

Good IT skills for everyone

To ensure that Danes further develop their IT skills, the Government launched the action *The Danes' IT skills – a targeted effort*, the emphasis being on groups with limited IT skills.

The action includes a number of initiatives focusing on users' motivation, user friendliness and actual learning programmes.

The initiatives are being implemented based on the citizens' circumstances, while attention is also being focused on making citizens aware of their needs and motivating and inspiring them to further develop their IT skills. Overall, the initiatives are meant to enable citizens with limited IT skills to use the digital possibilities of the future.

1.2.3 Integration

Objectives

In its integration strategy, the Government finds it important that both refugees and citizens with immigrant backgrounds are fully integrated in Danish society. Both groups must have access to the necessary resources and services in the welfare society, while also making active efforts to become integrated in Danish society and in the labour market. The Government sees it as a very important political objective to protect social cohesion and ensure that we have a society with both responsibilities and opportunities for all as well as room for freedom, equality and diversity. Discrimination, marginalisation, polarisation and extremism that can threaten cohesion and the individual's safety and opportunities must be countered.

Challenges

Refugees must be part of Danish society

A special challenge in refugee policy is that newly arrived refugees who come from a culture with other norms, values and traditions must as quickly as possible become citizens that participate in and contribute to society on an equal footing with its other citizens. Newly arrived refugees must consequently become self-supporting as quickly as possible through employment and acquire an understanding of the basic values and norms of Danish society.

Refugees traumatised after flight, war or torture need treatment and support, and for traumatised refugees integration into a new society may be an insurmountable and protracted task. Working with traumatised refugees places heavy professional and personal demands on the professionals in contact with these groups, and the relevant professionals must have access to the proper knowledge and the right tools in this field.

Children and young people must be better integrated

Many children and young people with immigrant backgrounds are experiencing problems finding their place in Danish society. A large number of bilingual children and young people with immigrant backgrounds and their families are not sufficiently integrated in the schools and thus in Danish society.

Extremism and radicalisation are other expressions of the challenges Denmark faces in relation to protecting cohesion and a society with freedom, opportunities and safety for all. In recent years, Denmark has seen worrying trends that certain groups of young people are being influenced by extremist views and radicalisation. In this context, too, it is a political challenge to impose requirements and give opportunities to

promote inclusion and participation in society; not least participation in democracy, whose values of freedom, equality and mutual responsibility form the framework within which citizens' diversity can thrive in a positive way.

The risk that extremist forces may become hostile against society or specific groups in society must be prevented and countered. Society must be prepared to identify and handle specific problems with extremism in time, and the extremists' propaganda must be countered with factual information and alternative services to young people.

Moreover, surveys have shown that today many people with immigrant backgrounds feel that they are victims of discrimination, for example at work, in public debate and at discotheque entrances. Although surveys also show that the share of people who feel discriminated against is declining, it remains an area requiring action. Perceived or real discrimination may lead to exclusion and, as a barrier to societal participation, discourage integration.

Gender equality must apply to everyone

Besides extremism, recent years have also shown that certain groups with immigrant backgrounds show a lack of understanding for and acceptance of the principles of gender equality and the individual's right to choose his or her spouse freely. Consequently, authorities and social workers need to gain greater knowledge of honour-related conflicts and how to handle such conflicts. Furthermore, the victims of honour-related violence need to be given advice and security.

Generally, giving immigrant women special attention in the integration efforts is important. Each woman must have the possibility of discovering, using and developing her own resources and thus of attaining a better basis for using the opportunities in Danish society. This will not only benefit the individual woman herself, but also her family as a whole, as women are often the key to the integration of the entire family.

Both more men and more women must get into employment

A key aspect of the integration efforts is to help citizens with immigrant backgrounds and their descendants to get work, and, as mentioned earlier in this report, the employment initiatives aimed at these groups have borne fruit in recent years. However, these groups' employment rate is far below the total employment rate, and consequently citizens with immigrant backgrounds – both women and men – still need to be helped into employment. These efforts are also furthered because enterprises are becoming better at exploiting the opportunities inherent in employing these citizens and managing diverse employee groups who can and will perform the tasks pending.

Many Danish enterprises already have much positive experience and many good methods. For this reason, collecting this experience and passing on good examples of practice are essential. Many enterprises are positive towards employing citizens with immigrant backgrounds, but others still hesitate to employ these citizens.

Actions

Newly arrived refugees

Local authorities offer refugees, as well as other foreigners covered by the Integration Act, an introduction programme of up to three years' duration, covering Danish language courses, including courses in Danish culture and society, and – where relevant – active employment-related services. With a view to the foreigner's obtaining ordinary employment as soon as possible, the local council must work with the individual to prepare an integration contract based on an overall assessment of the individual foreigner's situation and needs. The integration contract applies until the foreigner is granted a permanent residence

permit. In connection with the preparation of the integration contract, the foreigner must sign a statement on integration and active citizenship in Danish society.

Traumatised refugees

To improve efforts aimed at traumatised refugees, the Government has launched three major projects with local partners and with part projects in various Danish towns. The purpose is to further develop and extend knowledge of methods that create coherence in efforts aimed at traumatised refugees and their families and thus give them better opportunities for participating in work and education and becoming citizens in Danish society. The projects are intended to create a basis for targeted, inter-disciplinary coordination for traumatised refugees in each local authority. The projects are also meant to help strengthen cooperation between language centres all over Denmark and the local partners in job centres, among therapists and in enterprises. To this should be added the further development of the so-called “psycho-education” method with special emphasis on the entire family.

Marginalised children and young people

In January 2008, the Government set up an inter-ministerial working group whose ongoing task is to analyse problems in the integration area and submit proposals to the Government on new initiatives related to employment, education, disadvantaged housing estates and social integration. The working group’s first report will be published at the end of 2008 and will clarify what characterises marginalised children and young people with immigrant backgrounds, and what may explain the marginalisation. The working group will also describe the present efforts to counter marginalisation among these children and young people as well as make recommendations for new government initiatives and a catalogue of ideas for successful initiatives and projects to be used by authorities, institutions, associations and housing organisations.

Integration of children and young people in the education system

To support the learning development of children and young people with immigrant backgrounds, the Government has launched several initiatives aimed at creating better conditions for teaching in schools with many bilingual pupils.

As mentioned in the section on the strategies for supporting disadvantaged children, language screening material for bilingual preschoolers and children/pupils has been developed. The purpose of the material is to identify bilingual children’s need for language stimulation and support in Danish as a second language. The material is for guidance and is available to the local authorities.

The local authorities must offer mandatory language stimulation to bilingual pre-school children if, following an expert assessment, they need such stimulation. The language stimulation covers children from age three to school age. Bilingual school-age pupils must also receive instruction in Danish as a second language if they do not have sufficient knowledge of Danish. Local authorities may refer pupils to another school than the district school if on admittance the pupil is assessed to have a significant need for language support, and the referral is assessed to be required for pedagogic reasons.

Development of second-language teaching methods for fourth to sixth graders has also been launched at five schools in the following subjects: Danish, mathematics, natural and technical science, physics and geography. The development work emphasises language, for which reason other pupils must also be assumed to gain from the work.

IT-based tests in Danish as a second language in fifth and seventh grade will be prepared. The material will – when ready – be available to the local authorities.

Furthermore, the Government finds it important to disseminate knowledge and positive experience from this field. For this reason, a publication on the organisation¹⁷ of teaching of bilingual pupils in primary and lower secondary school has been published. The guide explains the provisions on the teaching of Danish as a second language in primary and lower secondary school and gives inspiration to plan and carry out the teaching.

The Ministry of Education recently concluded an extensive project called *This works at our school* where schools and local authorities participated in the work of identifying good examples showing that bilingual pupils' educational standards have been improved on a broad front, including by adjusting the composition of bilingual pupils in individual schools. A new advisory unit for bilingual pupils in primary and lower secondary school will now disseminate the wealth of experience gained.

In the period from 2008 to 2011, the Ministry of Integration and the Ministry of Education will establish an out-reach advisory unit in primary and lower secondary school (Bilingual Task Force), which is to help ensure that pupils with immigrant backgrounds leave primary and lower secondary school with educational standards sufficient for them to complete a youth education programme. The Bilingual Task Force will be a service for schools with a relatively high share of bilingual pupils.

Moreover, the Government has taken a number of initiatives to improve educational standards in primary and lower secondary schools, which will also benefit bilingual pupils. These measures are meant to make teaching and the pupils' learning more targeted. Schools must include binding grade and end targets for the subjects taught in primary and lower secondary school when assessing what individual pupils have learned from the teaching. Moreover, teachers' teaching and pupils' learning are now better evaluated, including by mandatory national tests and the preparation of pupil plans. The primary and lower secondary school final exams are now mandatory, and funds have been allocated for more lessons in a number of subjects and for supplementary training of teachers and principals. Finally, the local authorities must prepare quality reports, in which weight is given to the initiatives relating to Danish as a second language.

The Ministry of Integration has also launched a campaign, *A need for all young people*, aimed at prompting more young people with immigrant backgrounds to start and complete qualifying vocational training. To strengthen these young people's motivation and learning, the campaign includes role models among the young people themselves and among their parents. Furthermore, the campaign stresses the importance of establishing and operating homework help schemes and of retaining the young people in the vocational training programmes.

Anti-discrimination and prevention of extremism and radicalisation

Two legislative packages on combating terror have already been implemented, which improved police investigation possibilities and civil preparedness as well as tightened penal and deportation rules. The Government has also implemented legislation making it an aggravating circumstance if a crime is committed on the basis of the victim's ethnicity, religion, sexual orientation, legal statements or the like.

Likewise, a wide array of preventively oriented initiatives has been launched, aimed at reinforcing democratic values and promoting equal opportunities, mutual responsibility and open dialogue. This has helped bolster society's and the individual's resistance to extremism. The Government continues, also at international level, the efforts to prevent extremism, realising that extremism is a cross-border problem and that circumstances in other countries influence what happens in Denmark and vice-versa. The strategy involves partnership initiatives and greater diplomatic presence in some of the world's hotspots, including the Middle East and North Africa. Furthermore, a number of Danish local authorities, institutions, organisations, immigrant associations, etc., make various independent efforts to prevent and counter extremist views among young people.

¹⁷ <http://pub.uvm.dk/2007/organisering/>

The Government aims to design an overall strategy for preventing extremist views and radicalisation among young people and to this end, in January 2008, set up a working group of government officials, who have prepared the report *A common and safe future – Proposal for an action plan to prevent extremist views and radicalisation among young people*.

The report includes an analysis of the challenges faced by society as regards extremism and radicalisation among young people, as well as 41 specific proposed initiatives. Several of the initiatives also appear from the Government Platform *Society of Opportunities*. Examples include the strengthening of the cooperation between schools, the social services and the police to make them better equipped for early, coordinated intervention, as well as the strengthening of democracy and citizen education – including in primary and lower secondary school, in Danish courses for adult foreigners and for religious preachers. Other examples are the use of role models, increased dialogue on Denmark's commitment in the Middle East and in other places around the world as well as the relations between the West and the Muslim world. To the above should be added the establishment of a democratic platform for young people with multi-cultural backgrounds and the set-up of a website with debate on democracy and radicalisation.

The report from the government officials has been submitted to broad consultation and debate that may form the basis for the Government to prepare an actual action plan in this area in autumn 2008.

Finally, a new action plan to promote equal treatment and diversity and to combat discrimination must be prepared, and support is given to projects that promote equal treatment and combat discrimination through education and attitude readjustment campaigns.

Honour-related conflicts

Shelters have been established for women who are victims of honour-related violence and for girls who experience severe generation conflicts with their parents. Moreover, a central corps of mediators to help families resolve their conflicts will be established for these young people. Other activities include the set-up of hotlines for young people, parents and professionals, respectively, information material, attitude adjustment campaigns and aftercare for girls.

Special actions for women with immigrant backgrounds and their families

A programme called the *Women's Programme* has been launched, the general purpose of which is to help more women with immigrant backgrounds become active fellow citizens in Danish society. The Government has allocated a total of DKK 55.6m from the rate adjustment pool funds to the programme for the period 2007-2011. The programme comprises 11 specific initiatives to strengthen women's chances of finding work, getting an education and participating in sports and association life. Moreover, the initiatives aim at enhancing women's possibilities of fostering their children's integration and development in the broad sense.

A common feature of the initiatives is how they build on the women's existing resources and in various ways help the women to gain the best basis for enhancing their own and their children's development and integration.

The programme's 11 initiatives will be implemented through a few major projects, which will receive grants from the Ministry of Integration and are solidly embedded in, for example, a local authority, a nationwide association or a housing organisation.

More citizens with immigrant backgrounds in employment

The Ministry of Integration is implementing the diversity programme *A workplace for new Danes* in the period 2006-2011. The programme will compile, develop and disseminate enterprises' positive experience with diversity management, the aim being to help persons with immigrant backgrounds gain employment

and integrate those already in employment. Initially, the Ministry had earmarked some DKK 23m for this purpose, and in 2008 an additional amount of DKK 12m was allocated to the programme.

So far, the diversity programme supports 15 specific projects, the first of which were launched in 2007. The projects have held about 100 workshops and dialogue meetings and visited 1,000 enterprises to inform them about diversity.

A survey on religion in the Danish labour market has been carried out, and three general publications on diversity are in print. A wide array of experience has been gained, including on enterprises' recruitment and employment of citizens with immigrant backgrounds, the use of mentors and religion in the labour market. In 2008, the emphasis has been on workplace culture – including informing citizens with immigrant backgrounds about Danish workplace culture and breaking down labour market barriers. Retaining employees with immigrant backgrounds, upgrading their skills and developing their management potential have also been in focus.

2008 saw the launch of a pilot project *Activate everyone*, aimed at helping disadvantaged unemployed people and citizens with immigrant backgrounds get work. Intensive contact with the unemployed person is to ensure that he or she gets work as quickly as possible.

Furthermore, ethnic consultants in 13 job centres receive support. The consultants are tasked with helping to get citizens with immigrant backgrounds attached to the labour market and ensuring continuous development, documentation and dissemination of experience with the target group.

On 1 January 2007, a nationwide special function for ethnic employment efforts opened. The special function is tasked with advising and guiding all Danish job centres on how to integrate and keep citizens with immigrant backgrounds in the labour market. The special function is to ensure that all employees in the job centres know the legislation on discrimination. One of the special function's action areas is immigrant women who are supported by their husbands. In cooperation with the Ministry of Integration, the special function has compiled knowledge and experience on the efforts aimed at women supported by their families. Against this background, a leaflet for job centre employees will be prepared with a description of the legislation and the practical experience gained in the area, and theme meetings and conferences will be held on discrimination, including gender equality.

The compilation of knowledge on employment among citizens with immigrant backgrounds has also been reinforced by the set-up of a website – jobindsats.dk – which gives an overview of employment indicators and actual targets, including for persons with immigrant backgrounds.

Other employment instruments aimed at immigrant women include the newly opened possibility that local authorities can now – unlike before – offer services to self-supporting women with immigrant backgrounds following a specific assessment. There is ample opportunity for using several services: guidance, skills upgrading, on-the-job training and wage subsidies.

A pool to promote the employment of women with immigrant backgrounds has also been set up. One project under the *Families – focus on work* pool focuses on increasing the women's attachment to the labour market by developing and testing methods and combinations of methods for use with couples receiving social assistance.

Chapter 2 - Pensions

2.1 Strategies for the pension area 2008-2010

Based on the objectives of adequacy, financial sustainability and modernisation, this chapter will explain the Danish strategy in the pension area.

2.1.1 Adequacy in the pension systems

Objectives

The pension system must ensure all citizens a financially secure old age and the financial conditions for continued social integration in society on an equal footing with other population groups.

This objective involves more than a requirement that the pension system secure all older people a basic retirement income. The pension system must also provide pensioners with the possibility of obtaining an income that maintains a reasonable continuity with their years in active employment and prevents steep and undesired changes in their living conditions and thus also the possible negative social consequences such changes can cause. The pension system should also to a wide extent be able to meet individual needs.

To reach these objectives, the pension system should be well-balanced on a number of fronts, which properly combined can ensure a flexible and sustainable pension system: mandatory and optional elements, tax-financed and contribution-financed schemes, fixed and savings-dependent benefits, public and private schemes, group and individual schemes.

Challenges

In its present form, the Danish pension system is assessed to be able to secure present and future pensioners a reasonable standard of living.

With the present rules, future pensioners can look forward to having a share in the general rise in incomes, since public pensions are adjusted on the basis of the increase in annual pay for workers and salaried employees. The adjustment is reduced by up to 0.3 percentage point if the pay increase exceeds 2.0 per cent.

Furthermore, the greater prevalence and expansion of supplementary pension schemes since around 1990 will lead to higher incomes and a higher replacement rate on retirement for the future generations of pensioners and thus ease transition to retired life.

The transition to a more savings-based pension system helps make the pension system financially more robust to the consequences of demographic trends. However, a more savings-based pension system, changes in employment patterns, etc., pose a number of welfare-related challenges.

Persons in risk of insufficient pension savings

The greater importance of savings-based pension schemes engenders a need to focus more attention on whether some groups are failing to save sufficiently for their pension.

Today, only relatively few people have no pension savings and will experience substantial changes in their standard of living on shifting to pension income. This is because basic pensions (old-age pension and Labour Market Supplementary Pension (ATP)) are relatively high and cover basically the entire population, cf. Table 4 and Table 5 below, thus ensuring a high replacement rate for the lower social groups with typically low incomes; cf. Table 6. Furthermore, membership of the collectively organised labour market pension schemes is mandatory, and the unionisation rate is very high in Denmark.

Temporary absence from the labour market, gender-segregated labour market, etc.

The greater importance of savings-based pension schemes also means that temporary absence from the labour market (illness, unemployment, maternity, child-minding) will lead to reduced pension savings and thus to a risk of smaller supplementary pensions than initially desired or planned.

Moreover, differences in men's and women's pay caused by a gender-segregated labour market will have an effect on their income as pensioners. These facts can, for example, pose a special risk to some women in case of divorce.

Actions

Securing reasonable pension for everyone

The Danish pension system basically tries to meet the objectives of (i) basic retirement income; (ii) a reasonable replacement rate; and (iii) solidarity between generations by maintaining and expanding the 3-pillar pension system, where each pillar has its own special function, form of financing, organisation, etc., and where a fair balance between the different pillars is preserved.

The first pillar consists mainly of public old-age pension, which is financed over ordinary taxes, and where the eligibility principle is based on actual time of residence in Denmark. Old-age pension thus secures all citizens a reasonable basic standard of living. Old-age pension is presently an important part of most pensioners' pension income. The basic amount of old-age pension is paid regardless of the amount of any other pension or other income, except for earned income. Old-age pension is adjusted according to the guidelines for adjustment of public pensions mentioned on the previous page. Thus, old-age pensioners get a share of the general welfare development in society.

In combination with a number of supplementary benefits to old-age pensioners (particularly favourable housing benefits, heating benefits, health allowances, reduced tax on owner-occupied housing), most of which depend on objective criteria (income, assets, etc.), old-age pension comes to an amount that secures all old-age pensioners a reasonable minimum standard of living. Furthermore, particularly disadvantaged pensioners may be granted a personal allowance following a specific, individual assessment of their needs.

In addition, pensioners are also entitled to a number of free services, such as home-help services and hospital treatment.

The savings-based ATP pension scheme is generally considered to belong under the first pillar. ATP secures almost the entire population a supplement to old-age pension. ATP is statutory. The contribution is a fixed amount in Danish kroner, which is regularly adjusted when the social partners so agree. The amount of the contribution depends on the scope of employment. For a full-time employee, it is approx. 1% of average pay. The ATP pension is thus independent of a person's income during his or her working years. Maximum ATP pension presently amounts to about 35% of the basic amount of old-age pension.

Almost the entire working population pays mandatory contributions to ATP. For self-employed persons, however, payment is voluntary. Persons temporarily or permanently outside the labour market (claimants of

unemployment benefits, social assistance, sickness benefits, anticipatory pension, etc.) are also covered by the scheme. However, the scheme is voluntary for recipients of anticipatory pension granted before 1 January 2003. Consequently, almost all old-age pensioners will receive supplementary pension from ATP.

The design of the rules relating to old-age pension and ATP means that the two schemes help considerably equalise income among older people. They also help reduce the pension-related consequences of short or long absences from the labour market during the working years.

The second pillar mainly consists of the privately organised labour market pension schemes that secure most pay earners a supplement to old-age pension and a reasonable replacement rate when they enter retirement. Following the increases most recently agreed in the collective agreements, the contribution is typically around 12-17% of earned income. Up to the end of the 1980s, only one third of pay earners were covered by a labour market pension. Presently, the figure is approx. 90% of full-time employees.

The bulk of labour market pensions are contribution-defined, savings-based group schemes that are either based on general collective agreements or agreed in individual enterprises. Labour market pensions are typically mandatory for the individual person, but recipients are getting an increasing say in the combination of benefits.

The third pillar includes various possible individual pension schemes that allow for individual preferences. This task is realised through a variety of offers from insurance companies, banks, etc., within the framework of relatively favourable tax rules.

Supplementary pension benefits

To address the needs of the most disadvantaged old-age pensioners without significant supplementary income, a supplementary pension benefit was introduced in 2003, which has gradually been improved. In 2008, the maximum supplementary pension benefit is DKK 10,000, corresponding to about 8% of old-age pension to a single person (basic amount + pension supplement).

Supplementary pension scheme for recipients of anticipatory pension

As part of the anticipatory pension reform that took effect on 1 January 2003, a special labour-market-like pension scheme for anticipatory pension recipients was established. Anticipatory pension recipients thus have the possibility of earning a supplement to old-age pension (besides ATP pension, by which they also continue to be covered) that resembles a labour market pension.

The labour market supplementary pension scheme for recipients of anticipatory pension (SAP) is a voluntary, statutory and savings-based pension scheme. The SAP contribution amounts to DKK 5,040 in 2008, corresponding to 2.8 per cent of the anticipatory pension for a single person. The contribution is adjusted in the same way as old-age pension. The state pays two thirds of the contribution. This also ensures recipients of anticipatory pension a labour-market-like supplementary pension in addition to old-age pension and ATP.

Incentives to postpone retirement

The greater prevalence of savings-based pension schemes means that individuals can, to a higher degree than before, improve their financial circumstances as pensioners by remaining in the labour market longer (the introduction of rules on deferred pension in 2004 also allows people to increase their old-age pension). This will increase their pension, both because the benefit payment period becomes shorter and because the pension assets saved are increased. On the other hand, pension savings may enable the individual to withdraw earlier from the labour market, but the result may be insufficient pension in the long term.

Consequently, pension, tax and retirement rules should be designed to give clear financial incentives to save up for old age. Similarly, the possibility of withdrawing from the labour market as late as possible should also be offered.

Temporary absence from the labour market

Short or long absences from the labour market reduce savings-based labour market pensions because savings will be suspended for a period. The amount of old-age pension, on the other hand, is independent of income and employment during the working years. The ATP pension depends on the scope of employment, but contributions are typically still paid during periods of temporary absence from the labour market.

Absence from the labour market will thus result in a lower replacement rate on retirement, although the fact that old-age and ATP pensions remain unchanged mitigates the effect. The individual must pay attention to this fact. This applies especially to women who may have long absences connected with maternity and as a result of the family's choices as regards part-time work, etc. The Government has thus taken a number of initiatives to increase citizens' knowledge of and competencies in pension matters. These initiatives are described in more detail below in the section on modernisation.

Gender and pension

The public pension system and the labour market pensions do not distinguish between genders. Women have a high rate of labour market participation and will thus typically be eligible for their own supplementary labour market pension. A gender-segregated labour market means that women typically have lower income and thus somewhat lower pension savings than men.

These differences cannot be removed by changing the pension system. Instead, efforts to remove gender differences in the labour market must be sustained. The Government has taken a number of initiatives, including in cooperation with the social partners. One example is a guide to enterprises on equal pay.

Numerical background

Table 4: Percentage who paid pension contributions in 1995 and 2005 broken down by age and scheme. Sample of 10%.

	ATP		ADM		Privat		I alt	
	1995	2005	1995	2005	1995	2005	1995	2005
<i>Andel, der indbetalte</i>								
25-64 år	76	86	51	63	35	31	83	90
25-29 år	87	91	50	60	26	17	89	92
30-39 år	85	92	58	70	31	28	89	94
40-49 år	81	89	58	70	39	33	87	93
50-59 år	68	83	46	62	46	40	80	89
60-64 år	26	58	15	26	29	28	44	68

Source: From Table 3.1. in "Danskernes indbetalinger til pension" ["The Danes' pension contributions"], Danish National Institute of Social Research, 2008.

	[ATP	Labour-market	Private	Total
<i>Percentage that paid</i>				
Age 25-64				
Age 25-29				
Age 30-39				
Age 40-49				
Age 50-59				
Age 60-64]				

Table 5: Income composition for 70-74-year-old and 80-84-year-old pensioners

	Mænd – 70-74 år	Kvin- der – 70-74 år	M/K – 70-74 år	Mænd – 80-84 år	Kvinder – 80-84 år	M/K – 80-84 år
Antal obs. – alle	26.364	31.334		13.084	22.400	
<i>Andel, der modtager ydelse – alle:</i>	Andel	Andel	Andel	Andel	Andel	
Folkepension	99	99	100	100	100	100
ATP og SP	84	70	120	74	55	135
Tjenestemandspensi- on	15,3	11,5	133	15,8	12,7	124
Arbejdsmakeds- pension/privat- tegnet	36	31	117	27	22	121
Alle supplerende pensioner	89	78	114	80	65	123

Source: From Table 8.1 in “Danskernes pensionsopsparinger” [“*The Danes’ pension savings*”], Danish National Institute of Social Research, 2007.

	[Men - aged 70-74	Women aged 70-74	Men/women aged 70-74	Men aged 80-84	Women aged 80-84	Men/Women aged 80-84
Number observed – total						
<i>Percentage receiving benefits – Total:</i>	Percentage	Percentage	Percentage	Percentage	Percentage	
Old-age pension						
ATP and SP						
Civil service pension						
Labour market pension/ private pension						
All supplementary pensions]						

Table 6: Gross and net replacement rates and average income as a pensioner

	Bruttodækningsgrad		Nettodækningsgrad	
	<i>Gnm.</i>	<i>Median</i>	<i>Gnm.</i>	<i>Median</i>
<i>C-familiestatus</i>				
Par	75	70	80	76
Enlig	92	84	97	90
<i>Køn</i>				
Mænd	73	70	82	79
Kvinder	89	81	91	84
<i>Uddannelsesniveau</i>				
Grundskole	82	77	86	81
Gymn./erhv.	79	74	85	81
Kort	82	75	89	83
Mellemlang	90	84	95	91
Lang	87	81	95	92
Uoplyst	79	76	85	80

Source: From Table 8.3 in “Danskernes pensionsopsparinger” [“*The Danes’ pension savings*”], Danish National Institute of Social Research, 2007.

	[Gross replacement rate		Net replacement rate	
	<i>Average</i>	<i>Median</i>	<i>Average</i>	<i>Median</i>
<i>C-family status</i>				
Couple				
Single				
<i>Gender</i>				
Men				
Women				
<i>Education</i>				
Primary and lower secondary school				
Upper secondary school/business college				
Short				
Medium				
Long				
Not stated]				

2.1.2 Financial sustainability in the pension system

Objectives

Pensions must be seen in the context of a person’s lifespan. Decisions on pensions have consequences far into the future. Consequently, the framework for making pension decisions needs to be stable. Citizens must have confidence that the guarantees and promises given can be kept. For this reason, the financial sustainability of the pension system should not be in doubt.

The financial sustainability of the pension system cannot be assessed independently of other government expenditure and the sustainability of the overall fiscal policy.

The standard of living and the replacement rate ensured by the pension system must be seen in relation to the fact that a number of income-related cash benefits (housing benefits, heating benefits, health allowances, reduced tax on owner-occupied dwellings, etc.) and a large proportion of total government expenditure (health costs and care for the elderly) are targeted at pensioners. Similarly, the long-term fiscal policy requirements must be considered in view of the facts that public pensions are financed on a pay-as-you-go basis and that government assets in the form of deferred income tax payments in the savings-based pension schemes have accumulated.

Challenges

Demographic trends

The combination of the rising mean life expectancy, the historic fall in the number of children and the fact that the large post-war generations are now retiring will cause a significant increase in the demographic ratio of older people (the number of persons older than 64 in relation to the number of working-age people 15-64), as well as an increase in the percentage of people aged 80+ (so-called double aging); cf. Figure 2. With a fairly constant quota of children, this leads to an increase in the demographic dependency ratio (the number of persons younger than 15 or older than 64 in relation to the number of working-age people); cf. Figure 2. This will put government finances under pressure.

Boosting the supply of labour is thus essential. This is the only way to secure the financing of the welfare society in the long term.

The pension system and the decision on retirement

In the light of demographic trends that lead to a rising number of older people and fewer working-age people, the effect of the pension system on the time of retirement becomes decisive for the financing of the welfare society, including of tax-financed public pensions. The pension system should contain incentives that help achieve the political objective of high employment among older people. Pension, tax and retirement rules should be designed to promote later retirement.

Actions

Demographic trends, etc.

During the past decades, the Danish pension system has mainly been expanded by way of private, savings-based pension schemes, which have helped reinforce the long-term sustainability of public finances. Furthermore, old-age pension expenditure is falling because private pension income (pension supplement, etc., is income adjusted) is rising.

Consequently, the pension system has become more robust to demographic trends. The most recent changes in respect of pensionable age, see below, have reinforced this robustness.

“More people in work”

The Danish participation rate is among the highest in the OECD and – as mentioned above – is also somewhat above the common EU target of 70 per cent laid down in the Lisbon strategy. To increase employment further, the Government has taken initiatives in several fields, including better integrating citizens with immigrant backgrounds, getting students through the education system faster, reducing sickness absence, having more older people in the labour market and ensuring a better functioning labour market (as part of the implementation of the political agreement from 2002 on *More people in work*).

Higher pensionable age

The welfare reform, adopted in 2006, means that retirement age will gradually be increased to 67 years and made dependent on life expectancy trends.

Old-age pension age will gradually be increased by two years in the period 2024-2027, and from 2030 old-age pension age will be adjusted on the basis of trends in remaining life expectancy for 60-year-olds. However, the adjustment mechanism is designed so that the Danish Parliament makes its first decision on adjustment in 2015 and then at five-year intervals on the basis of mortality-rate experience in the preceding two years. Old-age pension age will be adjusted if – on the basis of mortality-rate experience (calculated average life expectancy (60 years + remaining life expectancy) for 60-year-olds) – it exceeds a life expectancy of 81.4 years in 2004-2005. The old-age pension age will be adjusted at a notice of 15 years, i.e. the first adjustment can be effected in 2030.

Table 8 shows an estimate of the trends up to the year 2100 in pensionable age (and voluntary early-retirement age) according to the new adjustment mechanism. The increase in pensionable age means that the number of old-age pensioners will be fairly constant from 2020.

According to the current rules, benefits from tax-privileged pension schemes (labour-market pension schemes, etc.) may be paid from the age of 60. The welfare reform increased and indexed this age limit corresponding to (the voluntary early-retirement age and) old-age pension age, i.e. the age limit is increased by six months at a time until age 62 from 2019 to 2022 with effect for persons born on 1 January 1959 or later. The adjustment of the age limit has effect for pension agreements made after 1 May 2007.

Job plan

Many people withdraw from the labour market when in their early sixties, whereas almost eight out of ten are in the labour market at age 59. Among 64-year-olds, this figure is less than every fourth person. In spring 2008, as part of a major job plan, the Government introduced a number of incentives for pensioners to maintain or resume a certain attachment to the labour market, the aim being to increase the labour supply. The job plan also introduces special rewards for persons who remain in the labour market until they reach age 65:

a) Basic allowance

With effect from 1 July 2008, a basic allowance of DKK 30,000 is granted when the income-related supplements to the basic amount of old-age pension (pension supplement, supplementary pension allowance, heating benefits, health allowance) are calculated.

b) Deferred pension

With effect from 1 July 2008, the employment criteria were relaxed for deferring old-age pension in return for a subsequent increase of old-age pension by a certain waiting percentage. The former requirement of annual employment of 1,500 hours for having a waiting percentage calculated was reduced to 1,000 hours.

c) Security for pension

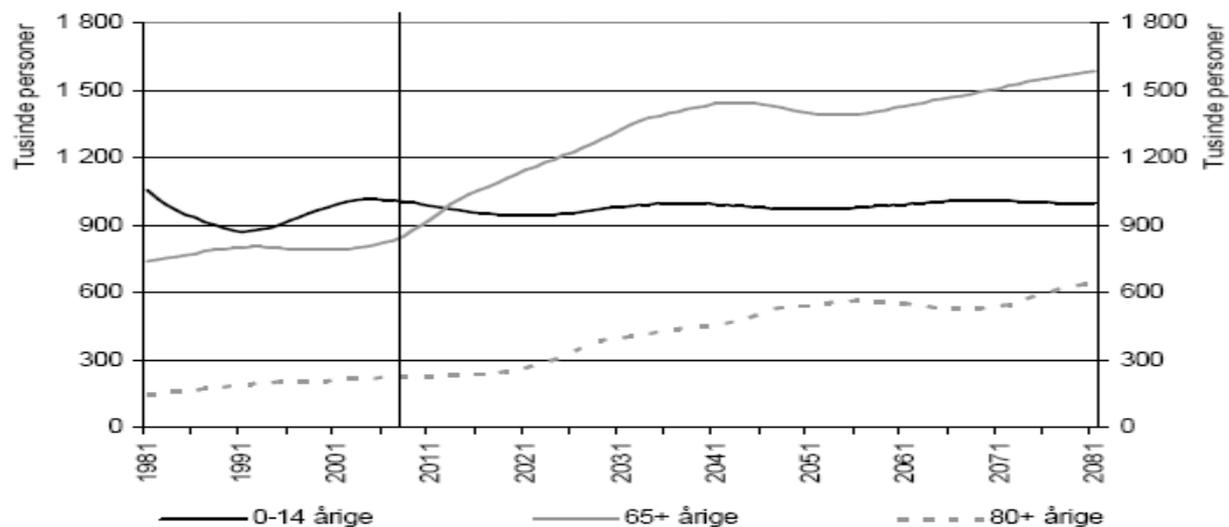
Rules have been adopted to the effect that, as from 1 July 2008, recipients of anticipatory pension who have been granted pension before 1 January 2003 cannot be deprived of their pension regardless of the scope of their employment.

d) Reward scheme

To increase employment among older people, a special tax relief of up to DKK 100,000 has been introduced for 64-year-olds in employment who have worked full time since they were 60. The scheme applies temporarily for the period 2010 to 2016. The tax relief will give individuals greater financial incentive to stay longer in the labour market.

Numerical background

Figure 2: Number of persons under 18 and over 65 and 80, respectively, in 1981-2081

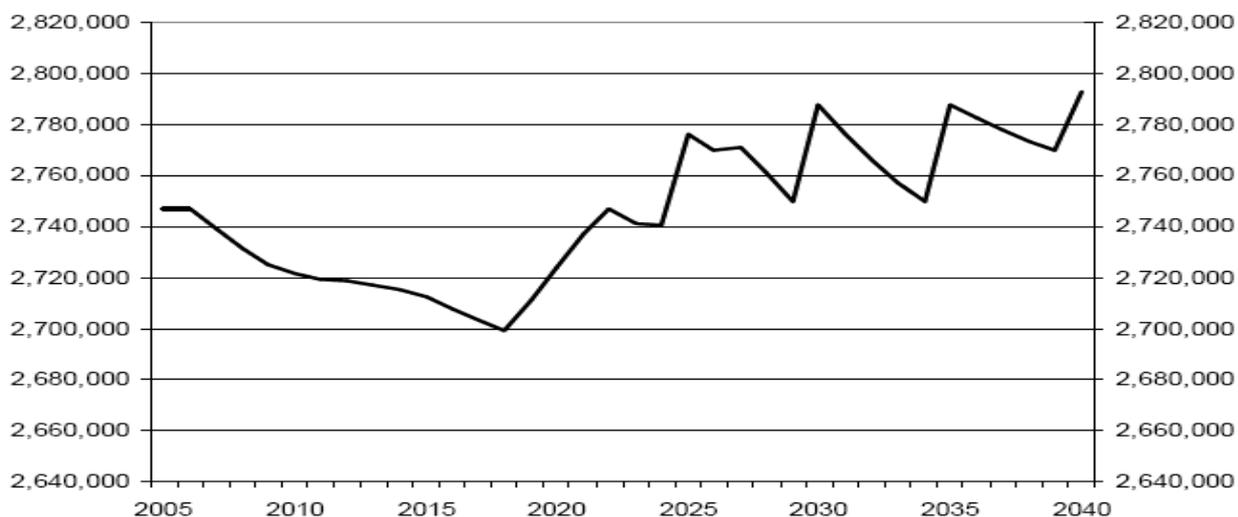


Source: “Langsigtet økonomisk fremskrivning 2007” [“Long-term economic projection 2007”], Dream, December 2007.

[Persons in thousands

0-14-year-olds 65-year-olds and over 80-year-olds and over]

Table 7: Labour force, 2005-2040



Source: “Langsigtet økonomisk fremskrivning 2007” [“Long-term economic projection 2007”], Dream, December 2007.

Comment: It is assumed that the voluntary early-retirement age is adjusted by one year in 2025, 2030 and 2035 and by six months in 2040. The old-age pension age will be similarly adjusted by five years' delay, i.e. starting in 2030.

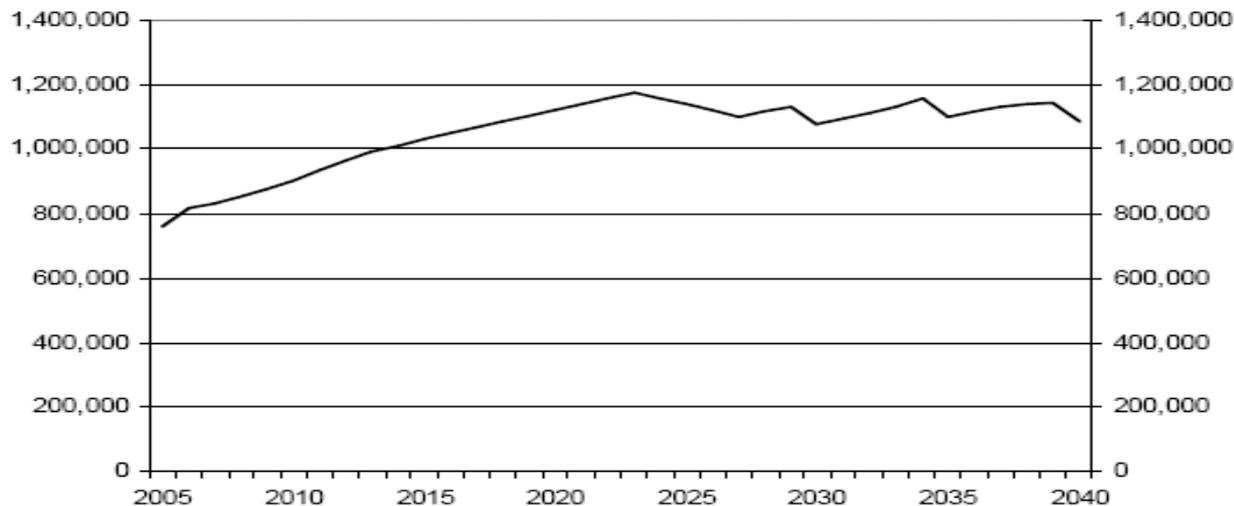
Table 8: Adjustment of the voluntary early-retirement and old-age pension age up to the year 2100

Annonceringsår	År efterlønsalder ændres	År pensionsalder ændres	Størrelse af ændring	Akkumuleret ændring	Efterlønsalder	Pensionsalder
	2019	2024	0.5	0.5	60.5	65.5
	2020	2025	0.5	1.0	61.0	66.0
	2021	2026	0.5	1.5	61.5	66.5
	2022	2027	0.5	2.0	62.0	67.0
2015	2025	2030	1.0	3.0	63.0	68.0
2020	2030	2035	1.0	4.0	64.0	69.0
2025	2035	2040	1.0	5.0	65.0	70.0
2030	2040	2045	0.5	5.5	65.5	70.5
2035	2045	2050	0.5	6.0	66.0	71.0
2040	2050	2055	0.5	6.5	66.5	71.5
2045	2055	2060	0.5	7.0	67.0	72.0
2050	2060	2065	0.5	7.5	67.5	72.5
2055	2065	2070	0.5	8.0	68.0	73.0
2060	2070	2075	0.5	8.5	68.5	73.5
2065	2075	2080	0.5	9.0	69.0	74.0
2070	2080	2085	0.5	9.5	69.5	74.5
2075	2085	2090	0.5	10.0	70.0	75.0
2085	2095	2100	0.5	10.5	70.5	75.5
2090	2100	2105	0.5	11.0	71.0	76.0

Source: “Langsigtet økonomisk fremskrivning 2007” [“Long-term economic projection 2007”], Dream, December 2007.

[Year of announcement	Year voluntary early-retirement age is changed	Year old-age pension age is changed	Change	Accumulated change	Voluntary early-retirement age]	Old-age pension age]
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Figure 3: Number of old-age pensioners, 2004-2040



Source: “Langsigtet økonomisk fremskrivning 2007” [“Long-term economic projection 2007”], Dream, December 2007.

2.1.3 Modernisation of the pension system

Objectives

The pension systems must follow trends in society and in citizens' needs.

This requires a flexible pension system, which must be able to meet a number of often opposing needs. This means that a balance must be struck between various considerations that form a natural part of a modern and flexible pension system. These include a balance between mandatory and optional elements, tax-financed and contribution-financed schemes, fixed and savings-dependent benefits, public and private schemes, group and individual schemes.

A flexible pension system that must be able to meet citizens' diverse needs and also allow for a number of societal considerations will inevitably be complex and thus more difficult for individual citizens to understand fully. Consequently, citizens must be able to obtain sufficient knowledge of their pension and make the right decisions regarding their pension. It is also important for the institutional framework and requirements to the administration, etc., of the pension schemes to inspire confidence in the financial circumstances of these schemes.

Not all social groups have the same opportunities and resources for fully understanding the pension system, and special initiatives aimed at disadvantaged groups and related to men and women, respectively, may thus be needed.

Challenges

Generally, the current pension system provides pension savers with a good framework, including supervision and regulation, geared to raise confidence in the financial system.

Increased need for information about pension

The pension system is complex, and insufficient knowledge of one's own pension may cause individuals to save too little/much for their pension and expose themselves to greater financial risks than they perhaps realise.

For this reason, the Government puts weight on providing information that enables the individual person to get an overview of his or her savings and thus future income as a pensioner. This also gives rise to requirements for greater transparency as regards individual pension schemes, including the possibility of allowing different pension providers' results to be compared, as well as tools allowing the individual to calculate the consequences of different choices.

Greater significance of savings-based pension schemes

In future, a greater share of pensioners' total income will come from private savings-based pension schemes. Consequently, the individual person has also gained greater influence on his or her pensions (placing of pension savings, benefit composition, etc.), but it also places greater demands on the individual's knowledge and decisions about his or her pension.

Actions

Competency as regards pension matters

To increase citizens' competencies regarding pension and their possibilities of fully understanding the consequences of different choices, a public pension portal is being developed, where citizens will get general information on pensions and access to information on their own pension savings.

The public pension portal will also include various calculation functions that will give citizens the possibility of calculating the pension-related consequences of different choices (change of time of retirement, increased pension savings, necessary savings to obtain a given pension, etc.). Pensioners will be able to calculate how accepting paid employment will impact their public pension.

Access to information

The pension companies must annually issue an overview with information about the individual's pension. Moreover, a common database, PensionsInfo, has been set up, which gives individual pension savers access to information from basically all pension suppliers and thus a total overview of their pension savings.

Supervision

The Danish Financial Supervisory Authority has introduced risk-based supervision, which means that the supervisory activities are commensurate with the risk or the detrimental effects of violating the financial legislation.

According to the legislation, the life insurance companies and multi-employer pension funds must have a capital base that corresponds to the highest value of a capital requirement calculated on the basis of the life insurance provisions and an individual solvency need calculated by the company. The former capital requirement is not directly risk-based. The latter capital requirement – the individual solvency need – may be described as the capital base necessary to ensure that policyholders are highly unlikely to suffer losses as a result of the company's insolvency. The individual solvency need is calculated by the companies and depends on the risk profile chosen by the companies. The rules on individual solvency needs were introduced in 2007 and calculated as at end-2007 for the first time. The new rules also mean that the Danish Financial Supervisory Authority can now fix a higher individual solvency requirement if the Authority assesses that the individual solvency need calculated by the company is insufficient. Only the former capital requirement applies to company pension funds.

Besides having a capital base to cover the highest of the above two statutory requirements, the companies must in the so-called traffic-light reports calculate the effect of negative (red light) or very negative market trends (yellow light) (see below).

Scenarios for use of the traffic-light system in risk-based supervision

Red light – is used if even *moderate* changes in the market value of the assets cause solvency problems. Red light is defined as a situation in which share prices are assumed to drop by 12%, interest rates are assumed to change by 0.7 percentage points (upwards or downwards, whichever is worst for the company), raw material prices are assumed to drop by 18%, real property prices are assumed to drop by 8% and losses on currency, credit and counterparts to occur.

Yellow light – is used if *major* changes in the market value of the assets cause solvency problems. Yellow light is defined as a situation in which share prices are assumed to drop by 30%, interest rates are assumed to change by 1 percentage point (upwards or downwards, whichever is worst for the company), raw material prices are assumed to drop by 45%, real property prices are assumed to drop by 12% and losses on currency, credit and counterparts to occur.

Besides the risk-based supervision, investments are subject to rules on investment and diversification applying to various types of assets, which must at any time equal at least the value of insurance provisions. In addition, assets must comply with a number of congruence and localisation rules.

All companies must have “full funding” and the companies must keep a register of assets at a value, which must at any time equal at least the value of total insurance provisions. This ensures pension savings for all members of the scheme, and the Danish Financial Supervisory Authority may also require that the register be deposited.

The requirement for “full funding” is supplemented by statutory provisions governing the conduct of members of the companies’ supervisory and executive boards, one provision being that the conduct of any member may never give reason to assume that the member concerned is failing to perform his or her duties or carry out his or her job appropriately. The companies’ annual reports must be audited by the companies’ external auditors and possibly their internal auditors and be submitted to the Danish Financial Supervisory Authority.

Chapter 3 - National strategies for health and long-term care

3.1 Implementation of strategies for health and long-term care 2006-2008

The following outlines the implementation of the key strategies for health and long-term care as described in the strategy report from 2006.

3.1.1 Health 2006-2008

Patients' rights rank highly on the agenda of the current Government. In addition to ensuring equal and free access for all patients to treatment in public hospitals, the Government has, among other things, improved patients' rights in terms of free choice. As in previous years, all patients treated in the public hospital sector have a free choice between public hospitals. However, from 1 October 2007, the rules for enhanced free choice were changed to allow all patients, who have been waiting for at least one month for treatment in the public hospital sector, to opt to be treated at a private hospital. This scheme ensures all patients as short a waiting time as possible.

The Government has introduced various measures to improve the efficiency and quality of the Danish health sector. In the past years, the Government has injected considerable extra resources into the health sector to maintain marked growth in hospital sector activities. The increased activities resulting from the additional funds – the number of citizens treated in the hospital sector increased by 2.6% from 2005-2007 – have aimed at shortening the waiting lists and strengthening efforts for heart and cancer patients. In addition to massive real growth in the funding for the health sector, the Government has also established a Task Force in the cancer area to develop optimum package pathways for various types of cancer. Several of the pathways are ready, and complete pathways must be developed and implemented for all types of cancer before the end of 2008. This Task Force follows Cancer Plan II, which delivered a number of recommendations for planning and executing cancer treatment in 2005 and which was implemented with mixed success.

Similarly, the Government has created the Danish Institute for Quality and Accreditation in Healthcare to implement and develop the Danish quality model. On 29 May 2008, the board of the Danish Institute for Quality and Accreditation in Healthcare approved the first version of the Danish quality model for the hospitals. The quality model comprises 104 standards for good quality, i.e. accreditation standards. However, due to the conflict in the hospital sector in spring 2008 (outlined below), a decision has been made not to implement the quality standards until 15 August 2009.

The Danish local government reform charged local authorities with handling tasks such as health promotion and prevention. Consequently, as part of the 2007 financial agreement, it was agreed with Local Government Denmark to start committee work aimed at determining how the existing local authority health schemes can best support the local authorities' new tasks in health promotion and prevention. However, the committee was never established, as it was assessed that Local Government Denmark could do this on its own. Since then, the Government has prioritised preventive activities still further, resulting in the establishment of a prevention commission.

In autumn 2008, the Government and the political parties behind the rate adjustment pool scheme will try to find a binding solution to pay and employment issues for assistants hired by the individual citizen under the cash subsidy provisions of the Act on Social Services (sections 95-96). The solution is set to guarantee

assistants pay and employment conditions, including pension, supplementary training, etc. at a level corresponding to that of local-authority care staff.

Country-specific challenges listed in the 2007 Joint Report of the European Council and Commission on social protection and social inclusion

The report listed the following challenges for Denmark in the health area:

- Upholding the current high level for social security and also covering the increasing need for health and welfare services as a consequence of an ageing population;
- Taking the necessary steps to enhance the quality and efficiency of the Danish health sector further, including measures for improved planning and execution of cancer treatment; and
- Implementing more measures to recruit people for the health sector and improve working conditions.

Maintaining a high social security level while covering the aging population's need for health services

It is the basic principle of the Danish health sector that everyone has easy and equal access to treatment. Accordingly, extra economic resources are regularly channelled into the health sector and all patients are granted improved rights to free choice. This has been done to ensure that treatment capacity in Denmark is utilised as efficiently as possible. See the implementation description above for a more elaborate outline of launched initiatives.

Ensuring quality and efficiency, including measures to improve the planning of cancer treatment

As mentioned in the implementation description above, packages for treating various types of cancer have been developed. The packages are standardised pathways for fact-finding and treatment without unnecessary waiting time. The standards for the pathways are based on shared, national clinical guidelines and apply throughout Denmark. Similarly, a website has been developed for the purpose of continuously monitoring the quality of treatment at hospital level and for a number of diseases. According to analyses made by the OECD, Denmark ranks highly in Europe in terms of hospital treatment efficiency. To maintain this high level, constant productivity improvement demands are placed on the hospital sector. Most recently, the demand has been fixed at 2% from 2008-2009, corresponding to the average productivity growth in the hospital sector in the past three years.

Measures to recruit people into the health sector and improve working conditions

As part of the quality reform, the Government, Local Government Denmark and Danish Regions concluded three-party agreements in summer 2007 with the Danish Confederation of Trade Unions, Danish Confederation of Professional Associations and the Danish Salaried Employees' and Civil Servants' Confederation on approx. 50 initiatives to ensure attractive public workplaces, development of employee competencies and better management in public institutions. Accordingly, from 2008-2011 more than DKK 6bn has been earmarked to ensure more attractive workplaces, skills development and management in the public sector.

Moreover, the Government has started debureaucratisation efforts to ensure that staff in the hospital sector spend most of their working time dealing with core activities, i.e. treating patients. This is also assessed to contribute to increased job satisfaction and thus staff retention.

3.1.2 Long-term care 2006-2008

In connection with the 2006 Finance Bill agreement, funds were earmarked for improved and more flexible home-help services. For this purpose, an application pool of DKK 441.2m was established in 2006. The local authorities could apply for the pool funds under the following themes: 1) *Increased activity*; the home-help services must be improved by targeting funds to ensure more time with the individual older person, 2) *Digitalisation*; to free up resources and create more time to care for the individual older person, while increasing flexibility and continuity in home-help services and 3) *Increased free choice and flexibility*; to increase the quality and efficiency of home-help services.

At the same time, DKK 300m has been earmarked to meet the drain on services. The local authorities have been granted the money as a general block grant increase from 2007 to meet the drain on services for older persons as a consequence of the demographic development.

2005 saw the launch of the project *Quality in the care of older people*. Via research, method development and communication, the project has focused on personal and practical assistance for older people in their homes and close-care accommodation. Two studies on care for older people have looked into what constitutes good quality care for the elderly, care staff and assessment workers. The first study, *Concepts on quality in the care of older people – quality themes, roles and relations*, elucidates the priorities of those affected by the care of older people. At the same time, the report identifies barriers and mutual expectations in the area. The other study, *Good quality in the care of older people, priorities of older people, care staff and assessment workers*, highlights the quality expectations of older people, care staff and assessment workers. The project will be completed in 2008.

The Government wants to extend and develop free choice via specific initiatives to include areas beyond those mentioned in the 2006 strategy report, including free choice of aids and dwelling layout, access to more food service providers and free choice of rehabilitation and physical maintenance training. The Government programme from 2007 stipulates that an interdisciplinary study must be made to determine user satisfaction with free choice, the application of free choice and any remaining barriers to using free choice, including in the old-age care area and specifically in terms of free choice across local authorities.

The 2007 Government programme states that the Government wants the individual local authority to be able to issue a “service certificate” to citizens eligible for personal or practical home help. The citizens can use the service certificate to hire their own assistant to perform the tasks for which they have been deemed eligible.

3.2.1 Strategies for health 2008 - 2010

3.2.1.1 Equal access to treatment for all

Objectives

It is the basic principle of the Danish health sector that everyone has easy and equal access to treatment.

The Danish health sector is therefore mainly publicly financed. All citizens in need of treatment are thus entitled to free and equal access to examination, diagnosis, treatment, maternity care, rehabilitation, health care, prevention and health promotion services and hospitals and doctors in private practice regardless of background, financial capability and age.

As mentioned before, this should also include the extended free choice of hospital where citizens may now choose to be treated at a private hospital if the public hospital cannot provide treatment within one month.

Another objective is to extend the free-choice scheme agreed for children and youth psychiatry in cases of waiting times exceeding two months to cover all psychiatric patients from 2010. The phase-in will depend on how fast the necessary capacity can be established.

Challenges

In spring 2008, massive strikes among health staff in the hospital sector hit the Danish health sector. Consequently, we are facing a considerable short-term challenge vis-à-vis reducing the greater waiting times for treatment triggered by the conflict. The Government and the regions therefore agree to take targeted action effort to reduce waiting times in an economically viable manner. In addition to overcoming the ensuing backlog, we also face the challenge of ensuring that those most in need of treatment receive treatment first.

Moreover, Denmark is becoming increasingly aware of and concerned about the existing social inequality in health. Political agreement has thus been reached to counter the fact that in terms of resources the most disadvantaged groups – as mentioned in Chapter 2 – generally have poorer health and fewer healthy years to live than the rest of the population. Emphasis is therefore placed on improving life-style habits, prevention, etc.

Actions

Establishment of a prevention commission

In February 2008, the Government established a prevention commission, which must submit a work report by the beginning of 2009. Subsequently, the Government intends to cooperate with the regions and local authorities to prepare and launch a national action plan with clear objectives for the prevention effort.

The prevention commission is tasked with making documented and cost-effective proposals to strengthen the preventive effort, e.g., by focusing special attention on less resourceful groups. More specifically, the prevention commission is to make proposals for how to target lifestyle diseases caused by smoking, diet, alcohol, lack of exercise, etc.

Temporary suspension of extended free choice

As a consequence of the conflict in the health sector described above, the Government and the regions have agreed to suspend the rule on extended free choice temporarily. The objective is to eliminate the waiting time backlog caused by the conflict in an economically expedient manner that makes optimal use of the overall treatment capacity, whether private or public. The parties therefore agree that the patients who are most ill and have waited the longest should come first. Under the agreement, the regions are obliged to purchase free treatment capacity at private hospitals and clinics. The suspension is intended to last until 30 June 2009. Subsequently, the extended free-choice scheme will continue as intended.

Better information about the rules on free choice

The Government will give general practitioners a duty and support to guide patients in their options in the hospital sector when referring them to treatment at a hospital. This will especially benefit disadvantaged patients and generally contribute to faster treatment. The regional patient offices must actively and proactively inform and guide general practitioners about the rules of free choice and extended free choice of hospital and the options in the regional hospital sector.

Establishment of the patient ombudsman institution

A new central-government patient complaints system will be established. From that time complaints in the health sector are only to be submitted to the patient ombudsman institution. The access to complain is extended to comprise patient rights such as information, free choice, etc. Similarly, the patient ombudsman must also look for any systematic pattern of complaints with a view to investigating whether some areas in the health sector receive more complaints than others.

DKK 1.6bn extra for the hospitals

The 2009 financial agreement between the regions and the Government includes a real boost for the health sector of DKK 1.6bn for improved medicine and treatment at the hospitals. Together with an expected productivity increase of 2%, this boost will result in an expected activity increase of approx. 3.5% in 2009. Activity must keep increasing to ensure short waiting times and thus swift treatment for all.

Enhanced access to general practitioners

The Government's goal is that, from spring 2009, all patients must have free choice of general practitioner regardless of geographical distance, which will enable a person to choose a GP close to his or her workplace, for example. However, the GP is under no obligation to make house calls if the distance exceeds the current limit of 5 km in Copenhagen and 15 km in the rest of the country.

3.2.1.2 Quality of treatment

Objectives

Ensuring high quality patient treatment in the Danish health sector is highly prioritised. This means that high clinical quality must be ensured in treatment and that patients must have a sense of getting high treatment quality. As a means of improving the way patients experience hospitalisation, a goal has been set stating that an inpatient or long-term outpatient must have one permanent contact in connection with treatment. The contact person scheme must be adapted to individual patient needs for information, guidance, etc.

Moreover, all inpatients should be offered a bed in a private ward if the patient desires and it is deemed relevant. This vision must be fulfilled as it becomes possible through rebuilding and renovation of the hospitals.

Similarly, the Government aims at continuously improving clinical quality. This can be done by developing and implementing quality standards that ensure uniform and high treatment quality at different hospitals.

Emergency treatment must be ensured for selected categories of illness. As a first partial initiative, prompt and emergency treatment must be commenced if cancer is suspected. Emergency treatment must also be ensured for heart patients.

Finally, patients' and relatives' access to comparable data about the quality of treatment at various hospitals must be improved.

Challenges

In the short run, the conflict in the Danish health sector in spring 2008 is expected to impact on aspects of treatment quality. The longer waiting lists and waiting times ensuing from the conflict mean that accreditation under the Danish quality model has been postponed for one year and will not start until 2009. This is because the Danish health sector's primary objective is currently to reduce waiting lists.

In the long run, ensuring a continued influx to the care profession to combat the shortage of nurses constitutes a challenge. It is important for the way patients experience treatment quality that they receive satisfactory care during hospitalisation, etc. Denmark is currently starting to experience a labour shortage – even in the care sector – which places demands on, e.g., work organisation and the development of resource-saving working methods in Danish hospitals.

Actions

Introduction of pathways for cancer treatment

Optimum pathways for individual types of cancer will be introduced gradually to comprise all cancer types by the end of 2008. This effort is anchored in the Task Force in the cancer area. The structure of the pathways is based on clinical descriptions prepared by working groups in which relevant interdisciplinary cancer groups and the regions participate. The objective is to offer patients a swift and efficient examination and treatment process that has a high professional standard and which patients experience as coherent.

The introduction of pathways must be supported by consolidating several treatment offers into fewer units to ensure quality and the professional standards, utilising the advantages of specialisation and ensuring optimum application of resources. The regions are charged with launching the pathways in accordance with the general framework.

Development of quality standards and accreditation of hospitals

The Government has taken the initiative to develop a central accreditation scheme, the Danish Quality Model, under which all public hospitals and ultimately even local authorities and general practitioners must observe standards established by an independent accreditation institute. The overall objective of setting common quality standards is to ensure uniform quality in all services provided by the health sector and increased transparency in Danish health sector services. Accreditation is expected to start in 2009.

Investments in a modern hospital structure

A total of DKK 25bn has been allocated over a period of 10 years to a quality fund for investments in a modern hospital structure. This money must be used to converge highly specialised treatment and reception of emergency patients at fewer units. This will improve the quality of treatment and ensure better use of apparatus. A panel of experts consisting of internationally recognised experts has been established to assess specific, major construction projects in relation to the principles for investments in the hospital structure of the future on which the Government and Danish regions has reached agreement. The funds of the Quality Fund will be awarded to projects that ensure the best investment. In connection with investing the funds, the Government emphasises that the specific investment projects generally ensure a modern and rational hospital structure in Denmark.

Development of the website sundhedskvalitet.dk

The Government finds it essential that citizens have easy access to information about treatment in the health sector. Consequently, the Government has taken the initiative to develop the website www.sundhedskvalitet.dk. The website should thus be extended to comprise even more treatment offers, and its usability must be improved. The website aims at giving patients and relatives easy access to comparable information regarding treatment quality at individual hospitals. The website provides information about waiting times, hygiene, etc. that is primarily intended to support the patients' free choice of hospital.

3.2.1.3 Financial sustainability in the health sector

Objectives

The health sector accounts for a considerable share of total public expenses in Denmark. It is paramount to maintain a policy that is generally economically viable. However, there is consensus in Denmark that citizen health should rank highly on the agenda. Accordingly, no compromise should be made on treatment quality in the health sector, a conviction underpinned by the fact that in the last economic negotiations between the Government and the regions, the health sector received a DKK 1.6bn boost to improve medicine and treatment at the hospitals.

However, this does not preclude any demands for efficiency and productivity in the health sector. It is therefore also an objective to have up-to-date and reliable documentation about health sector activities. At the same time, hospital staff must spend as much time as possible on actual treatment and care and unnecessary documentation requirements must be avoided.

Challenges

The health sector faces a central challenge in retaining its ability to attract sufficient and qualified labour. It is therefore important to aim efforts at ensuring efficient work organisation and giving staff working directly with patients in the health sector the maximum time possible to do core activities. Identifying and eliminating any unnecessary registrations, needless bureaucracy and double registrations therefore constitute a challenge.

Other challenges comprise ensuring optimum monitoring of activities, productivity, etc. in the health sector and that the quality of central indicators in the health sector is good.

Actions

Comparisons within the hospital sector

Every five years – starting in 2008/2009 – the Government will compare conditions in the hospital sector with conditions in our neighbouring countries, thus continually striving to make the hospital sector among the leading in the world. The coming massive investments in a modern hospital structure make an international comparison of the hospital sector relevant. This comparison is to document the areas in which Denmark is doing well on an international scale, and the areas where improvements are needed.

Debureaucratisation and better documentation in the regional health sector

The Government has started debureaucratising and enhancing documentation in the hospital sector. The objective is to ensure reliable and timely documentation of the health sector's activities and to find as much time as possible for those working directly with patients to do their core activities. Reviewing the documentation should help prioritise the documentation activities in the Danish health sector and ensure that reliable and timely data are retrieved for the key areas. The review should involve recommendations for reliable and timely health statistics in central areas such as waiting time, free choice, etc.

Similarly, this work should endeavour to free up more time for staff working directly with patients. This should be realised by making work organisation more flexible and releasing the staff from documentation assignments, etc., that may be considered less relevant or outright irrelevant.

Good experiences must be spread faster

Many hospitals develop new and better solutions. As part of the quality reform, the Government and Danish Regions intend to support a more systematic exchange of experience in a quality network. A specific plan must be prepared for disseminating better and more efficient treatment procedures so that patients throughout Denmark are given optimum treatment. Danish Regions has started this work and the Government is continuously publishing productivity and quality information that may contribute to knowledge-sharing between the hospitals.

Productivity measurements of the hospital sector

Together with Danish Regions and the regions, the Government publishes annual measurements of productivity in the health sector. The third systematic and publicly available productivity measurement of the hospital sector was published at the end of 2007. This work helps identify hospitals that organise work very efficiently. Improved work organisation can be used as a means of countering the incipient shortage of labour in the health sector.

Systematic productivity measurements of the hospital sector at regional, hospital, ward and treatment level must be published.

3.2.2 Long-term care

3.2.2.1 Quality of long-term care

Objectives

Local authorities and regions are in charge of most of the services close to the citizens, and local self-government provides the foundation of the Danish welfare society, which is largely carried by proximity and strong local commitment. Greater freedom to perform tasks locally must be closely followed by clear targets and responsibility for results. Consequently, the distribution of responsibilities between the Government, local authorities, regions and institutions must be clear.

The local council of the individual local authority is obligated to provide personal and practical assistance and to determine the level of assistance in the local authority (the service level). Similarly, the local authority determines who is entitled to assistance either in the form of home help or as a cash subsidy to hire assistants. The offer of personal and practical assistance must help alleviate the most severe consequences of a person's reduced mental or physical functional capacity. The local authority decision must be based on an overall assessment of the citizen and must relate to the specific needs of the individual person.

Specific and individual assessment of needs and continuity in the care provided are prerequisites for quality in the care sector. A sense of coherence in the assistance provided ensures security in the everyday life of the individual citizen in need of care.

Finally, in order to maintain high quality in the care provided, managers and staff have to be offered optimum training and the best framework in the form of modernised public institutions, etc.

Challenges

A central challenge for Denmark and the other European countries is that the group of older people and other citizens with reduced functional capacity who may need practical assistance and care is growing, while the number of citizens of working age capable of providing this assistance is falling. At the same time, the

citizens of a welfare society like the Danish expect to receive high-quality services such as home help. In this respect, it is important to create the conditions for meeting this challenge.

In future, more older people are expected to live a healthy and active life. Improved diet and more exercise can prevent some of the lifestyle diseases that threaten to impair life for the individual and result in a need for personal and practical assistance.

Actions

A number of reforms have been implemented to ensure the welfare and cohesion of society in the 21st century.

The local government reform, which entered into force on 1 January 2007, established 98 new large local authorities and five regions, which have the health sector as their main task. The reform has laid down the framework for strengthening local self-government further.

In the agreement on the local authorities' economy for 2009, the Government and the local authorities have agreed on a number of principles for good decentralised management. The principles underline the right and duty of the local councils to take responsibility for determining and prioritising the service level of the local authorities, making frameworks and clear targets for local-authority institutions and suppliers and documenting and ensuring the quality of task management.

An initiative has been taken for a quality reform of the public sector. This reform is to ensure continued renewal and development of quality in the public sector and help strengthen conditions for people in need of care and people employed in the care sector. The quality reform comprises the following:

Attractive jobs: A key element in the quality reform is to ensure attractive jobs, a better framework for recruitment and retention of staff, good management and development of staff competencies. The tripartite agreements concluded in summer 2007 between the parties in the public labour market includes approx. 50 initiatives to this effect.

Reduction in the number of assistants in the home and permanent contact person: In connection with the financial agreement for 2009, the local authorities have expressed their intention to work on reducing the number of different assistants visiting the individual citizen. Moreover, the government will present a bill to the effect that recipients of home-help services will be entitled to one permanent contact person who must be close to the citizen.

Up-to-date buildings, facilities and technology: As part of the quality strategy, a quality fund is being established, some funds of which will be given to improve the physical framework and introduce new technology, including in the care sector. The money in the quality fund will be distributed among the local authorities. One initiative is to give special focus to labour-saving technology in the social and health area, including old age care.

Better learning among local authorities and sectors: Attempts should be made to develop and test a system where care staff, residents and relatives can report errors and unintended incidents in the care sector, thus creating better learning possibilities across local authorities and sectors.

Accreditation: In 2009, attempts will be made in the care home/assisted living accommodation area to develop and test an accreditation model that systematically supports the staff's work with quality development through ongoing learning and offers the opportunity to use experts as sounding boards. Over time, the principles of the model are expected to be disseminated to other parts of the social area.

Flexible rules on care for close relatives with disabilities or serious diseases: In 2008, the Government will present a bill for a more flexible care scheme, meaning, for instance, that more people can share the scheme,

that the care scheme can be divided into shorter periods and that, in special cases, the care scheme can be extended beyond the current six months.

Reporting unintended incidents: Attempts should be made to develop and test a system where care staff, residents and relatives can report errors and unintended incidents in the care sector, thus creating better learning possibilities across local authorities and sectors. The attempts must be evaluated.

Quality contracts: With effect from 2010, quality contracts will replace the present local authority service strategies. Quality contracts are the local council's contract with the citizen and must include clear and measurable objectives for each of the local authority service areas. The aim is for citizens to get clear information about the service level they can expect in individual local authority service areas.

Family counsellor: A bill must be presented that provides families with disabled children a right to a family counsellor who will provide information and guidance on the possibilities of getting help across sectors.

Increased free choice of aids and dwelling layout: The Government intends to extend free choice in the aid area so that citizens whom the local authority has deemed eligible for personal aids or support for disability-friendly dwelling layouts are given the opportunity to choose other personal aids and an interior design provider other than the one offered by the local authority.

3.2.2.2 Access for everyone to suitable care offers

Objectives

The overall political objective of welfare in Denmark is that everyone is ensured equal access to care regardless of gender, age, social connections and ethnicity. The welfare society must take care of the weakest, while also supporting personal responsibility and commitment. The objective of the policy for long-term care is to ease everyday life, improve quality of life and enhance the individual persons possibilities of managing on his or her own. Long-term care encompasses several target groups: Older people requiring care and disabled people, who due to considerably reduced functional capacity often have a need for long-term care.

The policy for long-term care is based on continuity, use of the users' own resources, self-determination, influence on one's own conditions and a choice of options. Danish disability policy is also based on the disability-political principles of equal treatment, compensation and sector responsibility.

User involvement is considered a key principle. The principle of user involvement was incorporated systematically in the Act on Legal Protection and Administration in Social Matters and the Act on Social Services in connection with the social legislation reform of 1998. For instance, the Act on Social Services establishes that assistance must be planned according to the individual citizen's needs and conditions and in cooperation with the individual citizen. This ensures that the various needs for long-term care that older people and someone like a young physically disabled person may have are taken into account. The Act on Legal Protection and Administration in Social Matters embodies the principle that casework must allow for citizens to be included in the processing of their cases and that casework must allow for this.

Challenges

International comparisons (e.g., the OECD's economic survey 2008) indicate that Denmark has a very broad access to public social services, including personal and practical assistance. However, eliminating long waiting times and offering dwellings in social housing or a care home place for older people who depend on others' help all day currently constitute a challenge. The future challenges will mostly consist of ensuring the economic viability of the care sector without it affecting the quality of care and the groups who need the

help. (See more below about the future welfare challenges, including recruitment of labour and the demographic development).

Actions

Care-home guarantee

A care-home guarantee has been introduced with effect from 1 January 2009, under which older people with special needs for a dwelling in social housing or a care-home place must receive an offer of such accommodation at least two months after being accepted on the waiting list.

Prevention

Although everyone must have equal access to care if the need arises, it is also important to start preventive efforts before the need for care arises. As mentioned above, the Government has set up a prevention commission with a view to launching a national action plan for prevention that sets down clear targets for the activities. This work will include the individual's personal responsibility for his or her own health. The objective is for as many people as possible to have good conditions for a healthy, well-functioning and high-quality life. This will also help postpone the need for public assistance. Improved health may postpone reduced functional capacity and result in more good years, thus saving society expenses for treatment and care.

Information about the possibilities of free choice

If a person needs practical and personal assistance (home help) due to reduced functional capacity, he or she is entitled to choose between various home help providers. Usually, home help users can choose between a public home help provider and one or more private home help firms. Importance is attached to ensuring that citizens know their rights, including their options in terms of free choice of provider of personal and practical assistance. Many care recipients use their free choice options; however, some are still unaware of these options. Therefore, the necessary information must be available to all citizens in need of practical and personal assistance, and it must be easy for individual citizens to receive and retrieve information.

People with a comprehensive and permanent need for help due to reduced physical or mental functional capacity can obtain a cash subsidy to hire their own assistants in the form of citizen-managed personal assistance. The rules in this area have recently been changed to increase self-determination and flexibility in the schemes. Both citizens and caseworkers must have the necessary knowledge about the new options.

Citizen-managed personal assistance

The Government has introduced new legislation about citizen-managed personal assistance for citizens in need of comprehensive assistance and wanting a more independent life. The new rules stipulate that the citizen's desires and needs take priority. The rules allow the citizen to transfer the subsidy for hiring assistants to an association, a company or a close relative, who will be in charge of hiring the necessary assistants.

Moreover, the Government will also try to win support to improve pay and employment conditions for assistants hired under these schemes.

Dissemination of knowledge about care

Comparable user satisfaction surveys in the area for older and disabled people must be conducted to support local quality development. Comparability will enable institutions that do a particularly good job to be

identified. In addition, the database *Good Social Practice* has been created to collect the best examples of good practice in the local authorities. More attention must be directed at disabled people under *Good Social Practice* to improve local-authority access to information and inspiration about development in the efforts in the area.

Inclusion of relatives

The Government and the local authorities agree to focus on the positive resource network that relatives represent for older and disabled people. The local councils must therefore be aware of including the relatives and other relevant persons with a view to allowing them to assume responsibility.

3.2.2.3 Financial sustainability in the care sector

Objectives

Economic responsibility is a prerequisite for stable development in the Danish economy, which offers a secure framework for citizens. This is a must for sustainable development in wealth and welfare and for Denmark to keep its position as a society with a minimal social divide and strong cohesion. The systems for long-term care must thus be made financially sustainable; however, this should not be done at the expense of the quality of care and the groups in real need of assistance.

Challenges

The Danish welfare society is facing a central challenge of providing sufficient labour to solve the important welfare tasks and ensure continued good growth conditions. At the same time, fiscal policy needs to be adjusted to take into account that the increasing number of older people versus the decreasing number of people in the most active age groups. If the care sector is to remain financially sustainable, it will be necessary to develop resource-saving working methods, create further knowledge about the most efficient methods and exchange the relevant knowledge in this area.

Actions

The Government and the local authorities have discussed the recruitment challenge and the possibilities of releasing resources, including reducing expenses for administration, streamlining procurement, reducing absence due to sickness, using new technology and improving work organisation. The parties agree to prioritise the efforts and exploit the potential for releasing resources for service close to citizens. The local authorities must use the ensuing economic manoeuvrability to ensure service for citizens.

At the same time, the above-mentioned “Job plan” has created a basis for reducing sickness absence among public-sector employees and for keeping older people in the labour market. A project to debureaucratise the employment area has also been launched.

Debureaucratism programme

The purpose of the efforts to debureaucratise the public sector is to simplify and improve casework, thus maximising the time available to provide high-quality service to citizens by minimising time spent on administration. Moreover, the debureaucratism efforts must also identify rules that limit the organisation of local authority task management.

In some areas, realising the potential will require active cooperation between the Government and the local authorities. The Government and the local authorities will therefore prepare specific proposals for central government initiatives that can help release resources in the local authorities. The initiatives must comprise the use of IT for digitalised solutions in administration, simplification of central government rules and

process requirements for the local authorities and application of new technology to ease tasks related to services close to citizens, etc.

Better documentation and professional quality information

An initiative to establish common indicators has commenced with a view to documenting the local authorities efforts. The documentation projects should be viewed in conjunction with the debureaucratisation efforts. Simplifications can be implemented when documentation is available for new and improved activity in an area.

Furthermore, methods for retrieving professional quality information for measuring and comparing professional quality must be developed. This gives managers and staff in areas like the old age care sector a foundation for working with the quality of core services, while the individual local councils and administrations can prioritise the activities. In relation to disabled people, the challenge is to support efforts to obtain better documentation in the area while developing digitalised solutions for casework.

Annex 1 Objectives of the open method of coordination

Overall objectives of social protection and social inclusion

- a) social cohesion, gender equality between men and women and equal opportunities for all through suitable, accessible, financially sustainable, flexible and effective social security schemes and policies on social inclusion;
- b) effective interplay between the Lisbon goals on stronger economic growth, more and better jobs as well as improved social cohesion and the EU strategy for sustainable development; and
- c) good administrative practice, transparency and player involvement in the design, execution and monitoring of policies.

Objectives of the fight against poverty and social exclusion

- d) access for everyone to the resources, rights and social offers that are a condition for participating in society, preventing and fighting exclusion and fighting all types of discrimination leading to exclusion;
- e) active social integration of everyone, by both promoting labour market participation and fighting poverty and exclusion; and
- f) efficient coordination of policies on social inclusion and involvement of all administrative levels and relevant players, including poverty-stricken people. Moreover, policies need to be effective and form part of all relevant public policies, including policies on the economy and budgets, general and vocational training and education as well as structural fund programmes (e.g. the European Social Fund).

Objectives of adequate and sustainable pensions

- g) reasonable pension income for everyone and access to pensions that allow people to maintain their standards of living to a reasonable extent after retiring from the labour market; this is to foster solidarity and fairness between and within generations;
- h) financial sustainability in public and private pension schemes in consideration of the pressure on government finances and the ageing of the population and in conjunction with the three-pronged strategy for addressing the problem with the budget consequences of ageing, which includes promoting a longer working life and active ageing, establishing a balance between contributions and benefits in an expedient and socially fair manner and promoting payable and secure funded private pension schemes; and
- i) transparent pension schemes that are adjusted to meet the needs and expectations of men and women, that meet the requirements of modern society and are adjusted to demographic ageing and

structural changes. In addition, people must receive the information necessary to plan their retirement from the labour market, and reforms must be implemented on the basis of the widest possible agreement.

Objectives of health and long-term care

- j) access for everyone to suitable health and long-term care, the need for care may not lead to poverty and financial dependence and elimination of inequalities as regards access to care and health;
- k) quality of health and long-term care and adjustment of care, including preventive care, to the needs and preferences of society and private individuals, e.g. by establishing quality standards that reflect optimum international practice and by allocating more responsibility to employees in the health sector, patients and recipients of care; and
- l) suitable high-quality health and long-term care that remains affordable and financially sustainable through the promotion of rational resource utilisation, e.g. with appropriate incentives for users and providers, good administrative practice and coordination between care systems and public and private institutions. Long-term sustainability and quality depend on health and an active life style as well as well-qualified staff in the care sector.

Annex 2 Challenges for Denmark (Joint Report of the European Council and Commission on Social Protection and Social Inclusion 2007)

- Upholding the current high level for social security and also covering the increasing need for health and welfare services as a consequence of an ageing population;
- Developing labour market tools aimed at improving citizen with immigrant backgrounds' integration into the labour market;
- Ensuring that more older employees and disabled people can remain on the labour market;
- Taking the necessary steps to enhance the quality and efficiency of the Danish health sector further, including measures for improved planning and execution of cancer treatment; and
- Implementing more measures to recruit people for the health sector and improve working conditions.

Annex 3 Good practice

Support for disadvantaged children and young people

The Focus on the Family project has been selected because the project was precisely designed and well-monitored and because useful documentation now exists that the initiatives work.

The project was also singled out due to its parallel method development, which on the basis of observations, qualitative interviews, pooling of experience and effect measurement using statistical tools ensures that the experience can be used on a wide scale.

Title of initiative	Member state
Evaluation of the project Focus on the Family	Denmark
Final objective of initiative	
<p>Request for an evaluation design with a view to documenting and evaluating process, methods and results. Moreover, a design was desired that would make evaluation an integral part of the method development and a continuous tool used in practice. The evaluation must be able to:</p> <ul style="list-style-type: none"> • present documentation on method application and development • present documentation of results • measure short and long-term effects of the initiative • link knowledge about methods applied to results and effect • form part of the daily learning and method development of practitioners • create a foundation for maintaining the overall objectives and improving the project on an ongoing basis 	
Summary of overall results	
<p>Upon the first year's evaluation, the following positive experience with the evaluation design was gained:</p> <p>Employees and managers adopted the evaluation, participated actively in the process and considered it an important element in the day-to-day project. This is seen, for instance, when the employees are to present the project externally. During the presentation, they point out that the evaluation is part of practice and that they regard it as a "gift". Furthermore, the employees come up with ideas for more evaluation. This means that the evaluation becomes an integral part of practice and that the employees become increasingly aware of personally evaluating their work on an ongoing.</p> <p>The evaluation is used actively in method development, and the results are continually put into practice. Feedback from the evaluation is used, for instance, to change practice as a basis for choosing methods. The evaluation is also used as a basis for exchanging knowledge and experience between employees. This helps create a common reflection and understanding among employees, and they gain insight into users' requests and can adjust practice accordingly. Finally, the evaluation helps create a clearer definition of the project framework and goals. The aim of the evaluation to form part of the ongoing learning, method development and project management has thus been achieved.</p> <p>The design produces very broad and varied knowledge about project methods and results. The disadvantage is that it produces a large amount of data to be processed and compared, though it</p>	

also provides better insight into and more perspectives in practice.

The design paves the way for progress surveys in which the same families and young people are interviewed several years after their treatment ends, which allows children and families to be monitored both qualitatively and statistically over a number of years. This makes it possible to register both short and longer-term effects and changes in the family.

Target groups		Political focus	
Population in general	<input type="checkbox"/>	Social exclusion	<input checked="" type="checkbox"/>
Children	<input checked="" type="checkbox"/>	Health	<input type="checkbox"/>
Families with a single parent	<input type="checkbox"/>	Long-term care	<input type="checkbox"/>
Unemployed	<input type="checkbox"/>	Involvement	<input type="checkbox"/>
Older people	<input type="checkbox"/>		
Young people	<input checked="" type="checkbox"/>	Geographical extent	
Disabled people	<input type="checkbox"/>	National	<input type="checkbox"/>
Immigrants/refugees	<input type="checkbox"/>	Regional	<input checked="" type="checkbox"/>
Ethnic minorities	<input type="checkbox"/>		
Homeless	<input type="checkbox"/>	Implementing authority	
Specific disorder/illness	<input type="checkbox"/>	City of Copenhagen	
Other [please specify]	<input checked="" type="checkbox"/>		
Local caseworkers in relation to children			
Initiative context/background			
More detailed description of initiative			
1.	What was/is the timetable for the implementation of the initiative?		
	The project period was fixed at four years from 2005 to 2008.		
2.	Specific objectives		
	<p>The evaluation has four focus areas:</p> <ol style="list-style-type: none"> 1. reduction in the placement frequency of and economic expenses for disadvantaged families with children 2. benefits of offer for families/young people 3. method development 4. embedding of methods in social centres' teams for families with children <p>There are a number of continuously measured success criteria for each of the four focus areas.</p>		
3.	How did the initiative take these objectives into consideration?		
	Focus area no. 1: Reduction in the placement frequency of and economic expenses for		

disadvantaged families with children

- Pooling of registers: The City of Copenhagen's finance system and the Children and Young People system are pooled with the statistical registration of families/young people in FamilyFocus and HardWork.
- Control groups: The results of FamilyFocus and HardWork are compared to control groups from 2005 and 2006 that did not receive the same offers.
- Statistical tests

2. Focus area: Benefits of offer for families/young people

- Statistical registration: All families and young people are registered on admission and discharge. Their situations and the changes that children and adults go through are registered. The types of offers received by children and adults are also registered as well as the degree to which the objectives have been fulfilled. The person treating the families/young people performs the registration in an electronic questionnaire.
- User survey (questionnaire): All parents and children discharged from FamilyFocus must as from 1 January 2007 fill in a short questionnaire (paper version) about benefits.
- Qualitative interviews with families and young people: In FamilyFocus, select parents and children are interviewed about the experience and benefits gained from the offer. The families are interviewed towards the end of treatment and again about one year after treatment ends. In HardWork, all admitted young people are interviewed about their experiences and benefits several times during the process. Interviews with young people were conducted as a mix of a questionnaire completed with smileys and open questions asked by the project evaluator. The completion of the questionnaire and the questions and dialogue during the completion are recorded on tape. The parents of the young people are also interviewed. The qualitative interviews with offer users provide important knowledge about methods and results, but they often also trigger a reflection process among users, which leads to new questions or decisions and which the users can apply in the further treatment process. Moreover, several users have indicated that the actual participation in an interview produced great benefits in terms of increased self-esteem and validation. The evaluation thus becomes part of the intervention and method development vis-à-vis the users.
- Qualitative interviews with the employees in FamilyFocus and HardWork, including qualitative interviews with caseworkers of select families/young people. Caseworkers are interviewed about the benefits registered with the families/young people.
- Questionnaire survey among the employees in the social centres' teams for families with children where the employees register the degree of satisfaction with the treatment and the individual family's fulfilment of objectives.

3. Focus area: Method development

- Observations of the work with families/young people in FamilyFocus and HardWork, comprising participation in talks, activities, home visits, meetings, professional reflection, etc.
- Qualitative interviews with employees in FamilyFocus and HardWork: Employees were interviewed individually and in groups.
- Qualitative interviews with families and young people. In the individual interviews, families and young people are also asked about the offer methods and how they see them.

- Group interviews with the users of group offers in FamilyFocus.
- Holding of experience compilation days, half-way evaluations, professional method development days, etc. These days serve a two-fold purpose: They contain knowledge sharing and exchange of experience between employees, which forms part of the employees' method development process, but the days also provide documentation for the evaluation in terms of method application and development. For instance, two days of "half-way evaluation" with the employees in HardWork, where the programmes involving all the young people were reviewed, generated a large amount of knowledge for the evaluation. At the same time, the evaluation allowed the employees to reflect jointly and summarise the situation of the young people and the methods applied, which enabled them to examine the method application across the individual programmes. Finally, it also paved the way for preparing generalisations of what works in the efforts.
- Linking of effect measurement, statistical registration of families on admission and discharge and the qualitative data to render the effect of the methods probable.

4. Focus area: Embedding of methods in social centres' teams for families with children (competence development)

- Questionnaire survey among employees in the social centres' teams for families with children (FamilyFocus): For instance, the employees were asked about the benefits of competence development, whether they have changed their own practice, how often they apply specific methods and whether competence development has enhanced the professional quality of family work.
- Group interviews with the employees in the individual teams for families with children (FamilyFocus): These interviews provided knowledge for the evaluation, but also triggered a group process that led to new ideas and decisions on the team.
- Qualitative individual interviews with other select employees from the social centres' work with young people (HardWork)
- Qualitative interviews with team managers.
- Qualitative interviews with permanent employees in FamilyFocus and HardWork.
- The external evaluator will conduct an independent qualitative survey in 2007, focusing on learning processes and organisational changes connected with competence development.

Checking/monitoring and evaluation	
	How are/were initiatives checked/evaluated?
	See above.
Results	
1.	To what degree were the specific objectives fulfilled?
	The design is flexible because the models and methods of investigation used differ, and so the design can to some extent be adjusted under way, just as suitable methods of investigation can be tested and developed in relation to the various target groups and purposes. In this connection, testing was done of investigation methods that serve a two-fold purpose (see above) and thus are seen as highly rewarding and useful for the practitioners and help incorporate the evaluation into practice. The evaluator is of the opinion that the validating and solution-targeted approach applied in the evaluation is one important reason why the evaluation is considered useful.
2.	What obstacles/risks emerged during the implementation of the initiative?
	1. In this design, the evaluator is very close to practice. This entails a risk, however, that he or she will become "part of the project" after a while and no longer be able

	<p>to maintain the necessary professional and critical objectivity to the project.</p> <ol style="list-style-type: none"> 2. As an internal evaluator, the evaluator is part of the organisation he or she is evaluating. This may lead to deliberations about loyalty as well as the management and approval of the evaluation. 3. The formative evaluation, which sometimes contains elements of action research, makes it more difficult to define and maintain a specific role as evaluator. 4. The design is very comprehensive with a great many “balls in the air”. This places great demands on the evaluator’s personal and professional competences as well as the resources allocated.
3.	How were these obstacles and risks handled?
	<p>Re 1. The evaluator had to incorporate working methods capable of preventing too much proximity to the project. First, this comprises the planning “stages” of the work where the evaluator is some times very present and at others absent. This means, for example, that the evaluator is not present in the project during the analysis periods or right after feedback has been given. Second, it comprises a clear agreement that the evaluator does not participate in management’s decision-making forums. This means, for instance, that the evaluator at some meetings gives his feedback and then leaves the room when decisions are to be made.</p> <p>Re 2. With respect to this point, it is important to negotiate a high degree of competence, independence and freedom for the evaluator as the evaluation work is otherwise rendered impossible.</p> <p>Re 3. Constantly reflecting on the role of the evaluator in different situations and making this role apparent to the surroundings are very important – as is setting bounds to what the evaluator must be involved in or used for.</p> <p>Re 4. It is probably rare that such a comprehensive design can be launched, but parts of the design described can easily be used for minor evaluations. Furthermore, a realistic timetable, task prioritisation and a clear structure for the entire evaluation process have proved to be very important.</p>
4.	Were there any unexpected advantages or weaknesses?

Socially disadvantaged people

An example of employment of socially disadvantaged people has been selected as the Government gives this high priority.

Widespread prejudice exists when it comes to the possibilities of finding work for former drug misusers, so an example has been chosen showing that this group of socially disadvantaged people can be helped to find work (60% of the participants have found work or are receiving education).

The project has been running for some time so it is possible to take stock of some of the results of the initiative.

Title of initiative		Member state	
Forward		Denmark	
Final objective of initiative			
To ensure work and education for drug and alcohol misusers			
Summary of overall results			
66% of the participants have found work or started on an education.			
Target groups		Political focus	
Population in general	<input type="checkbox"/>	Social exclusion	<input checked="" type="checkbox"/>
Children	<input type="checkbox"/>	Health	<input type="checkbox"/>
Families with a single parent	<input type="checkbox"/>	Long-term care	<input type="checkbox"/>
Unemployed	<input checked="" type="checkbox"/>	Governance	<input type="checkbox"/>
Older people	<input type="checkbox"/>		
Young people	<input type="checkbox"/>	Geographical extent	
Disabled people	<input type="checkbox"/>		
Immigrants/refugees	<input type="checkbox"/>	National	<input type="checkbox"/>
Ethnic minorities	<input type="checkbox"/>	Regional	<input checked="" type="checkbox"/>
Homeless	<input type="checkbox"/>		
Specific disorder/illness	<input type="checkbox"/>	Implementing authority	
Other [please specify] drug and alcohol misusers	<input checked="" type="checkbox"/>	Koføeds Skole (NGO)	
Initiative context/background			
To launch a relevant and systematic initiative to ensure work or education for misusers when they have successfully completed their treatment for misuse.			
More detailed description of initiative			
1.	What was/is the timetable for the implementation of the initiative?		
	The initiative was launched on 5 January 2004.		
2.	Specific objectives		
	The initiative coordinates treatment, traineeship and education. Importance is attached to prevention of relapse, development and maintenance of participants' personal, social and professional competences and to career planning and plans for work or continuing education.		
3.	How did the initiative take these objectives into consideration?		
	The initiative realises that time is an important factor when it comes to misusers. Patience		

	is required. Participant motivation and the risk of relapse are the most important elements. Therefore, the initiative has been planned to comprise counselling that aims at preventing participants from relapsing. Moreover, importance is always attached to preparing the participants for the labour market or the educational system.
Checking/monitoring and evaluation	
	How are/were initiatives checked/evaluated?
	The first part of the initiative comprised self-estimation. External experts will evaluate the second part of the project (2007-2009).
Results	
	1. To what degree were the specific objectives fulfilled?
	66% of the participants have found work or started on an education.
	2. What obstacles/risks emerged during the implementation of the initiative?
	It was necessary to alter the belief of misusers and the system/authorities that the situation was hopeless.
	3. How were these obstacles and risks handled?
	Individual coaching Close contact with the employers/network Communication of success
	4. Were there any unexpected advantages or weaknesses?
	66% of the participants got started, which was more than expected.

Integration

The example has been selected because the Ministry of Refugee, Immigration and Integration Affairs finds that similar projects have had a positive impact on making women with immigrant backgrounds active fellow citizens in communities and thus society at large.

Title of initiative	Member state
Integration of mothers and their children through the project named Project Neighbourhood Mothers.	Denmark
Final objective of initiative	
The initiative aims at making an increasing number of women with immigrant backgrounds active fellow citizens in Danish society.	
Summary of overall results	
The first Danish projects are yet to be completed and evaluated, but highly positive experience exists from a similar project in Berlin.	
Target groups	Political focus
Population in general <input type="checkbox"/>	Social exclusion <input checked="" type="checkbox"/>
Children <input checked="" type="checkbox"/>	Health <input type="checkbox"/>

Families with a single parent	<input type="checkbox"/>	Long-term care	<input type="checkbox"/>
Unemployed	<input checked="" type="checkbox"/>	Involvement	<input type="checkbox"/>
Older people	<input type="checkbox"/>		
Young people	<input type="checkbox"/>	Geographical extent	
Disabled people	<input type="checkbox"/>	National	<input checked="" type="checkbox"/>
Immigrants/refugees	<input checked="" type="checkbox"/>	Regional	<input type="checkbox"/>
Ethnic minorities	<input checked="" type="checkbox"/>		
Homeless	<input type="checkbox"/>	Implementing authority	
Specific disorder/illness	<input type="checkbox"/>	Ministry of Refugee, Immigration and Integration Affairs	
Other [please specify]	<input type="checkbox"/>		
Initiative context/background			
The initiative forms part of the Women's Programme: Focus on the Resources of New Dane Women.			
The programme primarily aims at making an increasing number of women with immigrant backgrounds active fellow citizens in Danish society. The programme comprises a number of initiatives to strengthen women's chances of finding work, receiving an education and participating in sports and association life. Moreover, the initiatives aim at enhancing women's possibilities of fostering their children's integration and development in the broad sense.			
The ministry has allocated a total of DKK 55.6m from the rate adjustment pool funds to the Women's Programme for the period 2007-2011.			
More detailed description of initiative			
1.	What was/is the timetable for the implementation of the initiative?		
	The initiative will be implemented during the period 2007-2011.		
2.	Specific objectives		
	Project Neighbourhood Mothers is intended to make women with immigrant backgrounds in disadvantaged residential areas more inclined to become active fellow citizens in Danish society and to increase the mothers' knowledge about how to foster the development and integration of their children.		
3.	How did the initiative take these objectives into consideration?		
	As part of the project a number of unemployed mothers with immigrant backgrounds are chosen for an intensive course before they can become neighbourhood mothers. The course is to teach them more about how to foster the development and integration of their children in the broad sense. The mothers determine the subjects together with the project manager. The subjects may be children's upbringing and schooling, healthy nutrition for children and children's rights as well as local day care and school offers.		
	After completing the course, neighbourhood mothers look up other mothers in the neighbourhood – women with the same immigrant backgrounds, for example. The mothers are to pass on the knowledge they have acquired over a long period of regular visits. They		

	do this through personal interviews and by going over educational material. With a view to establishing the most possible confidence and security with regard to the interview, the neighbourhood mothers visit the women in their homes.
Checking/monitoring and evaluation	
	How are/were initiatives checked/evaluated?
	The initiative will be evaluated as part of the overall evaluation of the Women's Programme. The evaluation will be made in 2011.
	The individual projects implementing the Project Neighbourhood Mothers initiative are required to submit an evaluation form to the Ministry of Refugee, Immigration and Integration Affairs at the completion of a project.
Results	
1.	To what degree were the specific objectives fulfilled?
	The first projects are yet to be completed and evaluated.
2.	What obstacles/risks emerged during the implementation of the initiative?
	The first projects are yet to be completed and evaluated.
3.	How were these obstacles and risks handled?
	The first projects are yet to be completed and evaluated.
4.	Were there any unexpected advantages or weaknesses?
	The first projects are yet to be completed and evaluated.

Long-term care

The project on socio-pedagogic practice in dementia care has been selected because the project is based on brand-new and positive results in terms of methods for treating citizens suffering from dementia, which is one of the weakest groups among older people.

Title of initiative	Member state
SPIDO (Socio-pedagogic Practice in Dementia Care)	Denmark
Final objective of initiative	
SPIDO is a development and education/training project aimed at raising the competences of staff working with dementia care. The education/training attach importance to how to avoid using force by taking socio-pedagogic approaches to the work with people suffering from dementia.	
Summary of overall results	
The experience gained in the socio-pedagogic method shows that significantly less force can be used against people suffering from dementia.	
Target groups	Political focus
Population in general <input type="checkbox"/>	Social exclusion <input type="checkbox"/>
Children <input type="checkbox"/>	Health <input type="checkbox"/>
Families with a single parent <input type="checkbox"/>	Long-term care <input type="checkbox"/>

Unemployed	<input type="checkbox"/>	Governance	<input type="checkbox"/>
Older people	<input checked="" type="checkbox"/>		
Young people	<input type="checkbox"/>	Geographical extent	
Disabled people	<input type="checkbox"/>		
Immigrants/refugees	<input type="checkbox"/>	National	<input checked="" type="checkbox"/>
Ethnic minorities	<input type="checkbox"/>	Regional	<input type="checkbox"/>
Homeless	<input type="checkbox"/>		
Specific disorder/illness	<input type="checkbox"/>	Implementing authority	
Other [please specify]	<input type="checkbox"/>	National Board of Social Services under the Ministry of Social Welfare (formerly the Ministry of Social Affairs).	
Initiative context/background			
Between 2004 and 2006, the National Board of Social Services completed a project entitled Testing the Socio-pedagogic Method for Preventing the Use of Force against Citizens Suffering from Dementia with participation in an education/training programme by care units from seven local authorities. The experience gained showed that significantly less force can be used against people suffering from dementia. On the basis of the positive results, the then Minister for Social Affairs subsequently allocated funds to supplementary training of staff caring for older people.			
More detailed description of initiative			
1. What was/is the timetable for the implementation of the initiative?			
	The project was launched in early 2007 and runs until the end of 2009.		
2. Specific objectives			
	The overall objectives of the project include taking a socio-pedagogic approach to prevent the use of force against people suffering from dementia. The project aims at supporting professional development and professional competences of staff caring for older people in a way that integrates the socio-pedagogic approach into care practice and thus helps prevent the use of force against people suffering from dementia.		
3. How did the initiative take these objectives into consideration?			
	<p>SPIDO is made up of four main elements:</p> <ul style="list-style-type: none"> • The SPIDO project will enhance the competences of 2,000 employees in terms of applying a socio-pedagogic approach and preventing the use of force. • SPIDO helps embed competency enhancement in the organisational culture and leads to organisational learning. • The SPIDO project prepares consultants for making future contributions to a massive enhancement of dementia competences. • Through knowledge compilation and knowledge exchange, the SPIDO project helps to develop more precise understanding and intervention in the area. 		
Checking/monitoring and evaluation			

	How are/were initiatives checked/evaluated?
	Three months after the education/training programme ends, an evaluation form will be forwarded to the manager at authority level, who will ensure that it is filled in by the immediate manager and the employees. The manager will return the evaluation form within four weeks, and the consultant will then call the manager to round off the programme.
Results	
1.	To what degree were the specific objectives fulfilled?
	The first evaluation pointed out, for instance, that the courses in the socio-pedagogic approach raised staff awareness of the working processes. Moreover, employees gained greater awareness about how to handle conflicts and a stronger will and commitment to apply what they learned, particularly in terms of greater creativity in care efforts.
2.	What obstacles/risks emerged during the implementation of the initiative?
3.	How were these obstacles and risks handled?
4.	Were there any unexpected advantages or weaknesses?

Below follows a description of the initiative to implement rules on disability councils. The example was highlighted because the preliminary evaluation results show that the disability councils succeeded in helping to advise the local system on the conditions of disabled people.

Title of initiative		Member state	
Implementation of rules on disability councils		Denmark	
Final objective of initiative			
To establish a dialogue forum between local representatives and disabled people on the local authority's disability-policy initiatives and development.			
Summary of overall results			
In a short period, it was possible to establish a predominantly well-working dialogue forum with an interdisciplinary aim ensuring that disabled people are heard and involved in local decisions of significance to disabled people.			
As a specific result, a large number of local authorities are now formulating a local disability policy.			
Target groups		Political focus	
Population in general	<input type="checkbox"/>	Social exclusion	<input type="checkbox"/>
Children	<input type="checkbox"/>	Health	<input type="checkbox"/>
Families with a single parent	<input type="checkbox"/>	Long-term care	<input type="checkbox"/>
Unemployed	<input type="checkbox"/>	Governance	<input checked="" type="checkbox"/>
Older people	<input type="checkbox"/>		

Young people	<input type="checkbox"/>	<table border="1"> <thead> <tr> <th colspan="2">Geographical extent</th> </tr> </thead> <tbody> <tr> <td>National</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>Regional</td> <td><input type="checkbox"/></td> </tr> <tr> <th colspan="2">Implementing authority</th> </tr> <tr> <td colspan="2"> </td> </tr> </tbody> </table>	Geographical extent		National	<input checked="" type="checkbox"/>	Regional	<input type="checkbox"/>	Implementing authority			
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Regional	<input type="checkbox"/>											
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Disabled people	<input checked="" type="checkbox"/>											
Immigrants/refugees	<input type="checkbox"/>											
Ethnic minorities	<input type="checkbox"/>											
Homeless	<input type="checkbox"/>											
Specific disorder/illness	<input type="checkbox"/>											
Other [please specify]	<input type="checkbox"/>											
Initiative context/background												
<p>The local government reform transferred the full authority and financing responsibility in terms of disability to the city councils. The disability councils were established with a view to ensuring involvement of disability-policy opinions in local decisions and to ensuring qualified advisory services for decision-makers and administration in the field of disability.</p>												
More detailed description of initiative												
1.	What was/is the timetable for the implementation of the initiative?											
	At 1 April 2006, it became compulsory for the local authorities to establish disability councils.											
2.	Specific objectives											
	<p>The disability councils were composed of an equal number of local representatives and representatives from the organisations for the disabled. The individual local authority makes the final decision on the number of members, although it may not be lower than six or higher than 12.</p> <p>The disability council must be consulted in connection with all initiatives of significance to disabled people. The councils may also advise local authorities in disability-policy issues.</p> <p>The councils may consider all local policy issues concerning disabled people.</p> <p>The disability councils thus perform an interdisciplinary function and, in this way, they allow for groups with different disabilities and work across administrative and political boundaries.</p>											
3.	How did the initiative take these objectives into consideration?											
	The rules on disability councils, including the tasks of the councils, are laid down in an act.											
Checking/monitoring and evaluation												
	How are/were initiatives checked/evaluated?											
	<p>At present, the implementation of the rules on disability councils is being evaluated. The evaluation is scheduled for completion on 1 October 2008.</p> <p>The evaluation aims at examining the disability councils' clout. In this connection, an overview must be achieved of the number of consultations and other initiatives in which the individual disability councils are involved. Moreover, the internal cooperation relations in the councils must be explained in the evaluation as must the extent to which disability</p>											

	<p>councils and local authorities see that the councils have had clout in terms of decisions in the area.</p> <p>The evaluation comprises a study of existing literature on the new disability councils. Furthermore, the evaluation comprises a qualitative study of 10 disability councils and a questionnaire for the disability councils and local authorities on the clout of the councils they experienced.</p>
Results	
1.	To what degree were the specific objectives fulfilled?
	The final evaluation is not yet available, but should be published in October 2008. However, the preliminary results suggest that a working dialogue forum could be established, which would help ensure that disability policy opinions and experience are taken into consideration when local decisions and initiatives are made.
2.	What obstacles/risks emerged during the implementation of the initiative?
	<p>The framework for the work performed by the disability councils must be laid down locally. In the introductory phase, expectations for the work and the workload had to be adjusted, which gave rise to conflicts in some cases.</p> <p>In a few instances, problems were seen with the recruitment of members for the disability councils.</p>
3.	How were these obstacles and risks handled?
	Through dialogue, expectations were adjusted locally.
4.	Were there any unexpected advantages or weaknesses?

Health

The National Indicator Project (NIP) is one example of how hospital owners, clinicians and central health authorities have entered into cooperation to maintain and develop the quality of treatment in the Danish hospital sector. This means that several parties feel they are significant co-owners of the work performed and delivered by NIP. Embedding health is particularly important as clinicians are the ones who must daily attempt to optimise the treatment and working processes as recommended in the NIP. This being the case, it is positive that the NIP is recognised in professional environments and widely used as a benchmark for good quality in the relevant departments.

Title of initiative	Member state
National Indicator Project (NIP)	Denmark
Final objective of initiative	
The initiative aims at helping to develop health quality on an evidence-based foundation. This knowledge about quality must also be communicated to citizens and patients. Moreover, the NIP aims at supporting a rational dialogue between the professional and management levels.	
Summary of overall results	
The NIP has developed quality indicators of eight courses of disease. Each course has a number of activities that should be completed to ensure the course is optimum. The regions are evaluated on the basis of the number of courses at regional hospitals that can be considered optimum. In this way, two	

forms of benchmarks exist – one where the region is evaluated on the basis of standards, established by the NIP, and one where the regions are compared with each other and with each individual region’s degree of compliance with the individual standards within the individual course.	
Target groups	Political focus
Population in general <input type="checkbox"/>	Social exclusion <input type="checkbox"/>
Children <input type="checkbox"/>	Health <input checked="" type="checkbox"/>
Families with a single parent <input type="checkbox"/>	Long-term care <input type="checkbox"/>
Unemployed <input type="checkbox"/>	Governance <input type="checkbox"/>
Older people <input type="checkbox"/>	
Young people <input type="checkbox"/>	Geographical extent
Disabled people <input type="checkbox"/>	
Immigrants/refugees <input type="checkbox"/>	National <input checked="" type="checkbox"/>
Ethnic minorities <input type="checkbox"/>	Regional <input type="checkbox"/>
Homeless <input type="checkbox"/>	
Specific disorder/illness <input type="checkbox"/>	Implementing authority
Other [please specify] <input type="checkbox"/>	The NIP is an independent project funded by Danish Regions.
Initiative context/background	
The National Indicator Project is a quality development project launched in 1999 by the scientific companies, nursing associations, physiotherapists and ergotherapists, the regional authorities at the time, the National Board of Health and the Ministry of Interior Affairs and Health for the purpose of obtaining the correct data on health quality and ensuring health analysis and interpretation of these results.	
More detailed description of initiative	
1.	What was/is the timetable for the implementation of the initiative?
	The original NIP timetable was 2003, but the project has continued and work is still being carried out to optimise standards and include other fields of disease.
2.	Specific objectives
	<p>On the basis of the data developed in the project, the overall objectives are to contribute to</p> <ol style="list-style-type: none"> 1. Clinicians’ knowledge about completed health quality and identification of areas in need of improvement. 2. Inclusion of the indicators in the management information systems in hospital departments. The majority of the indicators chosen concern processes (CT scanning performed, time from hospitalisation until surgery performed, etc.). These data can be used for the day-to-day management of departments. 3. Dialogue with department/hospital levels and administrative/political levels. 4. Publication of data with a view to information for citizens and users.

3.	How did the initiative take these objectives into consideration?
	<p>The project provides continuous feedback on the fulfilment of objectives in the form of indicator achievement.</p> <p>Data are analysed and adjusted, for instance, for differences in patient composition when wards, hospitals and regions are cross-compared.</p> <p>Data are subjected to an annual health assessment by the departments submitting the data (a so-called clinical audit) as it needs to be pointed out that indicators are to be interpreted to produce a real picture of clinical quality.</p> <p>Data are published once a year in a report. This report grants access to data and offers the expert assessment. Publication takes place in both a health version and a more citizen-targeted version.</p>
Checking/monitoring and evaluation	
	How are/were initiatives checked/evaluated?
	The clinical staff in the departments evaluate the relevance of the project and the indicators on an ongoing basis.
Results	
1.	To what degree were the specific objectives fulfilled?
	The indicators were developed and the results published continuously for the benefit of clinicians and citizens.
2.	What obstacles/risks emerged during the implementation of the initiative?
3.	How were these obstacles and risks handled?
4.	Were there any unexpected advantages or weaknesses?