

Executive summary

Throughout the OECD, mental ill-health is increasingly recognised as a problem for social and labour market policy; a problem that is creating significant costs for people, employers and the economy at large by lowering employment, raising unemployment and generating productivity losses. The institutional set-up in Belgium has great potential in addressing the challenges of mental ill-health and work, mainly for three reasons. First, the advanced labour legislation has a strong focus on the prevention of mental ill-health at work; second, people with a mental disorder typically receive unemployment benefits rather than disability benefits upon job loss, hence remaining closely attached to the labour market which facilitates their reintegration; and third, the integrated sickness and disability benefit system provides ideal conditions for sickness monitoring, early intervention and effective return-to-work mechanisms. However, the current system is poorly implemented, passive and reactive and is not used to prevent labour market withdrawal of people with mental illness. The recent rapprochement by the public employment services (especially in Flanders) towards the mental health sector and other benefit systems to (re-)integrate people with mental disorders is a promising evolution to improve the labour outcomes and social well-being of people with mental ill-health. A more active mindset of employers, occupational health services, and sickness insurance companies (called mutualities) will be required, as well as systematic co-financing mechanisms between the different sectors to develop models of service co-operation and integration. The ongoing mental health reform provides the ideal opportunity for integrating health and employment services.

The OECD recommends to Belgium to:

- Further integrate children and students with special needs in mainstream education and improve the transition to employment.
- Rigorously implement and monitor employers' obligations with respect to psychosocial problems and increase sanctions for non-compliance.

- Systematically involve occupational health specialists in the retention and reintegration of sick employees.
- Systematise the co-operation between mutualities and public employment services.
- Develop employment-oriented mental health care and experiment with ways to integrate health and employment services.