



Bsport+

WHITE PAPER ON POLICY MAKERS
BELGIUM

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B-Sport +: WHITE PAPER ON POLICY MAKERS**INTRODUCTION: SCOPE AND PURPOSE**

Practicing sports lowers the risk of multiple health disorders and diseases such as obesity, diabetes, cardiovascular diseases and even prevents mental health problems like burn-out or a depression. In Belgium, 62% of workers suffer from excessive stress. Practicing sports can help reduce stress complaints and can improve the recovery of (brain) damage as a result of prolonged, chronic stress.

The regional government in Flanders states the importance of practicing sports towards having a 'healthy' society and therefore wants to improve the quality of the sports offer. This way, more people can enjoy sports in different stages of their lives. The Flemish government has developed the sports policy for the period 2019-2024 which contains several goals. People in Flanders should be able to practice sports in their neighbourhood. Furthermore, citizens have to be able to practice sports in every stage of their life: while being at school, while being full-time employed, while having a family and while being retired. Regarding the sport participation while being full-time employed, the government wants to promote 'sports companies' who give their employees opportunities to practice sports and stay active. Moreover, there will be made investments in better infrastructure for sport facilities and to make these facilities more accessible for everyone (Vlaamse regering, 2019).

NATIONAL CONTEXT

(definition of disability, current state of the targeted PwDs at national context, existing legal frameworks and programs, key statistics, current HEPA initiatives (if any), etc.) (500 words)

The definition of disability in Belgium is in line with the evolution from the medical to the social model and the cultural model towards PwDs, which means more emphasis is placed on participation problems. The Flemish Agency for Persons with a Disability (VAPH) is the main agency in the region of Flanders supporting PwDs. This agency defines a disability as: "any long-term and important participation problem of a person due to the interplay between functional disorders of a mental, psychological, physical or sensory nature, limitations in carrying out activities and personal and external factors" (VAPH, 2020).

According to numbers of Statbel, the Belgian statistical office, 9% of the 15-64-year-olds have a disability or health problems that severely limit their daily activities (Statbel, 2018). Looking at the top 3 reasons to receive recognition of a disability, women are recognized for orthopaedic reasons (33,1%), followed by psychological disorders (23,7%) and disorders of the nervous system (10,7%). Men are mostly recognized for psychological disorders (29,9%), followed by orthopaedic reasons (20,6%) and disorders of the nervous system (10,5%) (FOD Sociale Zekerheid, 2020). Recently published numbers of the Riziv (National Institute for Health and Disability Insurance) showed that in 2020 more than 450 000 people in Belgium were declared incapacitated for work and so 'long-term sick'. This means that for every 10 people who work in Belgium, one is 'long-term sick'. The number one reason is a mental problem like a burn-out or depression (De Standaard, 2021). In Flanders, 6,7% of population has psychological issues (GSport Vlaanderen, 2018). Since September 1st, 2014, stress and burnout have been included in the Belgian welfare law. The emphasis will be more on prevention than on control. As with psychosocial risks such as undesirable behaviour or aggression at work, preventing stress and burnout among the employees is the responsibility of the employer (Mensura, 2018).

The legal framework in Belgium ensuring the inclusion of PwDs and protecting their rights is based on the 'Fight Against Discrimination', codified by the Act of 10 May 2007 on combating certain forms of discrimination. This legal framework prohibits any discrimination on the basis of various criteria, such as: age, sexual orientation, marital status, birth, fortune, religion or philosophy, political beliefs, trade union beliefs, current or future health status, disability, physical or genetic characteristics, social origin or language. Therefore, any discrimination is prohibited, whether direct or indirect.

By law, the Belgian UNIA (Centre for Equal Opportunities and Opposition to Racism) is charged with dealing with discrimination based on various motives such as disability and health status. With regard to disability, the law does not give any clear-cut definition, but the centre uses a broad interpretation. The disability can be the result of different situations: physical and sensory health problems, chronic and degenerative diseases, genetic diseases, mental or mental limitations, physical or mental limitations as a result of an accident at work, an occupational disease, ...

INCLUSIVE EDUCATION AND SPORT PARTICIPATION FOR PwDs

(existing infrastructure and educational programs, importance of sport participation for the targeted PwDs, HEPA initiatives and importance for the targeted PwDs,



etc.) (500 words)

Regarding quantitative data on sports participation for PwDs, no regular data exists on national/ Federal level. The data used here, describes the situation in the Region of Flanders which is best recorded. In Flanders, there are about 165.000 PwDs, but barely 8.000 people practice sports. There are also only 800 sport clubs for PwDs (G-Sport Vlaanderen, 2018).

Only a small part (10%) of respondents from the online survey indicate that they are unable to undertake everyday physical activities. This includes walking, taking stairs, cycling, doing light household tasks etc. Most of the respondents (82%) are motivated to participate in sports activities. The main drivers for this participation are: intrinsic motivation and personal reasons (34%) and the influence of the doctor or other professional care providers (21%). Reasons that prevent them from participating in sports activities are: lack of time (11%), illness or injury (8%) and lack of self-confidence (8%).

To make it easier for PwDs to participate in sports activities, the following could help: providing better facilities and infrastructure (21%) and more support or help from family and friends (17%).

There are several types of funding to promote a healthy lifestyle and inclusion to sport activities for PwDs. In Flanders, 'Sport Vlaanderen' manages different programmes and subsidy schemes to facilitate PwDs participation in sports. For example, sport organisations can apply for subsidies to meet a number of needs for PwDs (e.g. organising domestic and international sports events, starting up

a new sports activity aimed at the inclusion of people with a disability). Also, sports providers can lend materials free-of-charge for any sporting events for individuals with a disability and in each province there is a designated consultant and reference persons on all matters related to sports for PwDs.

Regarding inclusive education, Belgium has a wide range of specialist education for pupils with learning disabilities or pupils with a physical or mental, temporary or permanent disability that requires an adapted learning environment. The Belgian specialist schools use individualized programs that take into account the needs and learning rhythm of each student. The offer of specialist schools is available for pupils in kindergarten to secondary education. In Belgium, the organisation of education is situated at the level of communities. The Flemish specialist education system is divided into nine types, according to the disability of the students.

On 21 March, 2014, the Flemish Parliament approved a parliamentary act on measures for pupils with specific needs (M-decreet) with the aim to make education more inclusive in Flanders. This act contains measures which allow pupils with specific educational needs to participate fully, effectively and on equal term in regular schools and classrooms.

OVERVIEW AND KEY FINDINGS FROM THE COMMUNITY SURVEY

Of the 51 respondents with disabilities who took part in the online survey in Belgium, 39% is satisfied with the lifestyle they have and 43% is not restricted in everyday activities or work due to their health status. However, participants reported they experience several negative emotions due to their health condition. They frequently reported to have a lack of confidence (46%), to feel different from others (31%) and to be nervous/anxious (8%). Most of the respondents (80%) reported medium levels of stress in their daily life.

Regarding their everyday activities, 47% of respondents is currently employed (full-time, part-time or self-employed). Moreover, 12% of respondents feels able to carry out everyday physical activities such as walking, climbing stairs, carrying groceries etc. Belgian respondents are somewhat sporty; 33% spends between 1 and 2 hours a day in sport or recreational activities. This includes light gardening and light housework, leisurely walking, dancing, running, swimming etc.

Participants reported to use technology devices on a regular basis. A majority (57%) uses technology for less than 8 hours per day, whereas 25% of the respondents uses them for more than 8 hours per day. A small part (10%) of respondents is very

confident about their IT skills and knowledge, 14% is not confident at all and 76% answers in between. The usage of health or fitness apps is rather low: only 16% uses any health or fitness apps to track their health condition. Within the scope of respondents who stated they use these apps, 37% uses these apps on a daily basis and 25% uses these often (a couple of times per week).

In terms of motivation to participate in recreational activities and sport, 12% of respondents feels very unmotivated about participating in sport or recreational activities. 82% of respondents reported moderate motivation and only 6% feels very motivated about participating in sport or recreational activities. The main reasons for a higher participation to sport and recreational activities are intrinsic motivation and personal beliefs, or doctors and health professionals' influence. The main reasons for a lower participation are a lack of time, illness or injury and lack of self-confidence. Because of the COVID-19 pandemic, respondents lack social contacts and want to have more tailor-made activities to maintain a better level of physical and mental well-being.

RECOMMENDED POLICY ACTIONS

(be as much as possible specific and provide with comprehensive recommendations focusing both at the general context of PwDs at your country, as well as specifically at the needs and potential actions for the targeted PwDs – in Albania for instance, we target children with diabetes) (500 words)

In general, facilities and infrastructure for sports for PwDs should be improved. Results from the online survey show that 21% of Belgian respondents think better facilities and infrastructure would make it easier to participate in sport or recreational activities. These facilities should be more accessible for everyone (both practically and financially). Sports facilities can be developed in public spaces, like the open-air fitness spaces in public parks for example.

The positive health effects of sports and exercise cannot be sufficiently emphasized: better fitness, more social contacts, a healthy lifestyle and more well-being are some of them. Results from the online survey in Belgium show that 80% of the respondents experience medium levels of stress in their daily life. Practicing sports and daily exercising ensures less stress complaints and the recovery of (brain) damage as a result of long-term, chronic stress, therefore:

- Organisations should be encouraged to provide inclusive and highly accessible sports initiatives and thus reduce the risk of employee burn-out and stress-re-

lated illnesses;

- Companies should be encouraged to provide opportunities for their employees to practice sports during lunch break, or during working hours
- Companies should be supported in encouraging their employees to go to work by bike or by foot, to stand up regularly when they sit behind a desk whole day, or maybe organise challenges to make the employees practice sports more.

CONCLUSIONS

It is already clear that practising sports is good for our health, both physically and mentally. The government and policy makers should provide solid infrastructure and facilities to practice sports by making investments. Moreover, there has to be developed a strong network of sport clubs and sport facilities with good a communication to identify the gaps and needs. There should also be financial support for those who need it, like PwDs. Furthermore, stakeholders should encourage people to practice sports more and to promote a healthy lifestyle.

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