

## Questions received from the members of the Demographic Council

### 1. Questions of the Ministry of Finance:

1. Is support for families, including large families, in Estonia provided in the form of direct support (like direct financial support and other types of support) or indirect support (for example tax relief, etc.)?

Estonia's family benefits are designed to partly cover the costs families incur in caring for, raising and educating their children. There are a number of ways in which families with children are supported, the two most common of which are family allowances and tax incentives.

There are nine types of family benefits:

Type of the benefit	Amount of the benefit (in euros)	Additional information
Childbirth allowance	320	
Child allowance <ul style="list-style-type: none"> <li>· for the first and second child</li> <li>· for the third and subsequent child</li> </ul>	19.18 per month 57.54 per month	Child benefit is paid at a flat rate to all children until the child is 16; or 19 if still in primary, secondary or vocational school.
Child care allowance <ul style="list-style-type: none"> <li>· for each child of up to 3 years of age if the parent raises one or more children of up to 3 years of age;</li> <li>· for each child between 3 and 8 years of age if the parent raises also children between 3 and 8 years of age in addition to one or more children of up to 3 years of age;</li> <li>· for each child between 3 and 8 years of age if the parent raises three or more children who are at least 3 years of age and who receive child allowance in a family with three or more children.</li> </ul>	38,35 per month 19,18 per month 19,18 per month	Only one of the parents has the right to receive child care allowance. Resulting the economic crisis the allowance is not payed for people also receiving maternity, adoption or parental benefit.
Single parent's child allowance	19,18 per month	
Parent's allowance for families with seven or more children	168,74 per month	
Child allowance for a child under guardianship or foster care	191,80 per month	
Adoption allowance	320	
Start in independent life allowance	383,60	
Conscript's child allowance	47,95 per month	

At this moment a **child benefits reform** is being conducted. According to the plan the benefits will rise for all families with three or more children and for families with one or two children if they live in relative poverty.

Estonian **parental benefit scheme** is very generous. Employees are entitled to a total of 575 calendar days of paid leave for bringing up a child. The first 140 days, which constitute the maternity leave, are fully paid and can be claimed only by the mother. The remaining 435 days can be shared between the parents and are compensated at 100% of their salary, subject to a ceiling of 2143.41 euros per month in 2012. Parents who have not worked are eligible for a relatively high flat rate (278.02 euros in 2012), which is a little bit lower than the minimum wage (290 euros in 2012). This can be claimed for 18 months starting from childbirth.

**Tax incentives** are offered to families with children in two different ways.

The first is that people living in Estonia can deduct the costs of educating their children or children in their care up to the age of 26 from their annual income (including interest on study loans). The second is that one of the parents of a child (or a person providing for a child) can deduct additional tax-free income from income for the period of taxation for every child up to the age of 17 starting from the second child in the family (more information under the next paragraph).

The Government provides free school meal for all children going in Elementary School (grades 1-9). Free health insurance is secured for all children (0-19 years).

Local governments also support families, depending on their needs and the availability of resources. According to survey<sup>1</sup> almost all municipalities (222 from 226) provided additional childbirth allowance; 92% of municipalities provided annual school allowance (the state school allowance was suspended due to the economic crisis); 35% of municipalities provided additional support for large families. Many local governments have additional support measures for low-income families.

2. Does Estonia provide support for large families in the form of tax relief and if the answer is yes:

a. what are those tax reliefs?

b. what are the preconditions for the family to get such tax relief?

c. what is the definition of "large families"?

3. Are there other types of tax related measures implemented to support families?

Yes, Estonia supports large families by tax reliefs.

**Increased basic exemption upon provision of maintenance to child:** One resident parent or guardian of a child or other person maintaining a child, who maintains one or more minor children may deduct increased basic exemption (equal to the basic exemption minus any income the child may have) from his or her income in the period of taxation for each child of up to 17 years of age (since 2009 starting with the second child). The increased basic exemption is applicable for each subsequent child in so far as the taxable income of the child is lower than the basic exemption for the period of taxation.

**Deductions for education and training costs:** One of a child's parents (or person providing financial support for a child) may, during the taxation period, deduct from income education and training costs paid for themselves and a dependent under the age of 26. Documented expenses paid for studying at an educational institution, public university, private school possessing an education license or enrolment in paid courses organized by such educational institutions. Interests on state-guaranteed student loans are also considered to be education and training costs. A taxpayer may deduct from his or her taxable income the training expenses paid during the calendar year which incurred to this taxpayer and a child of under 26 years of age, grandchild, brother or sister, or, if no such training expenses were incurred, the training expenses of the

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<sup>1</sup> Ainsaar and Soo (2012). Local Governments and Families with Children. University of Tartu. Ministry of Social Affairs.

permanent resident of Estonia of less than 26 years of age. The training expenses may be deducted from income only if the expenses were paid for studying in:

- state or local government educational establishment;
- university in public law;
- private school which holds a training licence with regard to the given study programme, is registered in the Estonian Education Information System or has the right to provide instruction of higher education;
- foreign educational establishment of equal status with the aforementioned, or for studying on fee-charging courses organised by such educational establishments.

**Kindergarten participation fee may be also deducted from income.** Food allowances are not the training expenses and cannot be deducted from income. If a kindergarten arranges some other training or educational activities or courses (for teaching foreign languages, swimming courses, etc.) and records it as the training expenses, then such amounts are also deemed to be the training expenses whereon the tax incentives are extended.

Increased basic exemption upon provision of maintenance to child, as mentioned earlier, is provided to families with two or more children. In general, there is no over-all definition for “large families”. Based on the State Family Benefits Act<sup>2</sup> additional benefits are provided for families with three or more children, and for families with seven or more children. At the same time the Estonian Association of Large Families assembles families with four or more children. Also, local governments have different approaches to „large families”.

## 2. Questions submitted by the Ministry of Environmental Protection and Regional Development

1. Estonia supports families in the field of child-rearing by ensuring consultations and assistance, developing appropriate living environment and arrangements.

How are the consultations provided for the families? Whether in every municipality there is specialist competent in these matters or is it the responsibility of the social worker in the framework of his/her functions? Has the impact on the young families (and choices of young families in favour of establishing a family) regarding the accessibility of these consultations been assessed?

2. What resources are being used to ensure support for families to get an appropriate dwelling? Does every respective municipality ensure such support voluntarily and according to the available resources principle, by offering a dwelling from its housing fund (stock)? Does the government provide also loans for the purchase of housing for more favourable conditions? What are those conditions?

The Local Government Organization Act stipulates that local authorities are responsible for the organization of housing economy and utilities in their administrative territories. It is a duty of local authorities to establish the procedure for keeping account of people who do not have housing or the right to use housing, and persons who need help with the improvement of their living conditions; to establish the procedure for possession, use and disposal of housing in municipal ownership; and to decide on other issues placed in the competency of the local government by law. Local authorities are therefore obliged to guarantee that target groups are supplied with suitable housing and to reduce homelessness by increasing the proportion of social housing units and housing belonging to the fund of social or municipal rental properties.

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<sup>2</sup><http://www.legaltext.ee/et/andmebaas/tekst.asp?loc=text&dok=X60007K5&keel=en&pg=1&ptyyp=RT&tyyp=X&query=riiklik+peretoetuste+seadus>

The need to allocate housing is evaluated according to the Social Welfare Act. § 2 of the Social Welfare Act stipulates the definition of 'social housing'. Social housing means housing in municipal ownership provided to a person in need of social services. Pursuant to § 14 of the Social Welfare Act, local government authorities are required to provide housing for persons or families who are unable or incapable of securing housing for themselves or their families and to create, if necessary, the opportunity to lease social housing. The procedure for provision and use of social housing will be established by the rural municipality or city council. The rural municipality government or city government must help persons who have difficulties with moving about, caring for themselves or communicating in a residence to adapt their housing or to obtain more suitable housing. In practice it is the duty of social workers.

In 1992, before the beginning of residential building reform, 26% of the housing fund was owned by the state and 35% by the local authorities. During the following years, the percentage of public housing fund decreased substantially. Since 2001, the state and local authorities own just 4% of the housing fund (local authorities own 3% and the state 1% of the housing fund), 96% is owned by the private sector. In Estonia public housing is rented out.

The use of dwellings at the possession of local governments is determined by the respective local municipality. In general, municipal housing is primarily ensured for people coming from the orphanage, tenants of restituted buildings and people released from custodial institutions. As a rule, people with insufficient financial standing, as well as persons with physical disabilities or special mental needs, can apply for social housing. Additionally, depending on the local municipality, single parents, families with 3 or more children, and other vulnerable groups can be eligible for municipal housing. Rent levels in municipal housing are mostly cost-rent, i.e. the income gained from the rent should cover only costs of housing utilities and housing maintenance. However, in most municipalities, rent levels remain lower than would be necessary to pay for housing maintenance (municipal housing stock is often amortized). In new municipal dwellings, higher rents are applied in order to cover the costs related to construction.

The need for affordable municipal housing for low-income groups exceeds supply, especially in the main towns. At the end of 2011 there were altogether 1868 applications submitted for social housing which were not satisfied. Most of these applications (1615 applications, i.e. 90,2% of unsatisfied applications) were submitted in Tallinn. However, the situation has gradually improved. In Tallinn, new municipal dwellings have been built and a portion of existing municipal housing stock has been renovated since 2002.

In the end of 2011 there were altogether 184 local governments (81,4% of all local governments) which had spaces for social and municipal housing, 42 local governments did not have spaces for social housing and municipal housing.

At the end of 2011 there were 10 057 persons living in municipal or social housing units. Providing of housing services was in 2011 financed 97% from the budget of local governments, 1% from state budget and 2% from other sources.

There aren't any assessments done. Though, studies show that families with many children, single-parent families and families with special needs caused by disability face bigger problems in terms of housing and living conditions.<sup>3</sup>

Since 2008 the Ministry of Economic Affairs and Communications has provided a national home benefit for large families. The purpose of the benefit is to improve and update the living conditions of families with four or more children. Different activities are supported: renovation, reconstruction, extension, acquisition, reimbursement of the housing loan (except interest payment) etc. Maximum grant for a family with 4 to 7 children is 6500 euros and for a family

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<sup>3</sup> Reinomägi, A. (2006). Coping and Needs of Families with Many Children. Publications of the Ministry of Social Affairs 7/2007.

with 8 or more children is 13 000 euros. In order to receive the benefit families have to submit needed information to KredEx (KredEx is a state financed financing institution helping Estonian enterprises develop quicker and expand more safely to foreign markets, offering loans, credit insurance and guarantees with state guarantee etc.) which also decides on the right to receive the benefit. For now 1313 families with 6354 children have received the benefit.

Also, KredEx provides housing loan guarantees for buying an apartment, house, plot of land or a summer cottage. The purpose for buying a plot of land must be building of a house, and in the event of summer cottage, rebuilding of the summer cottage for permanent living. In order to use the housing loan guarantee of KredEx at least one of the loan applicants shall belong into one of the below target groups:

- Target group of young family  
A young family is a parent or parents raising a child of up to 15 years (included), whereas a guardian is also considered to be a parent.
- Target group of young specialist  
A young specialist is an up to 30-year-old (included) person, who has acquired secondary or vocational secondary education (based on basic or secondary education) or vocational education based on basic or secondary education, and meets one of the following conditions below:
  - an employment contract, service contract or board member contract has been concluded with the person, whereas the probation period (if applicable) shall be over;
  - who is assigned to a post according to the Public Service Act, whereas the probation period (if applicable) shall be over;
  - the person is registered in the business register or tax board as a self-employed entrepreneur, whereas he/she shall have operated as an entrepreneur for at least a year.
- Target group of tenant of restituted living premises.

More information: <http://www.kredex.ee/en/>

3. How are more flexible forms of work promoted for the young parents in Estonia? Does the municipality institutions also ensure opportunities of teleworking, how is it promoted that entrepreneurs provide more teleworking opportunities for their employees? Do there exist especially favourable preconditions/reliefs/bonuses for entrepreneurs, marketing activities etc.?

Ensuring opportunities of teleworking depend on the economic sector.

In accordance with Employment Contracts Act<sup>4</sup> employer and employee are allowed to conclude a contract with flexible working conditions, e.g. part-time work, flexible working hours, telework. Full-time working hours are 40 hours per week, i.e. 8 hours per day. An employer and employee can agree on shorter working hours, i.e. part-time.

There are no especially favourable preconditions/reliefs/bonuses for entrepreneurs, marketing activities.

4. Similarly to Latvia, also in Estonia recognition of family friendly companies are being promoted. Are there special activities to promote the increase of the number of entrepreneurs that acquire the family friendly company's label? What role is given to the municipalities to promote this?

At the moment the family friendly company's label is not actively promoted. The Ministry of Social Affairs has worked out the criteria and the methodology for family friendly company certificate in 2012 and the first companies will be audited as a pilot project in 2012-2013. We have taken Slovenian family friendly company certificate model as an example.

For the last 12 years the competition has been organized by public sector and media organizations to recognize companies to be Estonia's most progressive on family and equal rights issues (the gender equality modul was added in 2011). The companies have not been given

<sup>4</sup> summary leaflets: <http://www.sm.ee/index.php?id=913&L=1>

labels, they have been ranked in employee and family friendly company TOP. The competition is organized by the Ministry of Social Affairs, business daily *Äripäev* and *Pere ja Kodu* (Family and Home) magazine.

At this moment municipalities have no special role in promoting family friendly companies. The Ministry of Social Affairs has organised different events for that and also NGO *Sina ja Mina* (You and Me) has actively cooperated with private sector organisations in order to provide different services for employees (e.g. parenting programme) and raise their awareness on family friendliness.

#### 5. What compensations/reliefs/privileges are ensured for parents who rear several children? Whether and how these measures make impact on the retirement age and the amount of the pension?

According to State Pension Insurance Act the following persons who have earned the pension qualifying period required for the grant of an old-age pension (pension qualifying period earned in Estonia is 15 years) have the right to receive an old-age pension under favourable conditions as follows:

- a mother, father, step-parent, guardian or caregiver who for at least eight years has raised a child under 18 years of age with moderate, severe or profound disability or five or more children - 5 years before attaining the pensionable age;
- a mother, father, step-parent, guardian or caregiver who has raised four children for at least eight years - 3 years before attaining the pensionable age;
- a mother, father, step-parent, guardian or caregiver who has raised three children for at least eight years - 1 year before attaining the pensionable age.

Also, years of pensionable service include two years for one parent or a step-parent or guardian or caregiver in a family per every child whom he or she has raised for at least eight years.

Old-age pension consists of three components:

- the base amount (120,2069 €);
- a component calculated on the basis of years of pensionable service, the amount of which equals the number of years of pensionable service multiplied by the value of a year of pensionable service;
- an insurance component, the amount of which equals the sum of the annual factors of an insured person multiplied by the value of a year of pensionable service.

The value of a year of pensionable service is 4,515 €

For example the pension for a person who has 28 years of pensionable service and whose insurance component is 12,05 is as follows:

1. Base amount 120,2069
  2. Quotient of the pensionable service  $28 \times 4,515 = 126,42$
  3. Insurance component  $12,05 \times 4,515 = 54,40$
- All together 301,03 euros

Also, one per cent of the amount of parental benefit is additionally allocated from the state budget per each born child for a person who is obligated to make additional contributions to a mandatory pension fund and who receives the benefit pursuant to the Parental Benefit Act. Additional contributions to a mandatory pension fund shall be made for an obligated person during the period of payment of the benefit as of the grant of the benefit.

More information: <http://www.ensib.ee/?lang=en>

6. What tax relief is provided for families with children and what is the amount of such tax relief?

See para. 2.2.

### 3. Ministry of Health

1. Could you provide information about the main factors, reproductive health support measures and preventive programs, which have promoted the increase of the birth rate in Estonia, for example the social benefit policy etc.

In Estonia we are guided by the notion that the best way to support births is to create an overall family-friendly environment. This is also one of the aims of the action program of the Government of the Republic 2011-2015: *The family and population policy of the government coalition aims to make Estonia a family-friendly state, where people are willing to have and raise children and age with dignity; this would ensure that the Estonian nation is a growing nation. The government coalition considers that developing a caring and family-friendly society is the best way of encouraging well-educated people with roots in Estonia who are working and living abroad to return to their homeland.*

In 2011 Government approved the Strategy for Children and Families 2012-2020<sup>5</sup>. The main objective of the Strategy is to **improve the well-being and quality of living of children and families, thereby promoting the birth of children.**

Five strategic objectives have been set for the achievement of the main objective:

1. the **Estonian child and family policy is knowledge-based and uniform** in order to support the sustainability of society;
2. **Estonia is a country that supports positive parenting** and offers the necessary support to raising children and being a parent in order to improve the quality of living and future of children;
3. the **rights of children are guaranteed and a functional child protection system is created** in order to value each child and the kind of safe environment that supports the development and well-being of children;
4. **Estonia has a system of combined benefits and services that support the adequate economic coping of families** in order to offer constant security to families; and
5. **men and women have equal opportunities for reconciliation of work, family and private life** in order to promote a quality everyday life that meets the needs of each family member.

Concrete measures, which have supported the growth of the birth rate are support for infertility, generous parental benefit and a universal social protection system (universal family benefits, free health care and education for all children). Also, during the economic crisis strong emphasis was put on labour market services that helped to reduce unemployment and support families financial well-being.

2. What is the role of family doctors and midwives in the provision of reproductive (health) services for Estonians?

Family doctors and midwives are entitled to follow normal pregnancy, they can also write out contraceptives. Midwives also follow mothers health after the birth and can make home visits for consultation, but they are not entitled to deliver a birth.

<sup>5</sup> <http://www.sm.ee/eng/for-you/families.html>

3. Is there a target group (like low-income persons, women after delivery, youth), to which the state finances the purchase of contraceptives?

Free contraceptives and pregnancy tests are distributed for youth in youth counseling centers. State also finances the purchase of contraceptives distributed through the Centers for Disease Control and Prevention.

4. Could you please provide information regarding termination of pregnancy in Estonia:

- a. What are the legal provisions on the termination of pregnancy according to the woman's wishes?

A woman's pregnancy may be terminated only at her own request. Nobody may compel or persuade a woman to terminate her pregnancy. Statement of terminating the pregnancy must be made in writing. Pregnancy may be terminated if it has not lasted longer than 11 weeks. More than 11 and up to 21 weeks of pregnancy may be terminated if:

- 1) pregnancy endangers the health of pregnant women;
- 2) the child may be born with serious mental or physical problems;
- 3) pregnant woman has a health problem or disease preventing child rearing;
- 4) pregnant woman is under 15 years old;
- 5) pregnant woman is over 45 years old.

- b. Is there a reflection time before the abortion (for example 72 hours after receiving the referral for the abortion; consultation by a specially trained specialist)?

No, we don't have reflection time before the abortion. For women who wish to terminate their pregnancies before the miscarriage the doctor has to explain the biological and medical termination of pregnancy, and the nature of the associated risks, including the possible complications.

- c. What kind of support is there available for Estonian women to decrease the number of abortions?

Good access to contraceptive measures. Special crises counselling services for pregnant women is also available but the aim of the service is not to directly decrease the number of abortions. The idea of the service is to respect each person's right to personal family planning decisions and meets strict confidentiality and anonymity requirements. The pregnancy crisis counselling service offers psychological support and information on various topics in addition to pregnancy, such as conflict in marriage, how to be a supportive mother or father, infertility issues, domestic violence during pregnancy, and mourning in case of the death of a child or an adult.

5. Could you please provide information regarding the topicality of the question of infertility and the artificial insemination in Estonia:

- a. Is there a registry of infertile couples?

No.

- b. How does the state enumerate and monitor the results of the treatment of infertility, who provides statistical information to international organizations?

- c. How many infertile couples are there in Estonia (registered)?

No information available. Different organisations gather statistics but it doesn't allow to make any adequate conclusions or comparison with other countries. At this point Estonia is dealing with developing the collection of statistical information.

- d. How many times does the state pay for the artificial insemination procedures, what are the principles of financing them?

This is unlimited till woman is until 40 years old, has medical indication for this service and is insured. Health Insurance Fund covers the first three times of the procedure, and after that state takes the responsibility for financing the next.



- e. What are the criteria in Estonia according to which the infertile couples are being chosen, to whom the state finances the artificial insemination procedures?

Women until 40 years old insured under the Health Insurance Act, who have a medical indication for the body field for fertilization and embryo implantation.

- f. What are the results?

During 2009 – 2011 1153 children were born.

- g. Is there a national sperm donor bank in Estonia, how is the number of children from one donor being limited/monitored?

There is no national sperm donor bank in Estonia. The gametes from one donor can be used for six different women in order to conceive a child.

- h. At the beginning in Estonia there were only private establishments, that provided artificial insemination services. When and why did the state clinic develop?

In Estonia all clinics are private. It includes clinics, who provide artificial insemination services.

6. What is the Estonian experience ensuring health education/education about reproductive health in educational institutions (schools)?

Health education is integrated into the school curriculum and the human reproductive health as the subject is in education curriculum. Classes also often visit Youth Advisory Centers which offer separate counseling for boys and girls.

7. In Estonia Youth health centres are successfully functioning. Who finances them? Who provides youth friendly services?

Youth Advisory centers are financed by the Estonian Health Insurance Fund. The service is meant for youth until the age of 25, no health insurance is needed. It is possible to refer to the center alone, with partner or small group of friends. Different consultation is given by midwives and doctors:

- Counseling in order to find a suitable contraceptive
- Verification of pregnancy
- Counseling and treatment of sexually transmitted diseases
- Gynecological examination and taking analyzes
- Counseling on sexuality and close relations
- Counseling on sexual violence
- Counseling on sexual identity
- Counseling for young men
- Psychosexual counseling

8. How is the education of future parents and young parents ensured about child care and safety?

Primary education in parenthood is provided through human studies syllabus. There are also family-schools located at hospitals and clinics that provide parenting and child care skills. Through Council of Gambling Tax the state also supports NGOs providing positive parenting services.

Positive parenting is also one of the five strategic objectives in the Strategy of Children and Families 2012-2020. One of the most important plans is to implement an evidence-based parenting program in Estonia. The first funding for that is requested from the EEA and Norway Grants.

9. What is the Estonian experience in the promotion and development of cooperation with municipalities in the field of childbirths and reproductive health?

No special experiences.

#### 10. Health promotion work organizational model in Estonia:

- a. What are the setters of courses of action and the main implementators of the activities, what is their mutual cooperation (municipalities, state institutions, agencies and NGOs)?

The National Health Plan contains the courses of action and main implementers of activities of health promotion. The general objective of the National Health Plan 2009-2020 is to increase the number of healthy life years by decreasing mortality and morbidity rates. The priorities and the associated instruments for achieving the general strategic objective have been grouped into five thematic areas dealing with the strengthening of social cohesion and equal opportunities, ensuring healthy and secure development for children, development of a health-supportive living, working and learning environment, promoting healthy lifestyle, and securing sustainability of the healthcare system.

The priorities of all these thematic areas are based on fundamental values of the Plan, including human rights, common responsibility for health, equal opportunities and justice, social inclusion, evidence-based knowledge and conformity with international documents. The National Health Plan establishes strategic objectives for maintaining and continued improvement of public health. An important priority for the Government of the Republic is achieving population growth, increasing life expectancy and healthy life years, and these objectives constitute the basis of all targets and actions highlighted in this National Health Plan.

More information: <http://www.sm.ee/eng/activity/health/national-health-plan-2009-2020.html>

- b. How big is the role of the state and government in the implementation of those activities?

The task of the government level is to:

- Develop the strategic development directions for the areas, design the required measures for the implementation of these directions (in cooperation with local governments if necessary), update the legal framework required for implementation and allocate the required resources for the implementation of measures.
- Ensure sufficient distribution of information, enabling conscious choices to reduce health risks
- Improve legislation to motivate social responsibility of local governments and organisations and implementation of the National Health Plan.
- Improve the system of social guarantees to prevent dropping of socially vulnerable groups under the poverty line.
- Develop the capability of counties and local governments to assess and analyse population health and plan and implement health promotion interventions.
- Invest in social initiatives with highest health impact, such as prevention of unemployment, poverty, homelessness and exclusion.
- Develop involvement-based activation programmes for the unemployed and improve the legislative measures that motivate employment.
- Develop the network of health services to meet the needs of vulnerable social groups.
- Support the initiatives and activities of the non-profit sector and volunteers.
- Raise awareness of mental health issues, incl. attention to early identification of depression symptoms and availability of high-quality services.
- The local governments implement the measures within the limits of their competence (incl. creation of the necessary legal bases).
- Ensure sufficient distribution of information, enabling
- conscious choices to reduce health risks.
- Launch health councils and health work groups based on partnership at the local governments, involving vulnerable social groups.

- Integrate the objectives of the National Health Plan with the local government development plans or compile a local government health strategy.
- Develop the local social infrastructure, support the work of cooperation and support networks and special interest associations, and create an environment that fosters initiative and social activity of the people.
- Develop services and measures that improve the quality of life and coping ability.
- Ensure availability of health information to vulnerable social groups, particularly information on their rights as well as the benefits and services designed for them, by using adequate means of communication.

11. In the recent years what are the most significant public health campaigns and their main activities (topics, target groups, types of communication)?

In recent years there have been campaigns on safe sex, reducing alcohol consumption and healthy eating:

“Rubber is sex” – print and tv ad.

<http://kampaania.hiv.ee/kummonseks/ru/>

<http://www.youtube.com/watch?v=vp5BIe2r0Yo>

„Every drink leaves a mark“ – print and tv ad.

[http://www.terviseinfo.ee/truekised?filter\\_catid=0&filter\\_year=0&filter\\_typeid=0&filter\\_pubid=0&filter\\_languageid=0&filter=iga+jook+j%C3%A4tab+j%C3%A4lje&limit=5&filter\\_order=p.publish\\_year&filter\\_order\\_Dir=DESC](http://www.terviseinfo.ee/truekised?filter_catid=0&filter_year=0&filter_typeid=0&filter_pubid=0&filter_languageid=0&filter=iga+jook+j%C3%A4tab+j%C3%A4lje&limit=5&filter_order=p.publish_year&filter_order_Dir=DESC)

<http://www.youtube.com/watch?v=XnZcP2owQbc>

<http://www.youtube.com/watch?v=rb-tDfhaf40>

Different campaigns on healthy eating:

<http://www.toitumine.ee/11320/>

The main public health issues in the coming years concern mental health, nutrition and obesity, prevention of injuries. Target group of children and young people are under the constant attention.

12. Are addictive substances observed in the framework of the demography and family support policy, namely, is additional attention paid to issues related to prophylaxis of addictive substances?

In National Health Plan 2009-2020 there are planned activities for population health prevention through mental health and addictions through injury prevention topics.

National Institute for Health Development is the main organization dealing with prophylaxis of addictive substances, prints are handed out and different workshops organized. Also, there is a module of drug prevention in school curriculum.

13. How minors, who are abusers of narcotic or psychotropic substances, are motivated to start treatment?

Motivation of minors is problematic. Treatment of minors of narcotic or psychotropic substances is regulated with Mental Health Act. The act provides involuntary mental help for this target group.

14. The Latvian Doctors Association has come up with an initiative to prohibit selling of alcoholic drinks to persons up to the age of 21, have there been similar discussions in Estonia?

Ministry of Social Affairs is finalizing a green paper on alcohol policy. During the preparation of the document need for prohibition of selling of alcoholic drinks to persons up to the age of 21 has been discussed and it is mainly supported, but no concrete decisions yet.

#### 15. Is it prohibited to sell electronic cigarettes to minors?

Yes, its prohibited to sell electronic cigarettes to minors.

### 4. Cross-department Coordination Centre

#### 1. What researches had been made before the development of policy for the promotion of childbirths and in which target groups?

The dynamics of birth rate in Estonia is analysed consistently. Also, different studies have been conducted, the latest of them are:

- Leppik, L., Veidemann, B. (2006). The influence of children on pension. Praxis center for policy studies.
- Võrk, A., Karu, M. (2006). Effect of the Estonian parental benefit on labour and reproductive behaviour. Praxis center for policy studies.
- Võrk, A., Paulus, A. (2007). The effect of family benefits on mitigating poverty: analysis based on simulation method. Praxis center for policy studies.
- Reinomägi, A. (2007). The needs and coping of families with many children. Ministry of Social Affairs.
- L. Järviste. (2008). Policy measures that support fatherhood in Estonia and Europe. Ministry of Social Affairs.
- L. Järviste, Kasearu, K., Reinomägi, A. (2008). Marriage and cohabitation: trends, regulations, attitudes. Ministry of Social Affairs.
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#### 2. What factors, expertises, experiences and prognoses were taken into account in the calculation and development of legal provision on the amount of the maternity benefit and child care benefit?

The amount of child care allowance is based on minimum wage (it was before implementing parental benefit) and it was payed at one-half of the minimum wage because of budget limit. By now the link with minimum wage has been lost because child care allowance is payed after parental benefit when most of the parents return to work. The objective of the allowance has also somewhat changed – from providing replacement income to rather covering child care costs.

During the development of the Estonian parental benefit scheme Swedish scheme was taken as an example, so we have many similar elements such as supporting sequential births. At first the political idea was to prolong paying maternity benefit till one year but during designing the benefit right for it was also given to fathers and concurrent working was allowed (with certain rules). That is why the benefit turned out with a different name (not maternity benefit but parental benefit) and different objective - contributing to the balance between working and private life. At the same time the replacement rate stayed the same as for maternity benefit – 100%. However the duration of the payment has been elevated substantially during economic growth.

Four thorough studies on parental benefit have been conducted:

- Võrk, A., Karu, M. (2006). The effect of the Estonian parental benefit on labour and reproductive behaviour. Praxis center for policy studies.
- Võrk, A., Paulus, A. (2007). The effect of family benefits on mitigating poverty: analysis based on simulation method. Praxis center for policy studies.
- Võrk, A., Karu, M., Tiit, E-M. (2009). Parental benefit: use and influence on labour and reproductive behaviour 2004-2007. Praxis center for policy studies.
- Võrk, A., Karu, M. (2009). Family benefits: influence on inequality, birth rate and labour behaviour. Praxis center for policy studies.

### 3. What indicators are applied for the monitoring of childbirths and family policy activities and its results? Are there any other regular surveys additionally to statistical data?

To increase the quality of life of children and families, the “Strategy for Children and Families 2012-2020” was adopted by the Government in October 2011. The strategy sets out several objectives and indicators, for example: total fertility rate; the natural increase; desired number of children and actual number of children; the share of social protection expenditure on families and children in GDP; etc.

One of the sectoral goals under the family and population policy in the State Budget Strategy is „Estonian nation is a growing nation and the well-being and quality of life of children and families have increased”. The Government Action Plan and the State Budget Strategy also set two demographical indicators: the natural increase and the total fertility rate. The State Budget Strategy is available at the Ministry of Finance website: <http://www.fin.ee/doc.php?107743>

Also, the principles and actions of the population policy 2009-2013 was adopted by Government in 2009. The goal of the Estonian population policy is to ensure sustainable development of the people of Estonia.

In addition to the statistical data, several surveys and studies have been conducted in relation to the policy measures or in relation to the certain issue (e.g. Parental benefit impact on the labour and fertility behaviour; Factors influencing fertility in Estonia; Father and parental leave; etc).

### 4. Is the policy based on the women in the fertile age as a joint target group or is the selective target group approach applied, by offering to different age groups of women different set of activities or else for example - particularly support lone mothers?

The policy is addressed to all women, no selections are made. There is only special attention on the sexual health of young, but the percentage of young (under 19 years) mothers has decreased. In statistics lone mothers and large families (families with three and more children) are distinguished and these target groups have also additional family benefits but no other specifications are made.

5. How the necessary financing for the childbirth policy influenced the social budget during the crisis and how problems related to that were solved?

To keep the state budget in balance, the government took a series of necessary steps that reduced the level of the support for children and families. These measures included cutting income tax relief for the first and second child (it was later restored for families with 2 and more children), the compensation of study loans for new applicants who have children under the age of five and the annual school allowance.

In addition, the childcare allowance was suspended for people also receiving maternity, adoption or parental benefit. The decision was influenced by the fact the maternity, adoption and parental benefit depends on the previous year salary, but childcare allowance is a low flat-rate benefit. Care benefits for children under the age of 12 were reduced from 100% to 80% of the salary. Paternity leave benefit was also suspended until the end of 2012.

The selection was made so, that the measures cut would have the least effect on poverty reduction and influence smaller target groups. According to the Estonian government, these measures helped to maintain the (universal) state family benefit system, keep early-years education and care system unchanged and to avoid even more dramatic consequences.

6. What is the opinion of entrepreneurs about childbirth policy? Are they being in a way additionally motivated to support young mothers, families with children?

Studies show that most of the entrepreneurs take it naturally that parents have also other duties than working. Different laws also stipulate the rights of parents, including that it is not allowed to ask about a person's marital status or existence of children during a job interview.

However, it seems that employers in Estonia are not overly employee and family-friendly in their attitudes and knowledge. This is highlighted by the opinions of employees according to which the attitude of employers in Estonia is the most negative with regard to teleworking by parents and allowing fathers of small children to work part-time or take parental leave. Part-time work by mothers or fathers is also seen as complicated (42%), as are the opportunities of fathers of small children to stay on parental leave until the child turns three (40%). Employees also believe there is a noticeable difference in how employers regard the fact whether it is the mother or the father who stays home with a sick child: it is considered much more acceptable in the case of mothers.<sup>6</sup>

The Ministry of Social Affairs together with partners has conducted the contest of the most employee and family-friendly employer but there are no additional relevant motivators yet.

7. What is the situation (data) regarding the reintegration in the labour market after the parental leave?

Statistics (2011) show that the employment rate for women with children between the ages of 0-2 is 29,9 %; between the ages of 3-6 74,1 % and between the ages of 7-14 86,1 %. That shows that mothers turn back to work when children become older.

The study on parental benefit<sup>7</sup> shows that parental benefit has decreased the number of those women who receive salary during the first year of age of the child, especially among high-salaried women. The extension of the payment of parental benefit also lengthened the period of parental leave among women and postponed their return to labour market. At the same time the effect on working isn't long-time. After the period of parental benefit people return to work as quickly as on the years before implementing the scheme. The study also shows that more women

<sup>6</sup> Vainu, V., Järviste, L., Biin, H. (2010). Gender Equality Monitoring, 2009. Survey Report. Publications of the Ministry of Social Affairs 1/2010. Ministry of Social Affairs, European Social Fund.

<sup>7</sup> Võrk, A., Karu, M., Tiit, E-M. (2009). Parental benefit: use and influence on labour and reproductive behaviour 2004-2007. Praxis center for policy studies.

work during the year before birth and receive taxable income. This and other results also indicate that parental benefit has increased women's motivation to work.

#### 8. What are the particular activities which are implemented to reconcile family and work life?

Parental benefit, other vacations with concurrent benefits, and the system of early education and care (see other paragraphs for detailed information) are the main factors. One of the more important trends is to support both parent's participation in family and work life. The Ministry of Social Affairs is careful not to promote part-time work in a way that it effects only women.

At this moment a survey on different vacations and concurrent benefits is being conducted in order to possibly reorganize the system, introduce more flexibility into it and enhance fathers role in family life. Also, paternity leave benefit that was suspended during the economic crisis will be restored beginning from January 2013.

Though financing early education is the responsibility of local governments, in 2008-2011 the state government allocated 44 million euros to build and renovate nursery schools in order to decrease the lack of kindergarten places.

#### 9. How is the policy that promotes childbirths being affected by the commuting (fluctuating migration)? Taking into account the number of Estonians who work in Finland, are there any particular interstate agreements in these matters?

There is no information on how the policy that promotes childbirths is being affected by the commuting. There also aren't any particular interstate agreements between Estonia and Finland as we are already guided by the regulations of the European Parliament and of the Council on the coordination of social security systems (Regulation (EC) No 883/2004 of the European Parliament and of the Council of 29 April 2004 on the coordination of social security systems).

But we do have very tight cooperation with Kela which is the Social Insurance Institution of Finland.

#### 10. How does the set of activities, that has been implemented, affect the birth of the 2<sup>nd</sup> and 3<sup>rd</sup> child? Has it been assessed which activities most of all affect the decisions of a family about the birth of the 2<sup>nd</sup> and 3<sup>rd</sup> child?

A study<sup>8</sup> conducted among large families shows that the main reason that effects having children is love between partners and stability of cohabitation (95% respondents considered it rather or very important), secondly availability of health care (88%), thirdly wider environmental factors, i.e. clean and child-friendly environment, security, existence of housing, stable income. Provision of benefits and services provided by the state or local government came forth.

At the same time the main reason that had prevented families to have children was lack of space and bad living conditions.

Study<sup>9</sup> shows that parental benefit has motivated high-salaried women to give birth to second and third child. The effect isn't so big among lower income groups. Parental benefit has also influenced families to plan sequential births – the number of those sequential births where the gap between births is 1,5 to 2,5 years has increased.

#### 11. What are the main conclusions from the assessment of the situation regarding the introduction of mothers' pensions? Could you please briefly describe the conception?

<sup>8</sup> Reinomägi, A. (2007). The needs and coping of families with many children. Ministry of Social Affairs.

<sup>9</sup> Võrk, A., Karu, M., Tiit, E-M. (2009). Parental benefit: use and influence on labour and reproductive behaviour 2004-2007. Praxis center for policy studies.

What are the expected results, by introducing mothers' pensions, what are the expected expenses from the state budget?

### **Parent pension**

Since workers with career breaks due to childcare are expected to receive lower replacement rates in the future the government has prepared changes to the State Pension Insurance Act and to Funded Pensions Act.

The principals are:

1. To one parent raising a child born 1/1/2013 and later is paid 4% of the social tax on states average taxable wages to the second pension pillar for 3 years (except for a parent's working time).
2. To one parent whose child is born 1/1/1991 – 31/12/2012 the pension supplement is paid for two annual factors.
3. From the 1<sup>st</sup> of January 2015 the pension supplement for one annual factor is paid to one parent of a child born before 1/1/2013.

To sum up one parent who has raised a child born on the 1<sup>st</sup> of January 1991 or later is given three years of annual factors as if the parent had worked for states average wage for that time. Also one annual factor compliant to working one year with states average wage is given to one parent raising a child born before 1/1/1991. According to current State Pension Insurance Act the latter are already given two years of pensionable service for a child born before 1/1/1991.

According to the Praxis center for policy studies' research "Sustainable financing possibilities for the Estonian Social Security System" the gap of average gross replacement rate of pensions between men and women will increase to the disadvantage of women. In 2060 the gross replacement rate of pensions for men is 40% and for women 32%. That is mostly due to the reason that women's wages are smaller than men's (about 27%) and large part of pension depends on one's social tax contribution to the pension system. But it is also because mainly women stay at home with very small children and are not able to contribute to the pension system.

The contribution for all parents, regardless of the birth year of their children, is necessary to equalize the child-care-connected pension rights of different generations.

Cost of the scheme is financed through State Budget. The contribution to the second pillar is 2,7 million euros and the supplement of the pension 0,1 million euros in 2013. Cost of the supplement of the pension for children born before 2013 is in 2015 22,7 million euros.

## **5. Latvian Union of Large Family Associations**

1. What are the current and future activities that have contributed and will contribute to the increase of childbirths in Estonia?

See para. 3.1. and 4.10.

It is difficult to assess which activities of the Estonian demographical policy are the most important and effective.

The role of family policy in increasing the birth rate is an important one, as it has to create a suitable environment or an environment that supports raising children, and by doing this helps achieve the desired increase in the number of births. This approach is supported by surveys, which indicate that a broader policy<sup>10</sup> is the one that may influence families for the longer term. For example, an increasing number of people in most European countries are convinced that

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<sup>10</sup> Pursuant to the Principles and Actions of Estonian Population Policy 2009-2013, a narrower meaning can be attributed to the family policy measures used by the state to improve the economic well-being of children and families with children during the period when children are being raised or fostered: family allowances, parental leaves, organisation of childcare. In a broader sense, all national policy areas that influence the well-being of families with children may be treated as child and family policies.



gender equality and the measures that help with the reconciliation of work and family life and have a broader impact on the quality of living of families have a positive impact on the birth rate in the long run<sup>11</sup>. The European Commission also points out that the employment of women and the number of births are both higher in countries that have created better conditions for childcare, parental leave and a flexible organisation of work.<sup>12</sup>

The birth rate is also influenced by many other areas and the confluence of various measures, which means that the achievement of narrow family policy goals is not sufficient to guarantee the well-being of families. Families are also influenced by the taxation system and pension schemes, not to mention health care, housing and labour market policies and anti-discrimination policies. This means that the processes of increasing the birth rate take a long time and are difficult to influence.<sup>13</sup>

Studies conducted in Estonia confirm the latter. Today the possible birth rate is determined by the desired number of children. In Estonia it has traditionally been at least two children and a study conducted in 2009 shows that youth aged 14- 17 wish to have an average of 2,27 children.<sup>14</sup>

In reality subjective reasons like age, number of children they already have and previous experience in raising children, the quality of partnership relations, etc., and also overall security and the norms and attitudes prevailing in society are decisive in having more children. So, services like pregnancy crisis counseling, family therapy, family mediation and parenting support are helpful in realization of desired births.

The RISC Value Orientations Survey carried out in Estonia indicates that although people primarily consider their personal options when they have children, they do still expect the state to help and support those who raise children. Only one-tenth of people in Estonia expect to be fully independent.<sup>15</sup>

Studies also show that possible parents respond to economic and social conditions. For example in those counties where there was higher unemployment rate there was also low birth rate.<sup>16</sup> It is also visible that the positive changes in Estonian economy till 2007 influenced demographic behaviour - in conjunction with the rise in general living standard, the financial status of families improved and the birth rate increased.<sup>17</sup>

## 2. What state support is provided to large families in Estonia and to the national Estonian large family association “Eesti Lasterikaste Perede Liit”, so that it is capable of uniting 18 Estonian large family nongovernmental organizations encompassing all the country?

See para. 1.1

The national Estonian large family association “Eesti Lasterikaste Perede Liit” is mainly supported through Council of Gambling Tax, they also receive support from different charity initiatives.

## 6. Mr. Ilmars Mezs “Nakotnes Fonds”:

<sup>11</sup> Ronsen, M., Skrede, K. (2006). Nordic fertility patterns: compatible with gender equality? Politicizing parenthood in Scandinavia: gender relations in welfare states, p. 53. Editors Ellingsgaeter, Leira. The Policy Press, Bristol.

<sup>12</sup> Report from the Commission to the Council, the European Parliament, the Economic and Social Committee and the Committee of the Regions. Equality of Women and Men – 2010.

<sup>13</sup> See Kohler, Billari & Ortega, 2006, quoted according to Bloom & Sousa-Poza, 2010. Bloom, D. E., Sousa-Poza, A. (2010). Introduction to Special Issue of the European Journal of Population: Economic Consequences of Low Fertility in Europe. Eur J Population (2010) 26:127–139, 1-13. Springer Science+Business Media B.V. <http://www.springerlink.com/content/m62p7u32469p4m06/fulltext.pdf>.

<sup>14</sup> Kasearu, K., Rootalu, K. (2011). Value of a child and intergenerational relations. University of Tartu.

<sup>15</sup> TNS Emor. Children and Estonian Society: RISC Value Orientations Survey: Annex to the Country Report on Estonia, (2006). Ministry of Social Affairs.

<sup>16</sup> Tiit, E.-M. (2000). The dynamics of birth rate in Estonia. Influences and prognosis in the light of population processes in Europe. University of Tartu.

<sup>17</sup> Ainsaar, M., Maripuu, L. (2008). Estonian population 2007-2020. Office of the Minister of Population.

1. Which activities of the Estonian demographical policy are most important and most effective?

See para. 5.1.

2. What are the Estonian governmental plans for the development of the Estonian demographical policy in short and long terms?

General ideas of demographical policy are pointed out in the document Principles and Actions of Estonian Population Policy 2009-2013. There are no plans to renew the document as the plans in family policy are pointed out in the Strategy of Children and Families 2012-2020, plans in health in National Health Plan and plans in migration in different regulations.

The main subject at this point in family policy is child poverty. The government is preparing different changes in child benefits:

- Universal child allowance will increase for families with 3 or more children – from the 1<sup>st</sup> of July 2013 the allowance will be 76,72 euros and from 2015 95,9 euros.
- Child benefits will increase for families with one or two children if they live in relative poverty – from the 1<sup>st</sup> of July 2013 the allowance will be 28,77 euros and from 2015 38,36 euros.
- Paternity leave benefit will be restored from the 1<sup>st</sup> of January 2013.
- Childbirth allowance for triplets will increase up to 3000 euros.

Also, a disability insurance reform is being conducted in order to increase the number of people who are able to work. Decreasing unemployment is continually one of the priorities.

The government has also made a resolution that from the beginning of 2017 pensions will increase gradually.

The Ministry of Social Affairs is also preparing a green paper of family benefits and services. The objective of the paper is to find the most cost-effective model (that includes different benefits, allowances, the system of alimonys, tax exemption, early education and care, etc.) in fighting poverty. A study that analyzes more than 20 scenarios combining both, benefits and services, is being conducted.

It is fair to say that lack of kindergarten places is one of the biggest challenges in Estonian family policy.

3. Will Estonian government try to reduce emigration and facilitate return migration of recent labour emigrants from the EU?

There are not many concrete measures with the view of reducing emigration and facilitating return migration of recent labour emigrants from the EU. Mainly the state seeks to increase the overall well-being and quality of life in Estonia.

According to Social Welfare Act an Estonian citizen who has settled in Estonia from a foreign state, a person of Estonian origin and the spouse, children and parents who have settled in Estonia together with him or her and who have attained the pensionable age have the right to receive a monthly social benefit at the national pension rate if the monthly income of the person is below the national pension rate.

In 2010 the Estonian Chamber of Commerce and Industry started a project *Talendid koju* (Talents home) which aim was to bring together Estonian employers and young people who have gone abroad to study or work in order to promote their return. The patron of the event is The President of Estonia Mr. Toomas Hendrik Ilves.

About 500 people and a 100 employers have joined with the web environment developed within the project. There are 133 jobs offered and people have applied for a job 154 times. 20 000 visits to the web environment from 92 different countries have been made.

A web-based study conducted before the project showed that among 400 respondents from 33 different countries 11% attended to stay abroad, 65% were willing to consider return if an attractive offering was made.

## 7. Ms. Sanita Lorence, Free Trade Union Confederation of Latvia

1. How does the state support system for employed parents operate in Estonia – accessibility of kindergartens, health care, (tax) reliefs for dependent persons, additional vocations etc.?

### Early education and care

In Estonia the childcare combines both the nursery schools/kindergartens, which are part of the pre-educational system (stipulated in the Pre-School Child Institutions Act, administrative field of the Ministry of Education and Research) and private childcare (including childminders) (stipulated in Social Welfare Act, administrative field of the Ministry of Social Affairs). 93% of kindergartens are municipal authorities and 7% private. In academic year 2011-2012 95% of children between the ages of 1,5 and 3 participated in early education.

In accordance to the Pre-School Child Institutions Act local governments are obliged to secure a place in a municipal childcare facility to all children at the age between 1,5 – 7 years of age who live in their catchment areas if this is requested by their parents. In reality there is a lack of kindergarten places and local governments aren't always able to observe the law– in 33% of municipalities there were queues and they concern about 5900 children (01.01.2012 data). The problem has somewhat improved, the Pre-School Child Institutions Act is also being changed to give more flexibility to local governments and the state is actively looking for additional financing.

If the family doesn't receive a place in a municipal nursery/kindergarten, then many local governments pay the family extra subsidies so the families can receive the service from a private child care service provider. The procedures for and conditions of financing childcare services differ from one local government to another. Municipalities also decide upon the child care (early education) fee paid by parent. The fee may not exceed 20% of the minimum wage. According to the Statistics Estonia, average fee paid by the households per child in 2010 was 30,49 EUR per month. Kindergartens meet the needs of a parent working 40 hours per week. The institutions are open 10-12 hours per weekday and provide children 3 meals per day. The child care institution can decide upon the amount paid by parent for food costs including making individual decisions concerning children from low-income families.

Accordance to the Social Welfare Act the state covers child-care service fees for children with a severe or profound disability aged 0-18 in a fixed amount (371 EUR per year per child). Also, the child care fee (excluding food costs) can be deducted from the parent's taxable income.

For unemployed persons who are not able to attend labor services or start working because of maintenance obligation (including taking care of children under 7 years of age) the state (through *Töötukassa*) reimburses (in a fixed amount) the fee for the maintenance service during the participation in labour service or during the first three months of working.

There are no employer provided childcare facilities in Estonia.

### Leave to take care of a sick family member

Based upon the Health Insurance Act, on the basis of the certificate of incapacity for work the Estonian Health Insurance Fund pays the benefit for temporary incapacity for work to the

insured person, who loses income subject to individually registered social tax due to a temporary relief from the performance of duties of employment.

The benefits for temporary incapacity for work include: sickness benefit, care benefit, maternity benefit, adoption benefit.

Care benefit is paid to an insured person in respect of the following insured events:

- 1) nursing a child under 12 years of age;
- 2) nursing a family member who is ill at home;
- 3) caring for a child under 3 years of age or for a disabled child under 16 years of age when the person caring for the child is himself or herself ill or is receiving obstetrical care.

The maternity benefit, the care benefit and the adoption benefit shall become payable starting from the first day of relief from the performance of duties of employment.

The Health Insurance Fund pays the benefit for temporary incapacity for work to the insured for one calendar day on the basis of the average income per one calendar day as follows:

80% in the case nursing a child under 12 years of age;

80% in the case of out-patient treatment, nursing a sick family member at home;

80% in the case of caring for a disabled child under 16 years of age or under 3 years, if the curator is sick or in labor.

An insured person has the right to receive care benefit on the basis of a certificate for care leave for up to 14 calendar days successively in the event of nursing a child under 12 years of age or for up to 7 calendar days successively in the event of nursing another family member at home.

On the basis of a certificate for care leave, an insured person has the right to receive care benefit for up to ten calendar days in the event of caring for a child under 3 years of age or for a disabled child under 16 years of age if the person caring for the child is himself or herself ill or is receiving obstetrical care.

### **Specific measures to accommodate the needs of pregnant and breastfeeding women**

Occupational health and safety requirements for the work of pregnant and breastfeeding women have been established by a regulation of the Government of the Republic.

According to the Employment Contracts Act § 18 employers must establish appropriate working and recreational conditions for pregnant employees, those who have recently given birth and those who are breastfeeding.

Pregnant employees can temporarily request that their employer provide them with work appropriate to their condition. If an employer cannot provide an employee with work appropriate to their condition, the employee can temporarily refuse to fulfil their duties. The employee is then compensated by the Health Insurance Fund.

Employers are obliged to provide pregnant employees with free time for pre-natal check-ups. Such free time is included in working time and employees have the right to be paid for this time.

Pregnant employees and employees who are raising children of up to 3 years of age can only be sent on business trips with their consent.

If an employer improves the working conditions while an employee is on pregnancy or maternity leave, this employee are entitled to these improved conditions upon their return.

Breastfeeding mothers are entitled to additional breaks in order to feed their children until the children reach the age of 18 months. Additional breaks can be taken by such employees every 3 hours. The duration of such breaks must be at least 30 minutes. The duration of a break granted for a mother to feed two or more children up to 18 months of age must be at least 1 hour.

Breaks for feeding children are classed as working time and are paid at the rate of average wages from the state budget. This benefit is not paid to mothers who are receiving a parental benefit for taking care of their children. Applications for such benefits are made by employers to the Social Insurance Board.

### **Right to request annual holidays at a time that suits them:**

- women, immediately prior to and after pregnancy and maternity leave or immediately after parental leave;
- men, immediately after parental leave or during the pregnancy and maternity leave of their partner.

**Employers cannot cancel employment contracts because:**

- an employee is pregnant or is entitled to pregnancy and maternity leave; or
- an employee is fulfilling family obligations (e.g. raising a child or caring for their parents).

The Employment Contracts Act states that the cancellation of the employment contract of an employee who is pregnant or raising a child younger than 3 years of age is against the law. The employer must prove that there was a legal basis for the cancellation of the contract (e.g. a breach of duties on the part of the employee).

2. Do you sense positive experience in this aspect, do collective agreements have any impact?

It is hard to give adequate information on whether collective agreements have here any impact as they are usually made in such economic sectors that don't often enable flexible working arrangements.

Also, Estonian legislation stresses primarily the parties' agreement.

In general the attitudes of employers concerning employee and family-friendliness have improved.

3. What is the scale of contribution that the Estonian parents need to provide for their children for educational (school) needs– purchase of books and other teaching aids?

The Estonian Chamber of Enterprising Youth calculated this year that the minimum cost of sending a child to school is 120 euros, this doesn't include clothes and sports accessories.

Estonian parents do not have to pay for their child's text- and workbooks in elementary school. According to the Elementary and Gymnasium Law school has to provide free of charge at least those textbooks, workbooks, worksheets, etc. that are needed to cover the school curriculum in elementary school and at least those textbooks that are needed to cover the school curriculum in gymnasium. School is not allowed to ask purchasing or cofinancing the educational needs from parents. The financing is a responsibility of the school manager, i.e. usually local government who receives state support for that each year.

4. Whether and how demographic issues are solved particularly in the regions – the furthest rural regions (accessibility of schools, health care, employment of parents etc.)?

The Estonian Ministry of the Interior is preparing a new strategy for regional development till 2020. One of the most important topics is the low and different administrative capacity of local governments, there are 226 local governments in Estonia.

Uniform availability of quality services is an issue. The Ministry of Education and Research is renewing the Elementary School and Gymnasium Law, one of the main directions of the law is to ensure the availability of elementary education as close to student's home as possible.

The Ministry of Social Affairs is planning to establish regional centers for providing services for children and families. The aim of the centers is to unify the quality of services and to give additional support to local level specialists, especially social and child protection workers. Together with the centers a system of consultation teams (consisting of experts from different fields – education, social welfare, mental health) will be established.

There are also similar plans in the health sector, as there is a program for establishing child mental health center and corresponding networks in four Estonian regions. This will hopefully alleviate the problem with the availability of child psychiatric service. In order to promote the

family doctors' practice also in rural regions a start-up capital (15 000 euros) is guaranteed by the state.

With the funding from ESF there are regional centers for people who have difficulties to enter labour market; debt counseling, psychological counseling, family counseling and social counseling is offered. Also, the Estonian Insurance Fond for Unemployment offers mobile customer service.