

Health, Labour and Social Life in Estonia 2000-2008



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Ministry of Social Affairs

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Tallinn 2009

Explanation of symbols

- ... no data available or no reliable data available to publish
- .. term not applicable
- magnitude nil

OECD Organisation for Economic Co-operation and Development
GDP Gross Domestic Product

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Dear Readers,

You have in your hand an overview of the Estonian social sphere in 2000–2008. This collection enables us to assess our achievements and areas for further changes in order to provide the support and services that are needed by our people today and tomorrow.

Estonia's current main problem is the same as everywhere in Europe – rapid growth of unemployment. 2008 was a year of major changes in the labour market. From the middle of the year, the impact of the global economic and financial crisis reached the labour market. Unemployment almost doubled in only six months. The construction sector and manufacturing were hit hardest by the recession and the majority of those who lost their jobs were men.

The economic recession and demographic situation create a relatively new situation for the social sphere. We are facing serious challenges. The share of persons who receive a pension has increased in society, reaching 28.5 per cent at the beginning of 2009. The expenditure on pensions accounted for 7.2% of GDP, the highest level of all time. Statistics also indicate that people have started to visit doctors with increasing frequency. The need for care services is on the rise, because the number of seniors is growing. There have been significant developments in services for the elderly and disabled persons in recent years. Local governments have developed new services, such as the personal assistant and support person services as the two major examples. Home care service is offered by local governments to seniors who are no longer able to cope with their daily tasks. Those who need even more care are placed in care homes. The number of persons in care homes has increased continuously, with over 200 additions each year. A shortage of care places is felt everywhere in Estonia. We are working to develop the infrastructure of nursing and care services in all counties with the assistance from the European Regional Development Fund.

A good news is that the birth rate has been slowly rising in Estonia in recent years. More families are deciding to have a second, third or even fourth child. We have been supporting families who want to have children with parental benefit for five years now. It is gratifying to see the increasing share of fathers among the recipients of parental benefit – we believe that it is a positive effect of the legislative amendment of 2007. Such past choices were based on the same kind of figures and analyses that you can find in this collection. I hope that this information will help us to make good decisions for the future of Estonia.

Hanno Pevkur
Minister of Social Affairs

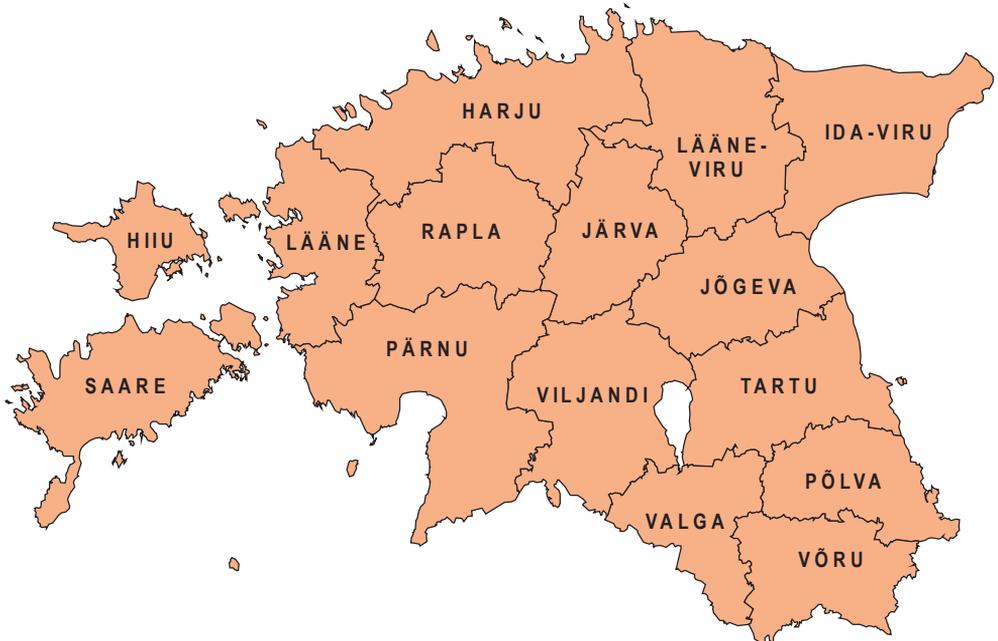
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General data

Official name of the state	The Republic of Estonia
System of government	Parliamentary republic
Capital	Tallinn
Currency unit	Eesti kroon (EEK) 1 EUR = 15,6466 EEK
Administrative division	Counties 15 Local governments 227 cities and towns 33 rural municipalities 194
Population as of 1 January 2009	1 340 415
Population density (inhabitants per /km ²)	30
Total area (km ²)	45 227

Administrative division of Estonian territory



Population

The population of Estonia is characterised by two very important tendencies, which are already now influencing the society of Estonia and become especially noticeable in a few years. First, the decrease of population, which started in the 1990s, continues and, second, the population is ageing.

By the beginning of 2009, the Estonian population had decreased to 1.34 million, i.e., approximately 32,000 persons fewer than in 2000. In particular, the decrease was noticeable in the number of children and young people under 18 years of age, while the share of the age group 65 and older has grown in the population. In 2008, the old-age dependency rate, or the percentage of people aged 65 or older to working-age people (aged 15–64), was 25.3% and this indicator has continuously increased from 2000. Ageing of the population also has a very strong effect on the labour market. Considering the proportion of people aged 5–14 and people aged 55–64 in the population, estimably more people will leave the labour market than enter it in the forthcoming decade (it means that labour market reprisal index is less than 1).

A total of 16,028 children were born in Estonia in 2008. Although the number of births has continuously increased from 2000, the average number of births per woman during her lifetime, or total fertility rate, is still under 2 children. The population recovery limit is considered to be approximately two children per woman during her lifetime (total fertility rate is 2.1).

The natural increase of Estonia's population continues to be negative: there were nearly 700 more deaths than births in 2008. However, the negative rate has decreased significantly in the period 2000–2008; in other words, the gap between deaths and births has been reduced year by year. This change is conditioned both by decrease in deaths and increase in births.

Mortality has decreased and the average life expectancy has increased both for men and women. Still, the life expectancy of women at birth is over ten years higher than the life expectancy of men. While in 2008, the life expectancy of Estonian women at birth was 79.2 years, for men it was only 68.6 years. In addition, the mortality of men aged below 65 is almost three times higher than the mortality of women.

Increase of births that started in 2000 is being influenced by postponement of births in the 1990s. In 2008, the average age of women delivering births was 28.8 and the average age of women delivering birth for the first time was 25.8 years, whereas both figures have increased in comparison to the year 2000. Changes in the average age of women giving birth are also reflected in the age structure of women giving birth. While in 2000, as many as 40.9% of all children were born to mothers under 25 years of age, in 2008, the corresponding figure was 28.8%, i.e., less than a third of the children. At the same time, in case of live births, the percen-

tage of mothers aged 30–39 has increased from 26.4% in 2000 to 37.1% in 2008. Most children are still born to women aged 25–29, constituting 31.6% of all children in 2008. Although in 2008, 52.5 abortions were made per 100 live births per year, the number of abortions in the period 2000–2008 has significantly decreased.

Another characteristic trend in birth and partnership indicators is the fact that a decreasing number of children are born to married parents: while 45.5% of the children were born to parents in a registered marriage in 2000, this figure dropped to 40.9% of the children in 2008. The majority of the children, both firstborns and second-borns, were born, in 2008, to parents in unregistered co-habitation – only 30.8% of firstborns and 47.2% of second-borns were born to married parents. The percentage of births to single mothers has decreased from 17.7% in 2000 to 7.4% in 2008.

Although the total number and average size of households have been relatively stable from 2000 to 2007, the structure and membership of households have changed. First and foremost, the number of households with children has decreased and on that account, the number of households composed of two childless grown-ups has increased.

Table 1. **Population by age group and sex 2000, 2004 and 2006–2009**
(as at 1 January)

Age group and sex	2000	2004	2006	2007	2008	2009
Total	1,372,071	1,351,069	1,344,684	1,342,409	1,340,935	1,340,415
male, %	46.1	46.1	46.1	46.1	46.0	46.1
female, %	53.9	53.9	53.9	53.9	54.0	53.9
0–14	250,503	215,718	202,429	199,744	198,703	200,364
male, %	51.3	51.4	51.4	51.4	51.5	51.4
female, %	48.7	48.6	48.6	48.6	48.5	48.6
15–17	63,499	64,815	63,247	58,771	54,000	48,353
male, %	50.8	51.2	51.3	51.4	51.3	51.3
female, %	49.2	48.8	48.7	48.6	48.7	48.7
18–64	852,439	851,501	853,686	854,525	857,590	862,116
male, %	47.5	47.7	47.8	47.9	47.9	48.0
female, %	52.5	52.3	52.2	52.1	52.1	52.0
65+	205,189	218,658	225,066	229,158	230,469	229,437
male, %	32.6	33.1	33.2	33.2	33.1	33.0
female, %	67.4	66.9	66.8	66.8	66.9	67.0
Age unknown	441	377	256	211	173	145
male, %	60.1	61.5	52.7	47.4	41.6	42.1
female, %	39.9	38.5	47.3	52.6	58.4	57.9

Source: Statistics Estonia

Table 2. **Population of counties by age group, 2009**
(as at 1 January)

County	Total ¹	Age group, percent		
		0–14	15–64	65+
All Estonia	1,340,415	14.9	67.9	17.1
Harju County	524,938	15.0	68.8	16.2
Tallinn	398,594	14.6	68.5	16.8
Hiiu County	10,097	14.5	70.0	15.6
Ida-Viru County	169,688	13.3	68.6	18.1
Jõgeva County	36,780	14.9	67.0	18.1
Järva County	36,130	15.2	67.9	16.9
Lääne County	27,477	14.5	67.9	17.5
Lääne-Viru County	67,151	15.5	67.3	17.2
Põlva County	31,002	14.8	66.4	18.8
Pärnu County	88,466	14.8	66.7	18.5
Rapla County	36,678	15.5	68.4	16.1
Saare County	34,723	14.4	67.4	18.3
Tartu County	149,605	16.4	67.2	16.4
Valga County	34,135	15.5	65.3	19.2
Viljandi County	55,657	14.9	66.8	18.4
Võru County	37,888	14.7	65.9	19.4

¹ Incl. residents with age unknown.

Source: Statistics Estonia

Table 3. Main demographic indicators, 2000, 2004 and 2006–2008

Indicator	2000	2004	2006	2007	2008
Total live births	13,067	13,992	14,877	15,775	16,028
Marital births, %	45.5	42.0	41.8	41.9	40.9
Live births per 1,000 women in aged 15–49	38.1	40.8	43.7	46.6	47.8
Crude birth rate (per 1,000 inhabitants)	9.5	10.4	11.1	11.8	12.0
Total fertility rate ¹	1.4	1.5	1.6	1.6	1.7
Total number of deaths	18,403	17,685	17,316	17,409	16,675
Crude death rate (per 1,000 inhabitants)	13.4	13.1	12.9	13.0	12.4
Infant mortality rate ²	8.4	6.4	4.4	5.0	5.0
Mortality rate of 0–64-year-olds (per 1,000 inhabitants)	5.2	4.8	4.6	4.5	4.1
male	7.6	7.2	6.7	6.8	6.1
female	3.0	2.5	2.5	2.3	2.2
Mortality rate of 65-year-olds and older (per 1,000 inhabitants)	58.7	55.4	53.8	53.8	52.7
male	71.0	69.3	68.9	69.5	67.4
female	52.8	48.5	46.3	46.1	45.4
Natural increase	-5,336	-3,693	-2,439	-1,634	-647
Rate of natural increase (per 1,000 inhabitants)	-3.9	-2.7	-1.8	-1.2	-0.5
Life expectancy at birth	70.6	72.0	73.0	73.0	74.1
male	65.1	66.3	67.4	67.1	68.6
female	76.0	77.8	78.5	78.7	79.2
Dependency ratio³ (beginning of year)	49.7	47.6	46.9	47.4	47.5
Labour market reprisal index⁴ (beginning of year)	1.2	1.0	0.9	0.9	0.8
Old-age dependency rate⁵ (beginning of year)	22.4	23.9	24.5	25.1	25.3

¹ The average number of live births per woman during her lifetime, based on age-specific fertility rates of a current year. Recovery limit is considered to be total fertility rate 2.1.

² Deaths under one year of age per 1,000 live births.

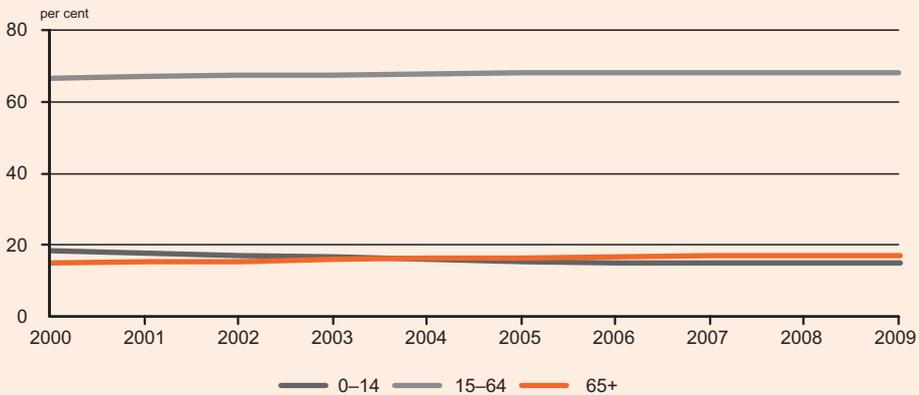
³ Proportions of inhabitants aged 0–14 and 65 and older to those aged 15–64.

⁴ Proportion of inhabitants aged 5–14 to those aged 55–64, which shows the ratio of people entering the labour market and people leaving the labour market in the coming decade. If the index is higher than 1, then the number of people entering the labour market is higher than the number of people leaving.

⁵ Proportion of inhabitants aged 65 and older to those aged 15–64.

Source: Statistics Estonia

Figure 1. **Population by age, 2000–2009**
(as at 1 January)



Source: Statistics Estonia

Table 4. **Number and composition of households, 2000, 2004 and 2006–2007** (annual average)

Household type	2000	2004	2006	2007
Total	575,300	564,700	573,400	583,700
Single-member household	179,600	178,700	180,300	195,200
Households with two or more members	395,700	386,000	393,100	388,500
two adults ¹	111,400	113,700	124,400	118,600
single adult with a child (children) ²	26,200	19,200	19,100	15,100
two adults ¹ with children ²	90,500	79,600	72,400	81,400
1 child	44,500	40,200	39,100	45,100
2 children	35,800	32,100	26,200	28,300
3 or more children	10,200	7,400	7,100	8,000
other households	167,500	173,400	177,300	173,400
Average size of households (members)	2.37	2.37	2.33	2.28

¹ Both common-law and married couples.

² Child/children aged 0–15.

Source: Statistics Estonia

Table 5. **Average age of birthgiver, 2000, 2004 and 2006–2008** (years)

Indicator	2000	2004	2006	2007	2008
Average age of woman at delivery	27.0	27.9	28.4	28.5	28.8
Average age of woman at first delivery	24.0	25.0	25.4	25.4	25.8

Source: Statistics Estonia

Table 6. Live births by birth order and marital status, 2000, 2004 and 2006–2008

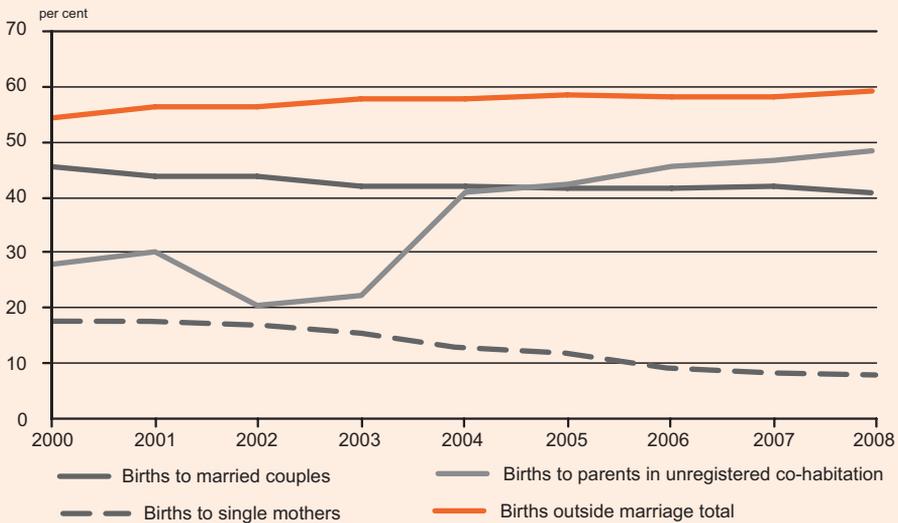
	2000	2004	2006	2007	2008
Number of live births¹	13,067	13,992	14,877	15,775	16,028
First child, %	48.4	49.3	48.2	47.7	47.5
marital births ² , %	34.7	31.0	30.6	31.1	30.8
Second child, %	32.1	32.3	34.4	34.3	34.5
marital births ² , %	55.1	50.5	49.2	49.8	47.2
Third child, %	12.1	12.3	12.1	12.7	12.7
marital births ² , %	58.0	57.4	59.8	55.0	55.8
Fourth or subsequent child, %	7.4	6.1	5.3	5.3	5.4
marital births ² , %	55.2	55.3	53.4	57.1	55.3

¹ Includes rare cases where birth order or mother's age is unknown.

² Proportion of children in that birth order category to total number of live births.

Source: Statistics Estonia

Figure 2. Percentage of marital and non-marital births¹ in total live births, 2000–2008



¹ Births outside marriage include children born to parents in unregistered co-habitation and to single mothers (father unknown, i.e., the birth registration does not include details of the father).

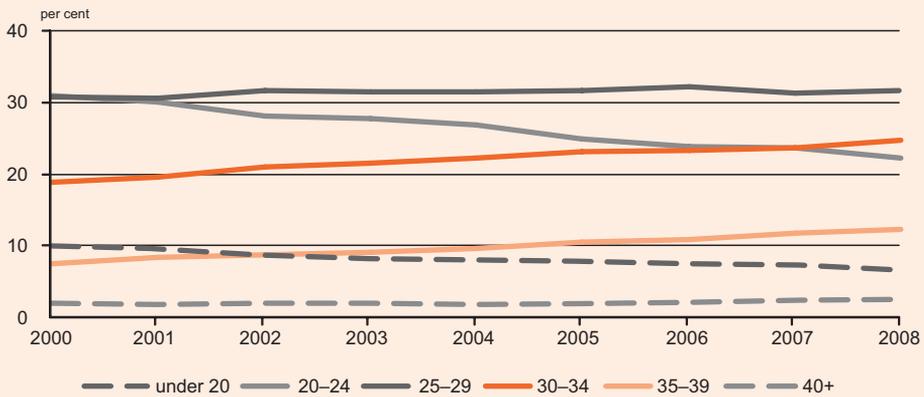
Source: Statistics Estonia

Table 7. Percentage of live births by mother's age, 2000, 2004 and 2006–2008
(per cent)

Age group	2000	2004	2006	2007	2008
Under 20	10.0	8.0	7.5	7.4	6.5
20–24	30.9	26.8	23.9	23.6	22.2
25–29	30.7	31.5	32.3	31.3	31.6
30–34	18.9	22.2	23.3	23.7	24.7
35–39	7.5	9.6	10.9	11.7	12.4
40+	2.0	1.9	2.2	2.3	2.6

Source: Statistics Estonia

Figure 3. Percentage of live births by mother's age, 2000–2008



Source: Statistics Estonia

Table 8. **Abortions, induced abortions and women having abortion by age, 2000, 2004 and 2006–2008**

Indicator	2000	2004	2006	2007	2008
Total number of abortions	15,331	12,625	11,625	11,123	10,699
abortions per 1,000 women aged 15–49	44.7	36.8	34.1	32.9	31.9
abortions per 100 live births	117.3	90.2	78.1	70.5	66.8
Total number of legitimately induced abortions¹	12,743	10,074	9,378	8,883	8,409
abortions per 1,000 women aged 15–49	37.2	29.4	27.5	26.2	25.1
abortions per 100 live births	97.5	72.0	63.0	56.3	52.5
Women having abortions, by age², %					
under 20	13.0	14.4	14.1	14.6	13.0
20–24	24.1	24.4	24.6	24.1	23.7
25–29	23.1	22.2	21.7	21.4	21.3
30–34	19.2	19.1	18.1	18.3	19.6
35–39	13.6	13.8	15.3	15.0	15.8
40+	6.9	6.1	6.2	6.6	6.6

¹ The legitimate termination of pregnancy at the pregnant woman's wish and on medical indications.

² Percentage in all legitimately induced abortions.

Source: Statistics Estonia

Living standard and poverty

Rapid growth of Estonia's economy until 2007 improved the quality of life of Estonian people, giving a major boost to the standard of living. The effects of the cataclysmic year 2008 will be properly reflected in statistical indicators only in 2009. Consequently, the signs of economic recession are not yet noticeable in the data of the Household Budget Survey, which estimated that the average monthly disposable income of a household member in 2007 was 5,286 EEK and expenses were 4,358 EEK. The disposable income per household member increased almost by two and half times and expenses increased by nearly two times from 2000 to 2007¹. This rapid growth of income created for the households an illusory sense of confidence in their ability to meet their loan obligations and many households opted for the fastest route to improve their living conditions, i.e., borrowing. Extensive investments in housing and high loan burdens increased the savings of household members (investment and loan repayments are considered as saving) and this reduced the rate of increase of average expenses.

The main income sources in Estonia are paid employment and old-age pension (2/3 and 1/6 of a household member's income, respectively), constituting almost 87% of average disposable income of a household member in 2007. In 2008, the average gross wages for normal working hours of full-time work were calculated at 12,912 EEK per month per a salary receiver, and the average old-age pension was 4,356 EEK per month per an old-age pension receiver. In comparison to the year 2000, by 2008, gross wages had increased 2.63 times and average old-age pension 2.84 times. Consequently, the income from the main sources increased considerably faster than consumer prices (increase 1.46 times). The growth rate in 2008 was particularly high in the case of the monthly old-age pension, which increased by almost one quarter (23%) in comparison to the previous year.

Estonia has managed to adhere to the minimum standard of the European Code of Social Security, pursuant to which, average pension of a pensioner with 30 years of pensionable service should form at least 40% of average gross wages of an unskilled male production worker. In 2006, average pension of a pensioner with 30 years of pensionable service formed 44% of average gross wages of an unskilled male production worker. Compared to the situation a year ago, the position has increased by one percentage point: the indicator was at 43% in 2005.

The average income of a household member and, therefore, also consumption opportunities are largely dependent on the household type, because the proportion of dependants and

¹ In 2008, Statistics Estonia did not conduct the Household Budget Survey and, consequently, there are no monthly estimates of income and expenses to continue the time series.

income earners in a household is tightly connected to it. At the same time, average income of household members is very significantly affected by the income level of the income earner(s).

A positive trend in the period 2000–2007 was reduction of the gap between the average disposable income in Estonia and the average disposable income of households in rural areas. While a member of a rural household received only 86% of Estonia's average income per household member in 2000, this percentage rose to 92% in 2007.

Another positive observation is that the average disposable income of households with two adults and children has been above the Estonian average level in two consecutive years, i.e., 2006 and 2007. While in 2000, in households comprising two adults and children, the average disposable income was a little under the Estonian average (98%), then in 2007, it was 2% higher than the Estonian average, reaching up to 5,997 EEK per month. The fast growth of the gross wages (increase by over one fifth) in 2007 somewhat amplified the difference between the total average and the average disposable income per household member in households with three or more children, because the ratio of income earners to dependants is the lowest in such households, compared to other household types.

The upsurge in the gross wages in 2007 also increased the gap with Estonia's average indicator for those households where the main income earner (head of household) was a pensioner, because the pensions grew in this year at a somewhat slower rate (17%).

To assess the economic situation of persons with lower income, indicators of absolute and relative poverty are used. The absolute poverty line indicates the lowest level of income, which enables to cope in a particular environment. Relative poverty indicates unevenness of income distribution among people with the lowest income. The main goal of social policies is to ensure coping of all inhabitants at a certain level and to reduce unevenness of income distribution as much as possible.

Absolute poverty is absence of resources for minimum living standard or for covering basic needs. The absolute poverty line² or subsistence minimum, in Estonia is calculated on the basis of expenses and the absolute poverty rate expresses the proportion of households with income per member per month, with equivalence scales of 1:0.7:0.5, remaining under the absolute poverty line, i.e., under the level of expenses which is defined as the absolute poverty line. In 2004, the absolute poverty rate in Estonia was almost 15%, that is, almost 15% of all households were living under absolute poverty line. 16% of Estonian household members and every fifth child lives in such households. By 2007, proportion of poor households had decreased by around two and half times (2.39), that is, every seventeenth household (6.2% of all households) was living under the absolute poverty line. In absolute figures, estimably 36,000

² Calculation of absolute poverty line, or subsistence minimum, is based on three expense categories: expenses on food, housing, and other individual expenses. Calculation of expenses on food is based on minimum food basket.

households were living under the absolute poverty line in Estonia in 2007, with estimably 87,000 people living in them, including over 20,000 children.

Relative poverty rate shows the percentage of inhabitants whose income remains below the agreed threshold of relative poverty. In Estonia, as in the other member states of the European Union, relative poverty line is considered to be 60% of median income of inhabitants, with equivalence scales 1:0.5:0.3. The indicators of relative poverty do not enable direct assessment of improvement or deterioration of subsistence. Relative poverty reflects the distribution of incomes in society – this means that when people's incomes increase while the distribution of incomes between population groups remains the same, the rate of relative poverty remains unchanged.

Even though the threshold value of relative poverty almost tripled between 2000 and 2007, the general rate of relative poverty in Estonia only changed by 1.2 percentage points, increasing from 18.3% in 2000 to 19.5% in 2007. The difference between relative poverty rate of men and women, however, increased in the period 2000–2007. While among men, the relative poverty rate dropped from 17.3% in 2000 to 16.5% in 2007, among women, during the same period, the relative poverty rate rose from 19.1% to 22.0%. Although the statistical data on the relative poverty indicators in 2008 have not yet been published, it is clear that the recession tends to level the relative poverty indicators between sexes, because the recession was largely caused by the collapse of the housing market, where the majority of employees were men.

Although the relative poverty rate decreased both among children (aged 0–15) and inhabitants in working age (aged 16–64) in the period 2000–2007, the situation of seniors (aged 65+) deteriorated. The relative poverty rate in the group of persons aged 65 or above increased 2.44 times during the observed period and, in 2007, every third senior belong to the relatively poor (i.e., the relative poverty rate of senior inhabitants was 39.0%)³.

In comparison to other member states of the European Union, the Estonian relative poverty rate in 2007 was close to the average level of 27 member states (17%), similar to Lithuania and the United Kingdom, but it was twice as high as in the Czech Republic, the Netherlands and Iceland (10% in all three). The risk of relative poverty, in 2007, was higher than in Estonia in Latvia, Greece, Spain and Italy, for example.

³ However, it should be taken into account when interpreting the data that, from 2003, the Estonian Social Survey Data is used instead of the Household Budget Survey data to calculate relative poverty indicators. Therefore, in drawing conclusions, it should be taken into account that changes in 2004 and subsequent years in comparison to 2000 might be conditioned by changes in methodology, not by significant changes in social processes.

Consumer prices

Table 1. **Changes in the consumer price index, compared to the previous year, 2000, 2004 and 2006–2008**
(per cent)

Indicator	2000	2004	2006	2007	2008
Total	4.0	3.0	4.4	6.6	10.4
Food and non-alcoholic beverages	2.4	4.2	5.1	9.3	14.2
Alcoholic beverages and tobacco	3.3	2.1	3.4	4.1	15.9
Clothing and footwear	3.4	-0.4	2.6	3.6	3.8
Housing	2.7	4.1	10.4	14.6	15.8
Household equipment and operation	-0.2	-1.0	2.1	3.5	4.4
Medical care and health services	5.5	4.7	2.5	7.9	7.6
Transport	16.1	5.4	4.4	2.7	11.1
Communication	6.1	-1.6	-5.3	-1.2	-0.9
Recreation and culture	1.2	0.0	4.2	3.3	2.4
Education	8.1	2.8	3.5	5.4	8.5
Hotels, cafés and restaurants	5.7	4.1	4.4	10.1	13.3
Miscellaneous goods and services	9.7	3.7	4.1	4.7	8.9

Source: *Statistics Estonia*

Incomes

Table 2. **Average disposable income, gross wages and old-age pension per household member, 2000, 2004 and 2006–2008**

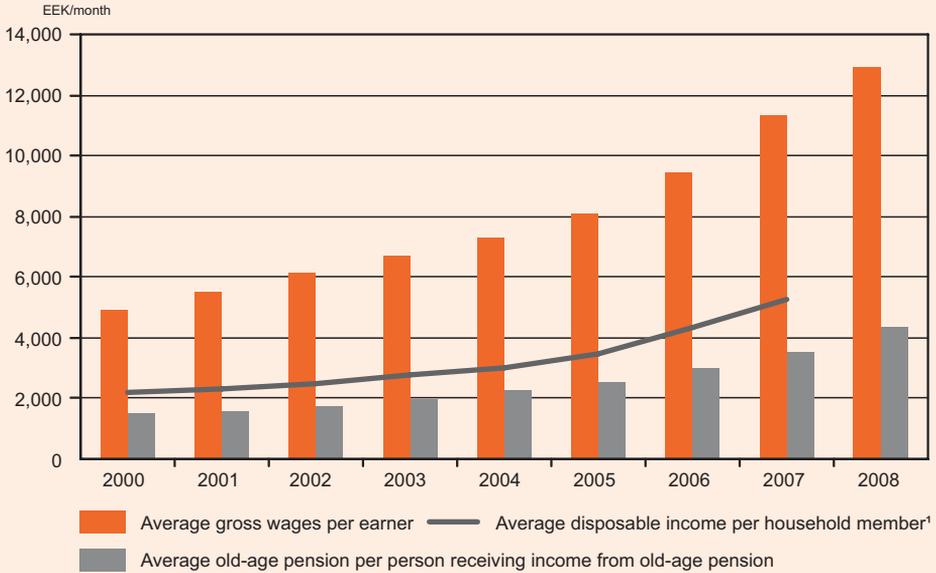
Indicator	2000	2004	2006	2007	2008
Average disposable income per household member, EEK/month	2,183	3,029	4,343	5,286	...
Average gross wages, EEK/month	4,907	7,287	9,407	11,336	12,912
Average old-age pension, EEK/month	1,532	2,244	3,027	3,541	4,356
Average old-age pension as percentage of average calculated net wages ¹ , %	39.9	39.5	40.0	38.8	41.5
Average old-age pension as percentage of an unskilled male production worker's average net wages ² (in October of the corresponding year), %	56.9	52.3	56.1	...	...
Average old-age pension of a pensioner with 30 years of pensionable service as percentage of an unskilled male production worker's average net wages ² (in October of the corresponding year), %	44.4	40.5	44.1	...	...
Change compared to the previous year, %					
Average disposable income per household member	8.3	8.6	24.9	21.7	...
Average gross wages	10.5	8.4	16.5	20.5	13.9
Average old-age pension	-0.8	13.0	18.3	17.0	23.0
Change in real income compared to the previous year, %					
Average disposable income per household member	4.1	5.4	19.7	14.2	...
Average gross wages	6.3	5.2	11.6	13.0	3.2
Average old-age pension	-4.7	9.8	13.4	9.7	11.4

¹ Amount of wages for the actual working period and pay for non-working time, without income tax, insured person's unemployment insurance premium and obligated person's mandatory funded pension premium.

² From 1 January 2002, 1% of unemployment insurance (0.6% from 2006) and, from 2005, 2% of mandatory funded pension, and also income tax (taking into account the income tax rate and tax free minimum in respective year) are deducted from gross wages to calculate the average net wages.

Source: Social Insurance Board, Statistics Estonia

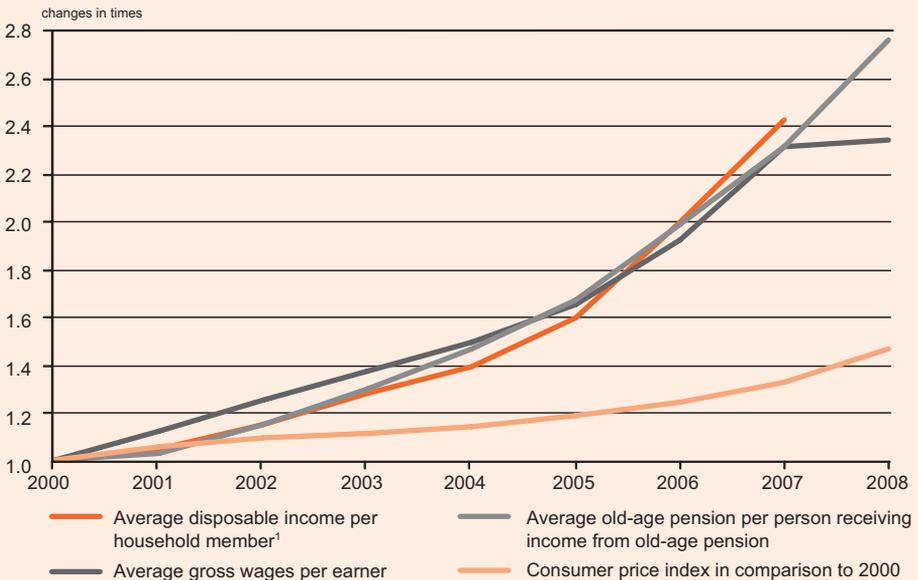
Figure 1. **Average disposable income per household member, average gross wages per earner and average old-age pension per pensioner, 2000–2008**



¹ In 2008, Statistics Estonia did not estimate the average monthly disposable income per household member.

Source: Social Insurance Board, Statistics Estonia

Figure 2. **Change in average disposable income per household member, in average gross wages per earner, in average old-age pension and in consumer price index, 2000–2008**



¹ In 2008, Statistics Estonia did not estimate the average monthly disposable income per household member.

Source: Social Insurance Board, Statistics Estonia

Table 3. Difference of received average disposable income per member in different types of households compared to Estonia's general average, 2000, 2004 and 2006–2007

Indicator	2000	2004	2006	2007
Average disposable income of households per member (EEK per month)	2,183	3,029	4,343	5,286
Difference between the general average and the amount of disposable income by different household types, %				
Single adult	115.4	106.8	107.9	113.5
Two adults	125.7	120.5	120.9	117.2
Two adults with children	98.2	105.4	104.7	101.7
1 child	115.0	119.0	120.2	117.4
2 children	91.9	98.4	92.7	92.2
3 or more children	71.3	84.7	86.3	76.2
Single adult with a child (children)	76.0	76.0	72.0	63.9
Household with pensioner as head of household ¹	75.1	77.6	71.8	67.1
Urban household ²	106.6	106.2	106.0	104.4
Rural household ³	85.5	88.4	88.8	91.7
Household with the head of household with no professional education	88.7	83.7	88.1	86.6
Household with the head of household with higher education	147.7	144.3	142.0	139.1

¹ Largest income receiver in household is a pensioner.

² Household living in city or town.

³ Household living in small town or village.

Source: Statistics Estonia

Table 4. Average monthly disposable income per household member in income deciles, average disposable income, median of disposable income and proportion of X and I income deciles, 2000, 2004 and 2006–2007¹
(EEK per household member per month)

Income deciles ²	2000	2004	2006	2007
I	505	805	1,319	1,591
II	1,030	1,530	2,229	2,749
III	1,320	1,946	2,738	3,311
IV	1,503	2,168	3,061	3,691
V	1,657	2,390	3,373	4,121
VI	1,874	2,649	3,832	4,670
VII	2,229	3,043	4,457	5,473
VIII	2,741	3,739	5,385	6,565
IX	3,549	4,847	6,800	8,334
X	6,704	8,158	12,017	14,620
Estonian average	2,183	3,029	4,343	5,286
Median ³	1,750	2,468	3,488	4,313
Proportion between X and I income deciles	13.3	10.1	9.1	9.2

¹ Equivalence scales 1:1:1 are used.

² The income deciles are derived by dividing all households according to the amount of the average disposable income per household member into 10 income groups (deciles). The first decile contains households with the lowest and the tenth with the highest income per household member.

³ The median is calculated by ranking all household members according to the amount of disposable income per household member and the household member that is in the middle is the median, i.e. 50% of all household members had lower incomes than the median and 50% of all household members had higher income than the median.

Source: Statistics Estonia

Subsistence minimum, absolute poverty

Table 5. Estimated subsistence minimum (absolute poverty line) and minimum food basket¹, 2004–2007
(EEK per single adult household per month)

Indicator	2004	2005	2006	2007
Subsistence minimum (absolute poverty line)	1,836	1,938	2,081	2,341
incl. minimum food basket ²	762	816	888	1,031
Percentage of minimum food basket in estimated subsistence minimum, %	41.5	42.1	42.7	44.0

¹ Estimated subsistence minimum in a month (30 days) of single adult household contains the cost of minimum food basket, dwelling expenses and other individual expenses.

² In finding the cost of minimum food basket, calculations were based on a sample food basket prepared by nutritional researchers, which should ensure the "average" person's need of energy.

Source: Statistics Estonia

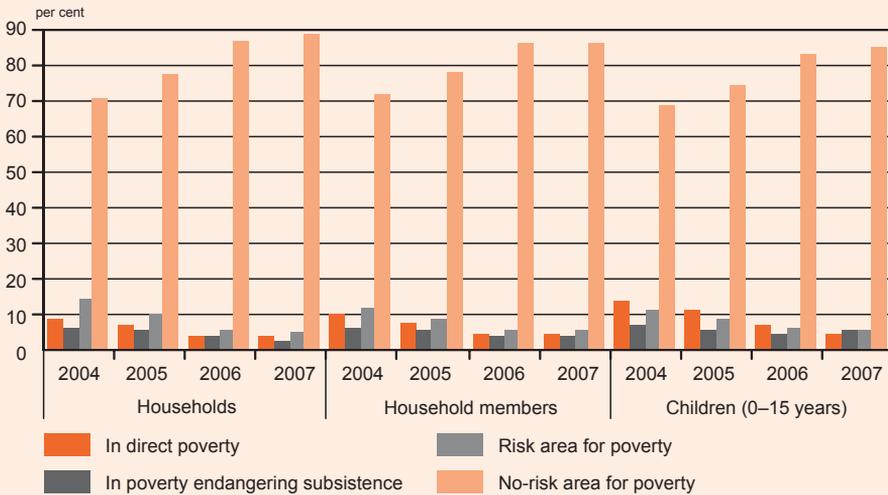
Table 6. **Distribution of households, household members, children and the elderly by strata of absolute poverty¹, 2004 and 2006–2007** (per cent)

Strata of poverty	Households			Household members			Children (0–15 years)			Elderly (65+)		
	2004	2006	2007	2004	2006	2007	2004	2006	2007	2004	2006	2007
Under absolute poverty line (APL)	14.8	7.6	6.2	16.1	8.2	6.5	20.3	10.7	9.4	8.9	3.4	2.9
in direct poverty	8.5	3.9	3.7	9.9	4.4	3.5	13.6	6.6	4.4	3.6	1.0	1.2
in poverty endangering subsistence	6.3	3.7	2.5	6.2	3.8	3.0	6.7	4.1	5.4	5.3	2.4	1.7
In poverty risk	14.6	5.8	4.9	11.9	5.8	4.7	11.2	6.4	5.7	21.5	6.0	5.2
Out of poverty risk	70.6	86.6	88.9	72.0	86.0	88.8	68.5	82.9	84.9	69.6	90.5	92.0

¹ Poverty stratas: direct poverty – up to 80% of APL; poverty endangering subsistence – 81–99% of APL; poverty risk 100–124% APL; out of poverty risk – at least 125% APL.
Equivalence scales used: 1.0:0.7 (second and subsequent adult household member); 0.5 (children below 13 years of age).

Source: Statistics Estonia

Figure 3. **Distribution of households, household members and children by strata of absolute poverty, 2004–2007**



Source: Statistics Estonia

Relative poverty

Table 7. **At-risk-of-poverty threshold¹, 2000, 2004 and 2006–2007**
(EEK per consumption unit per year)

Household type	2000	2004	2006	2007
Single member	17,880	27,981	41,749	52,076
2 adults + 2 dependent children	37,548	58,760	87,672	109,359

¹ From 2003, in calculating relative poverty indicators, the Estonian Social Survey data is used instead of the Household Budget Survey data. Therefore, in drawing conclusions, it should be taken into account that changes in 2004 and subsequent years in comparison to 2000 might be conditioned by changes in methodology, not by significant changes in social processes.

Source: Statistics Estonia

Table 8. **At risk of relative poverty rate¹ by age and sex, 2000, 2004 and 2006–2007**
(per cent)

	2000	2004	2006	2007
Total	18.3	18.3	19.4	19.5
male	17.4	16.3	16.7	16.5
female	19.2	20.0	21.6	22.0
0–15 total	21.5	19.8	17.3	17.1
16–64 total	17.1	16.2	16.4	15.1
male	17.3	15.6	15.9	14.7
female	16.9	16.8	16.9	15.4
65+ total	20.3	25.1	33.1	39.0
male	9.6	13.7	20.7	24.6
female	25.5	30.8	39.2	46.1

¹ From 2003, in calculating relative poverty indicators, the Estonian Social Survey data is used instead of the Household Budget Survey data. Therefore, in drawing conclusions, it should be taken into account that changes in 2004 and subsequent years in comparison to 2000 might be conditioned by changes in methodology, not by significant changes in social processes.

Source: Statistics Estonia

Table 9. Inequality in the distribution of income¹, 2000, 2002 and 2004–2005

Indicator	2000	2004	2006	2007
Gini coefficients ² according to income (equivalence scales 1.0: 0.5 and 0.3) ³	0.362	0.341	0.334	0.309
Coefficient of income quintiles ⁴ (equivalence scales 1.0: 0.5 and 0.3) ³	6.3	5.9	5.5	5.0

¹ From 2003, in calculating relative poverty indicators, the Estonian Social Survey data is used instead of the Household Budget Survey data. Therefore, in drawing conclusions, it should be taken into account that changes in 2004 and subsequent years in comparison to 2000 might be conditioned by changes in methodology, not by significant changes in social processes.

² The Gini coefficient shows the level of economical inequality in the society. The range of the coefficient is 0–1. The closer its value is to 1, the larger the inequality. Income distribution is considered to be very uneven, when the value of the Gini coefficient falls between 0.5 and 0.7. Distribution is considered to be relatively even, when the range is from 0.2 to 0.35. If the Gini coefficient is given in percentages (multiplied by 100), the term “Gini index” is used.

³ The modified OECD scale, where the first household member is calculated with the equivalence scale of 1.0, the following members over 14 years of age with the scale of 0.5, and children under 14 years of age with the scale of 0.3. This indicator is comparable with indicators of other EU member states.

⁴ Coefficient of income quintiles also characterizes the unequal distribution of incomes in society. Inequality of distribution of incomes is described best by comparison of total income of two extreme groups: upper quintile (20% of population receiving highest equivalent income) and lower quintile (20% of population receiving lowest equivalent income). Coefficient of income quintiles shows how many times the total income of the upper quintile is larger than the total income of the lower quintile.

Source: Statistics Estonia

Labour market

Registration of unemployed persons and persons seeking work, providing labour market services for them and paying labour market benefits for them is regulated by Labour Market Services and Benefits Act that came into force on 1 January 2006. The purpose of the Act is to achieve maximum possible employment rates among the working population and to prevent long-term unemployment and exclusion from the labour market through the provision of labour market services and payment of employment subsidies. The Act regulates the maintenance of records concerning the unemployed and job-seekers, provision of labour market services, and payment of labour market benefits. According to the Act, an unemployed person is a person who is not employed, has been registered as an unemployed person with the Estonian Unemployment Insurance Fund, and is seeking employment. An unemployed person is deemed to be seeking employment if he or she fulfils an individual job-seeking plan, is ready to accept a suitable job and to start working immediately.

The aforementioned Act includes provisions for 13 labour market services, including four services for disabled persons. Labour market services are provided to an unemployed person on the basis of an individual job-seeking plan. The new Act specifies three types of labour market benefits: unemployment allowance⁴, grants, and transport and accommodation benefits.

Persons who have been employed or engaged in an activity equal to work for at least 180 days during the twelve months prior to registration as unemployed and who have no income in the extent of the unemployment allowance have the right to receive the unemployment allowance. Unemployment allowance is paid for up to 270 days. From 1 January 2007, the daily rate of the unemployment allowance was increased, in the result of which, the average paid benefit increased from 400 EEK per month to 1,000 EEK. From the same date, all registered unemployed persons also have the right to health insurance.

Unemployed persons who take part in work exercise, work practice or labour market training with a duration of at least 40 hours have the right to receive grants. Participants in labour market training and work practice have the right to apply for transport and accommodation benefit.

Registration of unemployed persons and job-seekers, allocation of labour market benefits and provision of labour market services was the responsibility of the Labour Market Board until 30 April 2009. On 30 April 2009, the Labour Market Board was dissolved and its responsibilities were transferred to the Estonian Unemployment Insurance Fund, which was previously responsible for the administration of unemployment insurance.

⁴ Pursuant to the Labour Market Services and Benefits Act, the unemployment benefit was renamed as unemployment allowance from 1 January 2006.

The unemployment insurance was introduced in Estonia in 2002 and it is regulated by the Unemployment Insurance Act. Unemployment insurance is a type of compulsory insurance, based on the principle of solidarity, the purpose of which is to provide, upon unemployment, partial compensation for the lost income to insured persons for the time of the search for work, and partial compensation of the expenses related to the termination of employment contracts to employees and service relationships to public servants in the case of lay-offs, and the protection of the claims of the employees upon insolvency of employers. The Act provides for the following types of benefits:

- 1) unemployment insurance benefit;
- 2) insurance benefit upon redundancy⁵ (from 1 July 2009);
- 3) benefit upon insolvency of the employer.

The collection of unemployment insurance premiums started in 2002, and the first benefits were paid out in the beginning of 2003.

Unemployment insurance is financed from unemployment insurance premiums paid by the insured persons (employees) and the employers. The rate of the unemployment insurance premium of an employee can be from 0.5 to 2.8 per cent of the wages paid to the person, while the rate of the premium of an employer can be from 0.25 to 1.4 per cent of the wage fund. From 2006 to 2008, the unemployment insurance premium rate was 0.6 percent for employees and 0.3 percent for employers. Due to rapid increase in unemployment, caused by the recession, the rates of the unemployment insurance premium were increased on two occasions in 2009. From 1 August 2009, the rate for employees is 2.8% and the rate for employers is 1.4%.

Insured persons, who have been registered as unemployed and who have been insured for at least 12 months during the 36 months prior to registration as unemployed, have the right to receive unemployment insurance benefits. No unemployment insurance benefit is paid, if the employee left work due to a breach of work or service duties, loss of trust, an indecent act or an act of corruption. A person is also not entitled to receive benefits, if he/she left work upon mutual agreement or voluntarily, unless the reason for leaving was a breach of contract terms and conditions by the employer or changes in production and work organisation.

The amount of the unemployment insurance benefit depends on the previous wages. The amount is 50% of the previous wages during the first 100 days of the benefit period and 40% of the previous wages from there on. The maximum amount of the unemployment insurance benefit is 50% and 40%, respectively, of an amount three times the average salary of insured persons in Estonia per calendar day in the previous calendar year. In 2009, the maximum amount of the unemployment insurance benefit is 15,725 EEK/month.

An insured person has the right to receive an unemployment insurance benefit during the whole period when he or she is registered as unemployed, but not longer than:

- 1) 180 calendar days if the insurance period of the insured person is shorter than 56 months;
- 2) 270 calendar days if the insurance period of the insured person is 56–110 months;
- 3) 360 calendar days if the insurance period of the insured person is 111 months or longer.

⁵ Until 30 June 2009, benefit for collective termination of employment contracts.

The insurance benefit is paid, upon redundancy, to an employee or a public servant, whose employment relationship with this employer has lasted:

- 1) from five to ten years – in the extent of average wages or salary of one month in addition to the benefit payable by the employer in the extent of average wages or salary of one month;
- 2) over ten years – in the extent of average wages or salary of two months in addition to the benefit payable by the employer in the extent of average wages or salary of one month.

The purpose of the benefit upon insolvency of the employer is to reimburse the employee for the unreceived salary, holiday pay and/or benefits payable upon termination of the employment contract pursuant to the Employment Contracts Act. Eligibility for the benefit upon insolvency does not depend on the unemployment insurance period: an employee is eligible for the benefit irrespective of whether or how long the employee or the employer have paid unemployment insurance premiums.

An important development in the field of employment relations was the entry into force of the new Employment Contracts Act on 1 July 2009. The new Act is based on the principle of flexicurity, harmonises Estonia's labour law with the principles of private law, and clarifies the judicial area. Several previous Acts were replaced by one comprehensive Act, which makes the rights and obligations of employers and employees easier to comprehend. Formal provisions of labour law were abolished and administrative burden was reduced. The new Act promotes partnership between employees and employers and mutual agreements between the parties.

An analysis of employment statistics indicates that 2008 was a year of major changes in Estonian labour market. Despite the recession that started in 2007, employment rate continued to increase and unemployment decreased in the first half of 2008 – both trends started in 2001. The unemployment rate in the middle of 2008 was comparable with the level of 1992, while the employment rate was at the highest point of the last ten years. As employment indicators are characterised by a delayed response to economic downturn, the impact of the recession on the labour market became noticeable in the second half of 2008. The rapid economic growth of recent years reversed in 2008 (-3.6%), but the number of employed persons still increased by 0.2% in comparison to 2007. According to the 2008 Labour Force Survey of Statistics Estonia, the Estonian population in the age bracket 15–74 included 656,500 employed, 38,400 unemployed and 347,900 inactive persons (see Table 1). The activity rate increased to 73.6%⁶ and the employment rate to 69.5%.

The average employment rate of women reached up to 66.3% in 2008. An influencing factor here is definitely the gradual increase of the retirement age of women, due to which the women leave labour market later, as well as low pensions, due to which many women wish to continue working. For the same reason, the employment rate of persons in older age groups (55–64) has increased as well, rising to 62.2% in 2008.

⁶ Activity rate – percentage of labour force in the population of 15–64 years of age.

The number of unemployed persons started to grow in the second half of 2008 and the average unemployment rate rose from 4.7%⁷ in 2007 to 5.5%. Unemployment increased among both men and women and among Estonians and non-Estonians (see Figure 7). In 2008, Estonia's level of unemployment was still lower than the EU average (see Figure 5), but in the beginning of 2009, Estonia joined Spain, Latvia, Lithuania and Ireland in the group of the EU member states with the highest level of unemployment.

Men and young people, mainly workers in the construction sector and manufacturing, were hit hardest by the recession. A comparison of the indicators from Q2 in 2008 and 2009 indicates that the employment rate of men dropped from 73.2% to 63.8% and the unemployment rate increased almost four times. Unemployment among young people tripled (to 27%), again primarily due to rapid increase in unemployment among men. The number of long-term unemployed persons⁸ decreased in 2008 to 11,800 (see Table 6), but started to increase again in the second half of the year and doubled in Q2 of 2009. According to forecasts, both unemployment and long-term unemployment are expected to increase further in 2009 and 2010.

Like general unemployment, registered unemployment started to increase in the second half of 2008 as well. The total number of unemployed persons registered with regional employment offices of the Labour Market Board in 2008 was 61,485 and 77% of them were registered as new unemployed (see Table 13). A comparison of June data from 2008 and 2009 indicates that the number of registered unemployed persons increased 3.7 times in one year, from 19,285 to 72,148. Such increase is unprecedented in Estonia.

The most popular labour market measures offered to the unemployed people in 2008 were career counselling (16% of the unemployed people) and labour market training (9%). From the remaining services, the highest increase was recorded in the number of recipients of the business start-up subsidy.

The expenditure on active labour market measures has increased, thanks to the implementation of the European Social Fund. At the same time, expenditure on passive measures increased as a result of the increasing number of unemployed persons. The 2008 expenditure on labour market policy amounted to 396.6 million EEK (see Table 17), with 29% allocated to passive and 71% to active measures.

Unemployment allowance was paid in total to 22,878 unemployed people in 2008. In the same period, the Unemployment Insurance Fund paid unemployment insurance benefits to 15,402 persons, which is almost twice as many as in 2007. The average amount of paid unemployment insurance benefit was 3,614 EEK (see Tables 15 and 16).

The number of receivers of the collective redundancy benefit grew by 118% in comparison to 2007 and the number of people receiving the benefit for the insolvency of the employer increased by 97% (see Table 15).

⁷ Unemployment rate – percentage of unemployed persons in the labour force of 15–74 years of age.

⁸ Long-term unemployed person – a person who has been searching for a job for one year or longer.

Table 1. Working-age population by employment status, 2000 and 2004–2008
(aged 15–74, thousand)

	2000	2004	2005	2006	2007	2008
Total	1,046.5	1,047.8	1,048.6	1,049.1	1,046.4	1,042.8
employed	572.5	595.5	607.4	646.3	655.3	656.5
unemployed	89.9	63.6	52.2	40.5	32.0	38.4
inactive	384.1	388.7	389.0	362.3	359.0	347.9
Male total	485.2	487.7	488.5	490.0	489.1	487.9
employed	291.1	299.1	300.5	322.9	330.0	330.9
unemployed	49.5	34.7	28.9	21.3	18.9	20.2
inactive	144.7	153.8	159.2	145.7	140.3	136.7
Female total	561.3	560.1	560.0	559.1	557.2	554.9
employed	281.4	296.4	306.9	323.3	325.4	325.6
unemployed	40.5	28.9	23.3	19.2	13.1	18.1
inactive	239.4	234.9	229.8	216.5	218.7	211.2

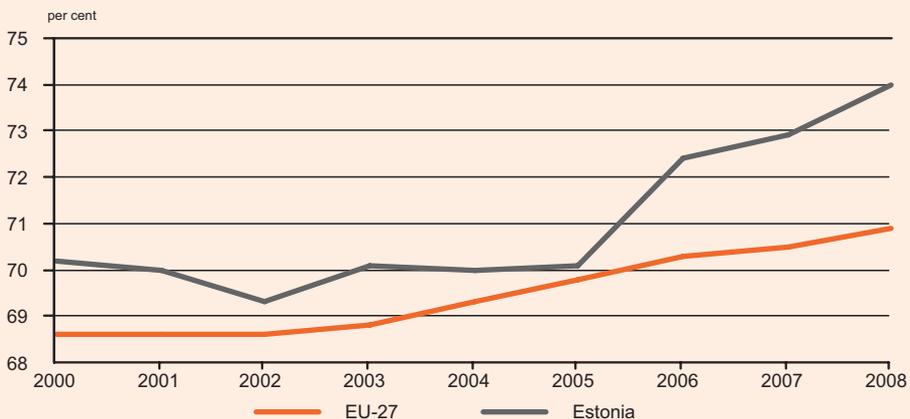
Source: Statistics Estonia, Estonian Labour Force Survey

Table 2. Activity rate, 2000 and 2004–2008
(per cent)

	2000	2004	2005	2006	2007	2008
Total	70.4	69.5	69.6	72.1	72.5	73.6
male	76.1	73.5	72.8	75.3	76.9	77.6
female	65.3	65.8	66.7	69.1	68.5	70.0

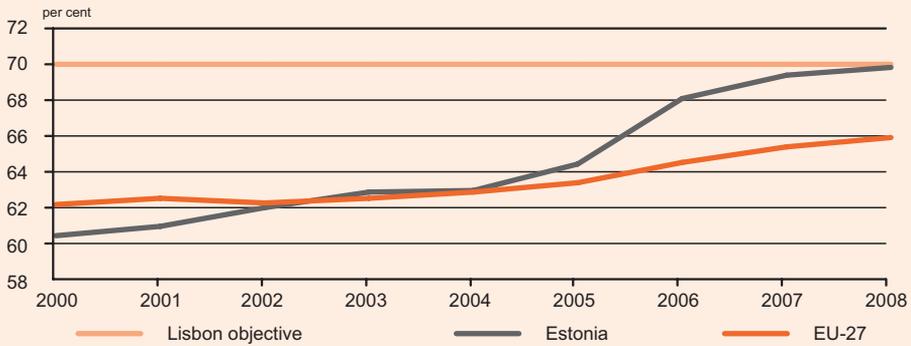
Source: Statistics Estonia, Estonian Labour Force Survey

Figure 1. Activity rate in the European Union and Estonia, 2000–2008



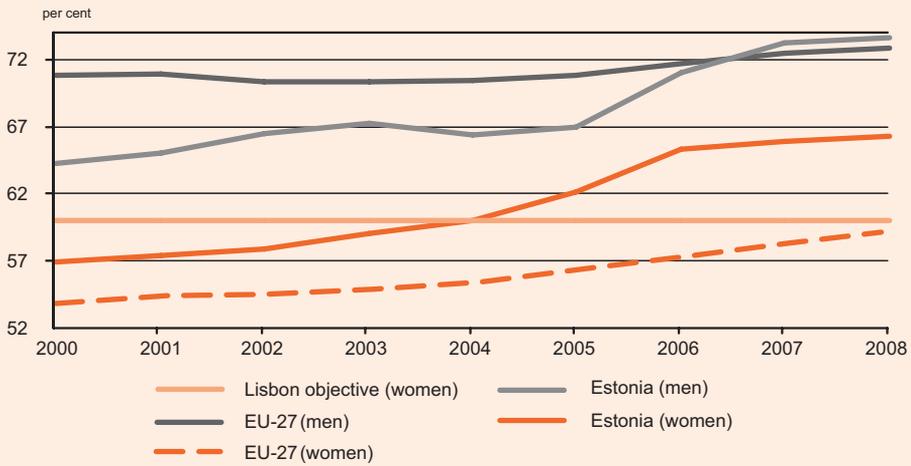
Source: Eurostat

Figure 2. **Employment rate in the European Union and Estonia, 2000–2008**



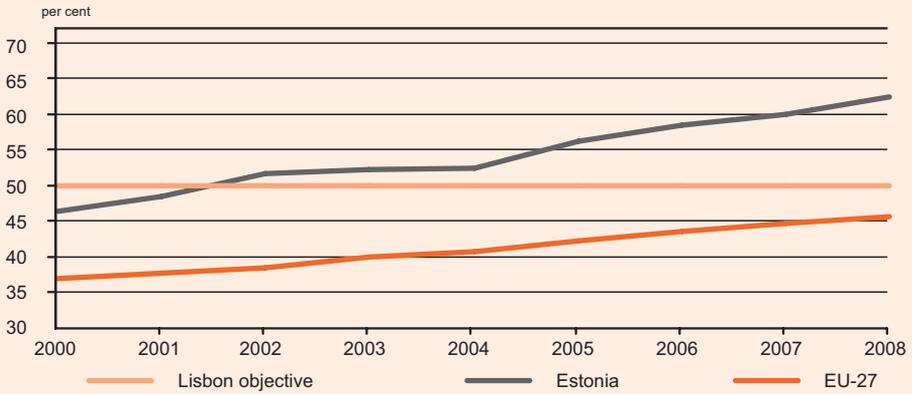
Source: Eurostat

Figure 3. **Male and female employment rate in the European Union and Estonia, 2000–2008**



Source: Eurostat

Figure 4. **Employment rate of older age group in the European Union and Estonia, 2000–2008**
(55–64 years of age)



Source: Eurostat

Table 3. **Employment rate by sex and age, 2000 and 2004–2008**
(per cent)

	2000	2004	2005	2006	2007	2008
15–24 total	31.5	26.8	28.6	31.3	34.2	35.9
male	35.8	31.8	32.2	36.2	38.2	38.5
female	27.0	21.5	25.0	26.1	30.0	33.2
25–54 total	75.7	78.5	79.3	84.0	84.5	83.7
male	78.2	81.0	81.4	87.4	89.4	88.1
female	73.4	76.1	77.3	80.9	80.0	79.5
55–64 total	44.0	52.1	55.7	58.2	59.5	66.2
male	54.7	56.1	58.6	57.2	58.6	64.9
female	36.0	49.1	53.4	59.0	60.3	60.1
15–64 total	60.7	62.6	64.0	67.7	69.1	69.5
male	64.8	65.7	66.2	70.5	72.6	73.0
female	57.0	59.8	61.9	65.1	65.7	66.3

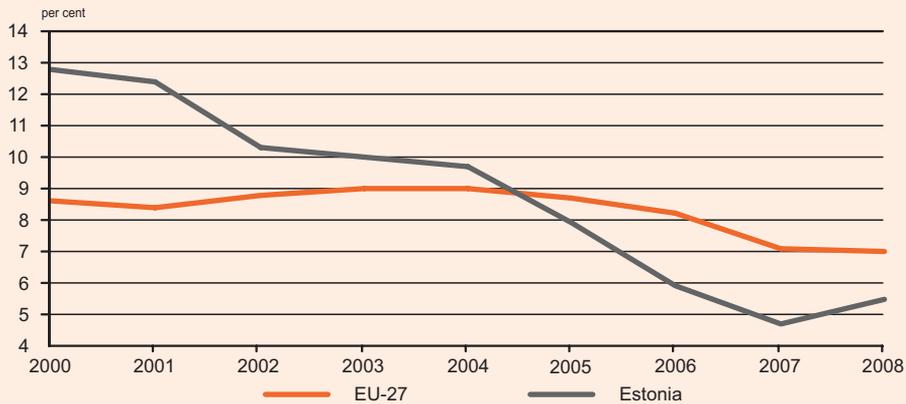
Source: Statistics Estonia, Estonian Labour Force Survey

Table 4. **Employment rate by nationality and sex, 2000 and 2004–2008**
(per cent)

	2000	2004	2005	2006	2007	2008
Estonians total	61.9	64.2	64.5	68.5	69.1	69.6
male	64.7	66.8	65.7	70.0	71.9	73.0
female	59.4	61.7	63.3	67.1	66.4	66.5
Non-Estonians total	58.5	59.6	63.0	66.1	69.0	69.2
male	65.0	63.3	67.4	71.7	74.2	72.9
female	52.8	56.5	59.2	61.1	64.4	65.8

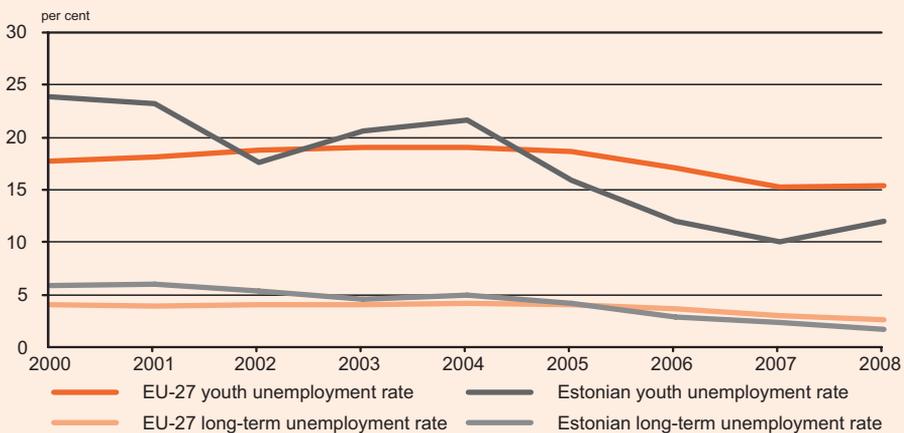
Source: Statistics Estonia, Estonian Labour Force Survey

Figure 5. **Unemployment rate in the European Union and Estonia, 2000–2008**



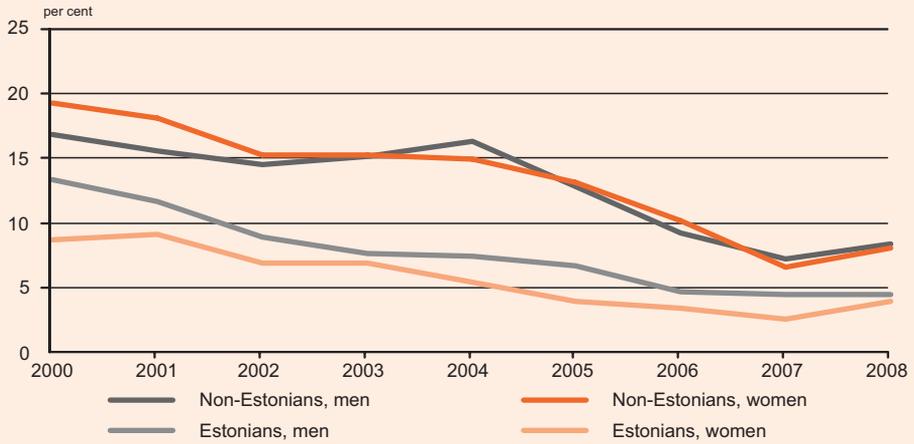
Source: Eurostat

Figure 6. **Youth unemployment rate and long-term unemployment rate in the European Union and Estonia, 2000–2008**



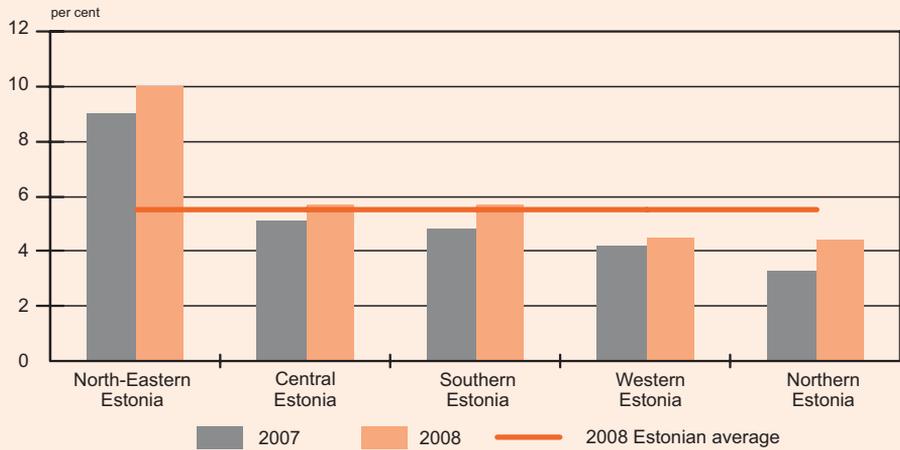
Source: Eurostat

Figure 7. Unemployment rate by nationality and sex, 2000–2008



Source: Statistics Estonia, Estonian Labour Force Survey

Figure 8. Unemployment rate by regions¹, 2007–2008



¹ Northern Estonia: Harjumaa;
 Western Estonia: Läänemaa, Pärnumaa, Hiiumaa, Saaremaa;
 Central Estonia: Raplammaa, Järvamaa, Lääne-Virumaa;
 North-Eastern Estonia: Ida-Virumaa;
 Southern Estonia: Tartumaa, Jõgevamaa, Viljandimaa, Põlvamaa, Võrumaa, Valgamaa.

Source: Statistics Estonia, Estonian Labour Force Survey

Table 5. **Unemployment rate by age and sex, 2000 and 2004–2008**
(per cent)

	2000	2004	2005	2006	2007	2008
15–24 total	23.8	21.7	15.9	12.0	10.0	12.0
male	23.9	21.2	16.6	10.0	12.1	12.6
female	23.7	22.4	14.9	14.7	7.1	11.3
25–54 total	12.8	8.9	7.5	5.5	4.2	4.9
male	13.6	9.4	8.2	5.6	4.2	4.8
female	12.1	8.3	6.9	5.4	4.3	4.9
55–64 total	9.6	6.0	5.0	4.1	3.5	4.1
male	12.1	7.2	5.9	6.7	6.8	5.2
female	6.5	4.9	4.3	...	...	3.2
15–74 total	13.6	9.7	7.9	5.9	4.7	5.5
male	14.5	10.4	8.8	6.2	5.4	5.8
female	12.6	8.9	7.1	5.6	3.9	5.3

Source: Statistics Estonia, Estonian Labour Force Survey

Table 6. **Long-term unemployment rate¹, 2000 and 2004–2008**
(per cent)

	2000	2004	2005	2006	2007	2008
Total	6.2	5.0	4.2	2.8	2.3	1.7
male	6.9	5.6	4.2	3.1	2.9	2.1
female	5.4	4.4	4.2	2.6	1.7	1.4

¹ Percentage of long-term unemployed people (unemployed for over 12 months) in labour force.

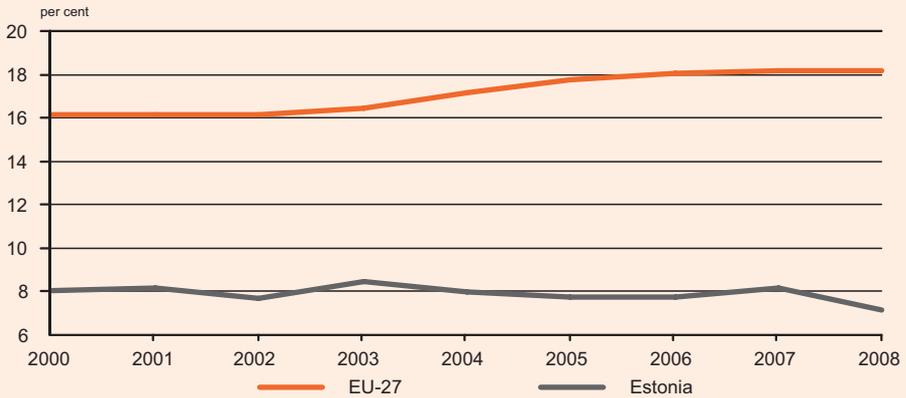
Source: Statistics Estonia, Estonian Labour Force Survey

Table 7. Percentage of employed people by sex and economic sectors, 2000 and 2004–2008
(per cent)

	2000	2004	2005	2006	2007	2008
Total	100.0	100.0	100.0	100.0	100.0	100.0
primary sector	7.2	5.9	5.3	5.0	4.7	2.4
secondary sector	33.3	34.9	34.0	33.5	35.2	22.4
tertiary sector	59.5	59.3	60.7	61.5	60.1	75.3
Male total	100.0	100.0	100.0	100.0	100.0	100.0
primary sector	9.7	8.1	7.1	6.7	6.4	3.9
secondary sector	42.4	44.2	44.0	45.6	48.2	35.4
tertiary sector	47.9	47.7	48.8	47.7	45.4	60.7
Female total	100.0	100.0	100.0	100.0	100.0	100.0
primary sector	4.6	3.6	3.5	3.2	3.0	5.3
secondary sector	23.9	25.5	24.2	21.5	22.0	48.2
tertiary sector	71.5	70.9	72.3	75.2	75.0	46.4

Source: Statistics Estonia, Estonian Labour Force Survey

Figure 9. Percentage of part-time workers among employed people in the European Union and Estonia, 2000–2008



Source: Eurostat

Table 8. **Percentage of part-time workers¹ among employed people, 2000, 2004–2008**
(per cent)

	2000	2004	2005	2006	2007	2008
Total	9.3	8.0	7.8	7.8	8.2	7.2
male	6.0	5.4	4.9	4.3	4.3	4.1
female	12.8	10.6	10.6	11.3	12.1	10.4

¹ Worker whose usual weekly working period is under 35 hours, except for professions, which have partial employment as provided by law.

Source: Statistics Estonia, Estonian Labour Force Survey

Table 9. **Percentage of workers who usually work over 48 hours per week in their main job, 2004–2008**
(per cent)

	2002	2004	2005	2006	2007	2008
Total	7.9	7.3	6.8	6.8	6.5	4.7
male	10.8	11.6	10.7	10.1	10.0	7.4
female	4.8	3.0	2.9	3.6	3.0	1.9

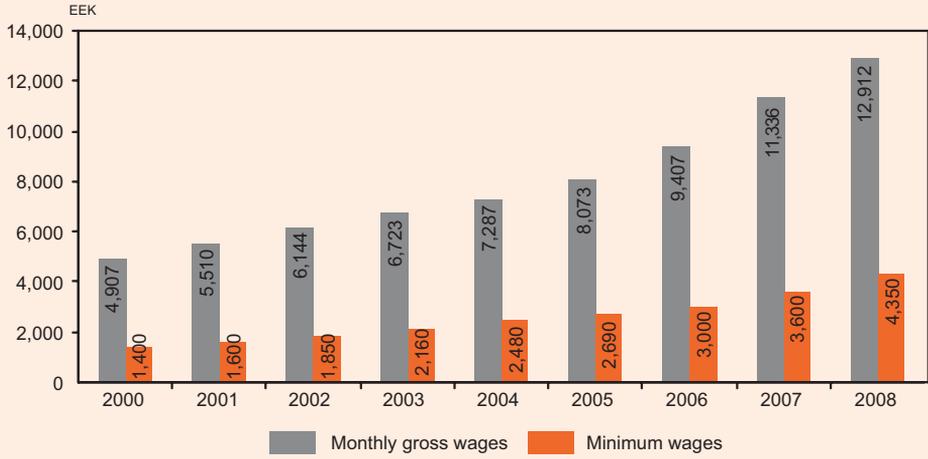
Source: Statistics Estonia, Estonian Labour Force Survey

Table 10. **Percentage of employees by sex and type of employment relation, 2000 and 2004–2008**
(per cent)

	2000	2004	2005	2006	2007	2008
Total	100.0	100.0	100.0	100.0	100.0	100.0
contract of employment, contract of service (incl. public service)	94.7	95.7	96.6	97.6	97.8	97.8
contract of agreement	1.5	1.6	1.1	0.5	0.5	0.2
verbal agreement	3.8	2.7	2.3	1.9	1.7	2.0
Male total	100.0	100.0	100.0	100.0	100.0	100.0
contract of employment, contract of service (incl. public service)	92.5	93.9	95.3	96.5	96.8	96.3
contract of agreement	2.1	1.8	1.2	0.5	0.4	..
verbal agreement	5.5	4.2	3.5	3.0	2.8	3.5
Female total	100.0	100.0	100.0	100.0	100.0	100.0
contract of employment, contract of service (incl. public service)	96.9	97.4	97.7	98.6	98.8	99.2
contract of agreement	1.0	1.4	1.1	0.5	0.6	..
verbal agreement	2.1	1.2	1.2	0.9	0.6	0.6

Source: Statistics Estonia, Estonian Labour Force Survey

Figure 10. Average monthly gross wages and minimum wages, 2000–2008



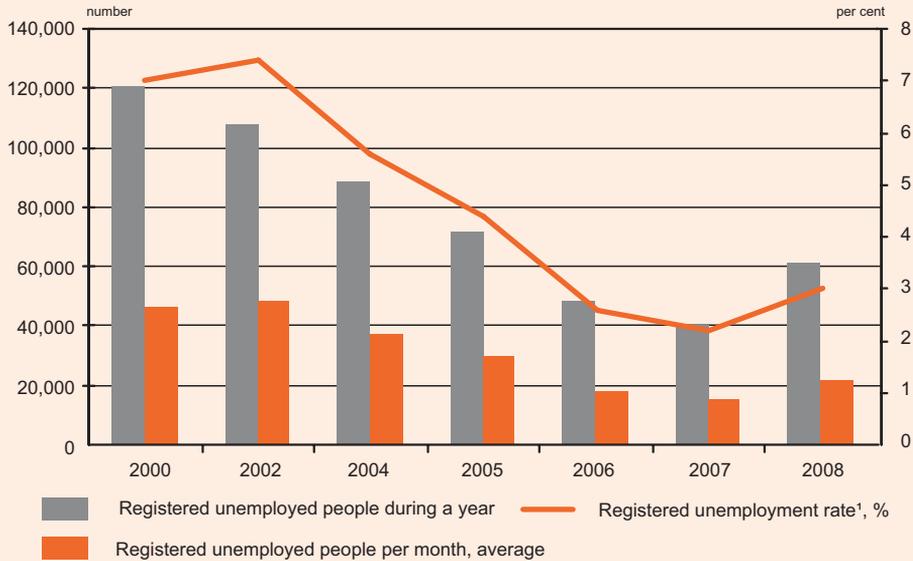
Source: Statistics Estonia, Eurostat

Table 11. Percentage of employees belonging to trade unions, 2000 and 2004–2008

	2000	2004	2005	2006	2007	2008
Total of employees, thousand	520.7	538.0	558.2	594.7	596.8	605.9
Percentage of trade union members among employees, %	14.3	9.3	8.5	8.4	7.6	6.2

Source: Statistics Estonia, Estonian Labour

Figure 11. Number of registered unemployed persons and rate of registered unemployment, 2000, 2002 and 2004–2008



¹Registered unemployment rate – percentage of registered unemployed people in labour force.

Source: Labour Market Board

Table 12. Number of registered unemployed people by sex and age, 2005–2008

Age	2005	2006	2007	2008
Total	71,573	48,167	40,247	61,485
16–24	11,159	6,556	5,567	9,764
25–49	41,729	27,418	22,719	34,456
50+	18,685	14,193	11,961	17,265
Male total	31,880	20,150	16,809	30,456
16–24	5,581	2,986	2,493	5,489
25–49	17,519	10,741	8,904	16,383
50+	8,780	6,423	5,412	8,584
Female total	39,693	28,017	23,438	31,029
16–24	5,578	3,570	3,074	4,275
25–49	24,210	16,677	13,815	18,073
50+	9,905	7,770	6,549	8,681

Source: Labour Market Board

Table 13. **Number of new registered unemployed people, vacancies and placements, 2000 and 2004–2008**

	2000	2004	2005	2006	2007	2008
New unemployed people registered during a year	81,482	51,361	42,618	26,329	28,312	47,511
Number of new vacancies during a year	14,946	20,722	29,159	30,263	22,835	14,342
Number of placements per year	21,753	22,367	19,280	16,324	14,064	17,074

Source: Labour Market Board

Table 14. **Number of participants in active labour market measures, 2000 and 2004–2008**

	2000	2004	2005	2006	2007	2008
Labour market training	8,156	6,968	9,852	7,073	5,503	5451
Community placement	3,954	353	188	–	–	–
Employment subsidy to unemployed persons to start a business	441	296	320	289	141	162
Employment subsidy to employer to employ a less competitive unemployed person	189	441	727	238	127	67
Career counselling	2,055	7,877	9,494	8,356	8,272	9,891
Public work	–	–	–	170	231	235
Work exercise	–	–	–	446	1,208	650
Work practice	–	–	–	676	792	649
Total measures for disabled persons:	–	–	–	109	60	30
employed with working place adjustment	–	–	–	1	2	1
employed with technical aid	–	–	–	5	3	2
employed with support person	–	–	–	60	30	17
employed using assistance service at the interview	–	–	–	43	25	10

Source: Labour Market Board

Table 15. Receivers of unemployment benefit/allowance and unemployment insurance benefit, 2000 and 2004–2008

	2000	2004	2005	2006	2007	2008
Number of receivers of unemployment benefit/allowance during year	67,412	40,804	32,364	20,057	17,550	22,878
Number of receivers of unemployment benefit/allowance, average per month	26,564	14,417	11,594	6,188	5,934	7,453
Number of receivers of unemployment insurance benefit during year	–	14,888	12,238	8,990	8,011	15,402
male	–	6,040	4,719	3,164	2,858	6,559
female	–	8,848	7,519	5,826	5,153	8,843
Number of receivers of unemployment insurance benefit, average per month	–	5,356	4,270	3,022	3,053	5,282
Receivers of a benefit for collective termination of employment contracts	–	3,999	2,462	1,593	2,448	5,341
Receivers of benefit for the employer's insolvency	–	2,844	2,203	1,256	1,158	2,292

Source: Labour Market Board, Unemployment Insurance Fund

Table 16. Amount of unemployment benefit/allowance and average unemployment insurance benefit per month, 2000 and 2004–2008 (EEK)

	2000	2004	2005	2006	2007	2008
Unemployment benefit/allowance	400	400	400	400	1,000	1,000
Unemployment insurance benefit	–	1,998	2,116	2,416	2,857	3,614
male	–	2,329	2,533	3,009	3,585	4,452
female	–	1,768	1,851	2,081	2,455	3,017

Source: Labour Market Board, Unemployment Insurance Fund

Table 17. **Expenditure on labour market policy, 2000 and 2004–2008**
(million EEK)

	2000	2004	2005		2006		2007		2008	
			Total	incl. foreign aid						
Total expenditure on passive labour market policy	220.5	64.5	52.7	–	38.8	–	83.6	–	116.1	–
unemployment benefit/allowance	119.8	55.0	42.5	–	24.7	–	52.3	–	66.1	–
special social tax	100.7	9.5	10.2	–	14.1	–	31.3	–	49.9	–
Total expenditure on active labour market policy	65.8	102.2	207.2	92.5	233.8	114.9	225.7	83.9	280.6	164.8
Active labour market measures	47.9	64.7	96.1	37.7	108.6	47.0	77.7	3.4	93.2	3.4
labour market services	37.5	51.1	76.9	32.3	87.0	42.0	62.0	3.2	73.0	3.3
labour market training	32.2	41.7	62.7	28.7	71.0	34.9	43.9	3.1	51.7	24.4
employer subsidy	2.1	9.4	14.2	3.6	7.5	3.6	1.8	0.1	1.1	–
work practice	–	–	–	–	5.2	2.7	5.6	0.1	5.1	1.4
work exercise	–	–	–	–	2.4	0.2	9.8	0	14.2	11.2
community placement	3.2	–	–	–	–	–	–	–	–	–
workplace adjustment and technical aid	–	–	–	–	–	–	0.1	–	0.1	0.1
free use of technical aid	–	–	–	–	–	–	0.2	–	0.4	0.2
assistance at a work interview	–	–	–	–	–	–	0	–	0	–
working with support person	–	–	–	–	0.9	0.6	0.7	–	0.4	0.1
support to unemployed persons	10.4	13.6	19.2	5.4	21.6	5.0	15.7	0.2	20.2	7.8
grants	6.1	7.8	10.3	2.3	9.8	2.8	7.5	0.1	5.9	1.3
transport benefits	–	–	–	–	5.3	1.1	5.5	0.1	4.8	0.4
subsidy for starting a business	4.3	5.8	8.9	3.1	6.5	1.1	2.7	–	9.5	6.1
Equal projects	–	–	8.9	6.7	27.5	22.0	22.6	16.9	17.5	13.1
ESF measure 1.3 projects (partners)	–	–	23.9	23.9	33.0	30.2	57.7	57.7	86.1	86.1
Administrative expenses	17.9	37.5	78.3	24.2	64.7	15.7	67.7	5.9	83.8	20.4
Total expenditure on labour market policy	286.3	166.7	259.9	92.5	272.6	114.9	309.3	83.9	396.6	164.8
active labour market policy, %	23.0	61.3	79.7		85.8		73.0		70.8	
Percentage of labour market policy expenditures in GDP	0.31	0.11	0.15		0.13		0.13		0.16	

Source: Ministry of Social Affairs

Working environment

The working environment is the surroundings people work in. Certain hazards exist in working environment, which can cause occupational accidents⁹ or occupational diseases¹⁰ when exposed. Pursuant to Occupational Health and Safety Act, it is the employer's task to assess hazards and risks and, by implementing all possible measures, to decrease exposure to hazards in surroundings, so that exposure to hazard would not affect workers' health. The worse the situation in the working environment is, the more occupational accidents occur and the more occupational diseases are diagnosed.

The internationally accepted indicators to assess work-related health damage are:

- number of occupational accidents per 100,000 workers;
- number of fatal occupational accidents per 100,000 workers;
- number of occupational diseases per 100,000 workers.

In order to assess the situation of the working environment, Estonian data is compared to the average data of the old member states of the European Union (hereinafter EU-15). Data is based on the Eurostat database and reports of the Labour Inspectorate.

While the number of occupational accidents in EU-15 decreases continuously, the number of registered occupational accidents in Estonia is quite stable (see Figure 1). Different methods of data collection should be taken into account when making comparisons. While occupational accidents are registered on the basis of employers' reports in Estonia, the statistics of EU-15 occupational accidents is based on insurance data in the case of ten countries and weighted average of employers' reports in the case of five countries. Eurostat has developed a methodology that gives a more comparable result to harmonise the number of occupational accidents, considering data collection systems of different countries (by weighing the number of occupational accidents based on employers' reports). In the near future, weighing of registered occupational accidents by questionnaire surveys is planned to be introduced in Estonia, which will help to decrease under-reporting of occupational accidents in Estonia and improve comparability of the occupational accidents figures in Estonia and other EU member states.

From 2004, the absolute number of registered occupational accidents has shown a constantly increasing trend. 4,059 occupational accidents were registered in 2008, which is 9% more than in 2007. Throughout years, the number of occupational accidents happening to men has

⁹ An occupational accident is damage to the health or death of a worker, which occurs in the performance of a duty assigned by an employer or in other work performed with the employer's permission, during a break included in the working time, or during other activity in the interests of the employer.

¹⁰ An occupational disease is a disease, which is brought about by risk factors present in the working environment and included in the list of occupational diseases, or by the nature of the work.

been about twice as large as the number of occupational accidents happening to women. By economic sectors, there are more than average occupational accidents per 100,000 workers in Estonia in the sectors of manufacturing, agriculture, and construction (see Figure 2).

International statistical reports use the number of incapacity-for-work days, associated with an accident, to make comparisons of occupational accidents between countries. Occupational accidents, which result in more than 30 days of incapacity for work, are considered to be severe. Estonia's distribution of occupational accidents by the number of incapacity days (see Figure 3) indicates a decrease in severe occupational accidents in 2008, but the number of minor occupational accidents, with less than four incapacity days, has increased by almost 100% in recent years.

When comparing Estonian working environment situation to other European countries, it is reasonable to use statistics of fatal occupational accidents, because there is no problem of under-reporting in this area. In order to draw statistical comparisons between countries, Eurostat has adopted a method where the number of fatal occupational accidents is measured in eight economic sectors: agriculture; manufacturing; electricity, gas and water supply; construction; wholesale and retail trade; accommodation and catering; financial intermediation; and real property development. In comparison to the European average, the number of fatal occupational accidents in Estonia per 100,000 workers has been considerably higher. While the level of fatal cases in EU-15 has been between 2.7 and 2.3 in the last five years, it has been between 6.4 and 3.4 in Estonia (see Figure 4). The large fluctuations between years can be explained by the specific situation in Estonia. The number of fatal cases is generally low due to the small size of the country (see Table 2), which means higher dependency of statistical indicators on a few instances occupational accidents. On the basis of fatal accidents, construction and manufacturing are the most dangerous fields (see Figure 5). As proportions per 100,000 workers should be used instead of absolute figures, when drawing any conclusions, the first place in the statistics of fatal occupational accidents in 2008 is taken up by the mining industry (see Table 3), which has been one of the most hazardous sectors in the past four years.

Occupational disease is health damage which is caused by working in health-damaging surroundings for a long time period. Occupational disease is directly caused by hazards of working environment. In the case of occupational disease, the injured person has a reduced ability to work in the chosen profession and he or she is entitled to compensation of damages by the employer. In comparison to EU-15 occupational disease trends, a clear under-registration of occupational diseases occurs in Estonia (Figure 6).

Pursuant to Occupational Health and Safety Act, occupational disease is diagnosed by occupational health doctor, who, in order to do this, collects data about worker's present and previous working conditions and type of work. The reasons for under-registration of occupational diseases are related to:

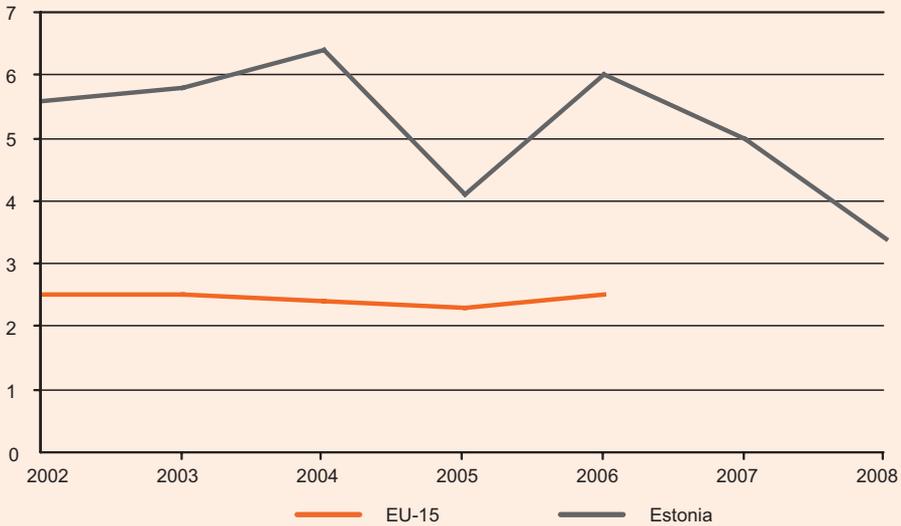
- lack of occupational health doctors;
- financing problems of diagnosis of occupational diseases, due to which diagnostic activities have been performed mainly by the two largest hospitals;

Table 2. Number of fatal occupational accidents, 2000 and 2004–2008

	2000	2004	2005	2006	2007	2008
Total	27	34	24	27	21	21
male, %	92.6	70.6	83.3	81.5	100.0	90.5
female, %	7.4	29.4	16.7	18.5	0	9.5

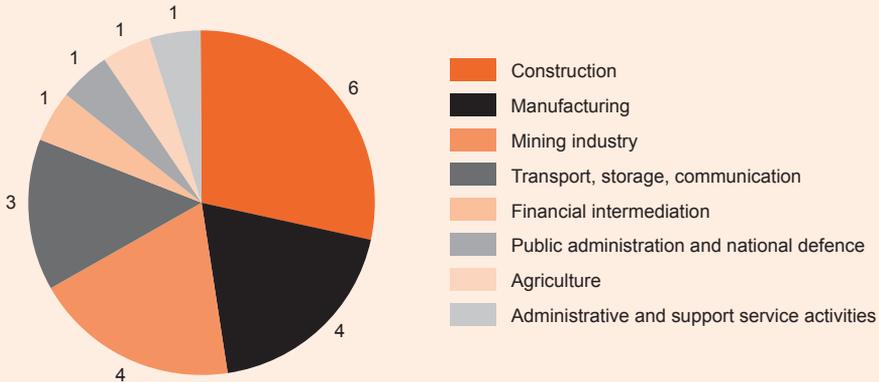
Source: Labour Inspectorate

Figure 4. Number of fatal occupational accidents per 100,000 workers, 2002–2008



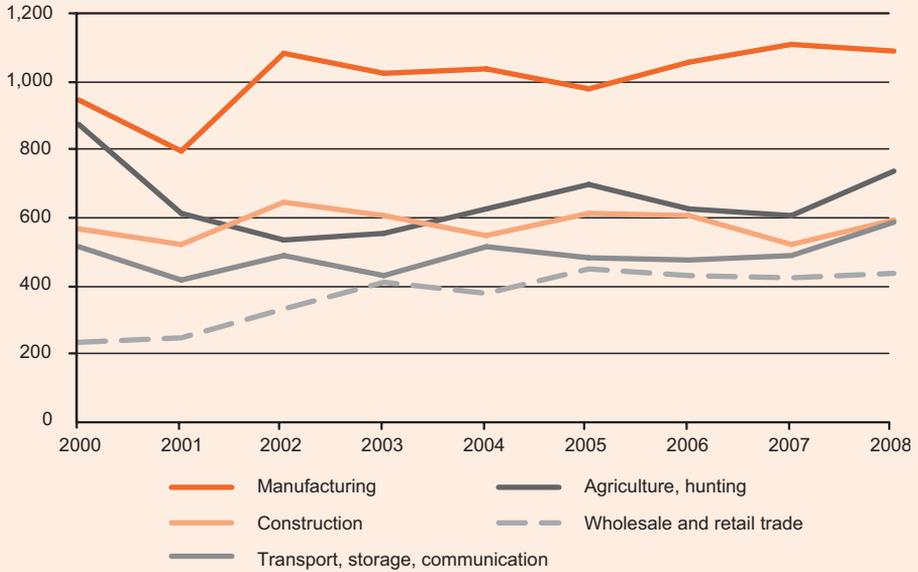
Source: Labour Inspectorate; Eurostat

Figure 5. Distribution of 21 fatal occupational accidents between sectors, 2008



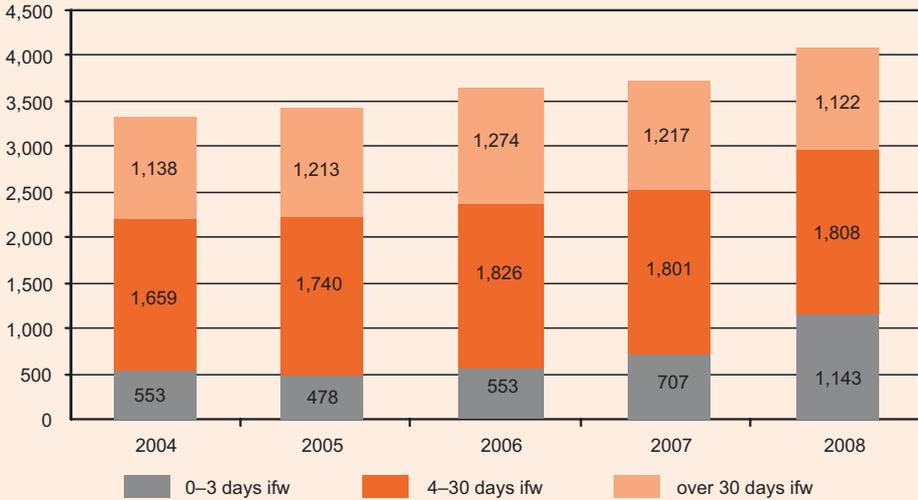
Source: Labour Inspectorate

Figure 2. Occupational accidents per 100,00 workers by most dangerous sectors, 2000–2008



Source: Labour Inspectorate

Figure 3. Number of occupational accidents by days of incapacity for work, 2004–2008



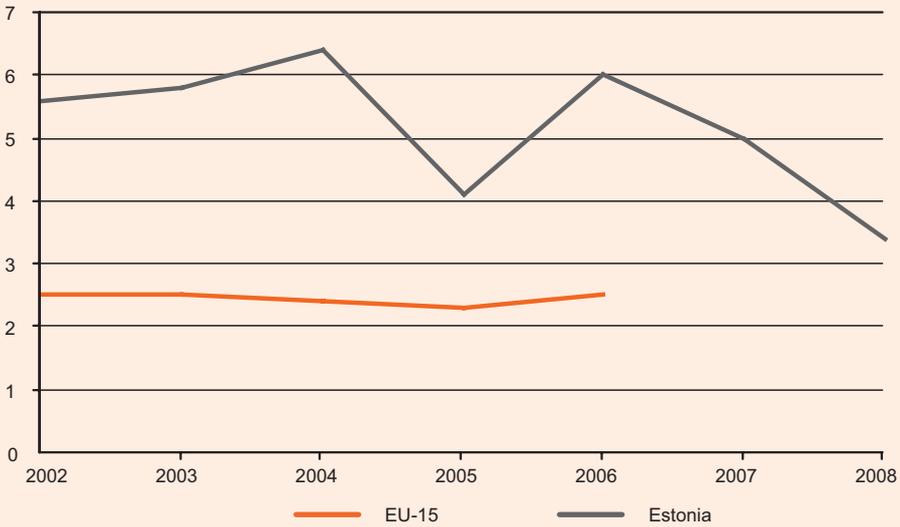
Source: Labour Inspectorate, Health Insurance Fund (communication of data takes place since 2004)

Table 2. Number of fatal occupational accidents, 2000 and 2004–2008

	2000	2004	2005	2006	2007	2008
Total	27	34	24	27	21	21
male, %	92.6	70.6	83.3	81.5	100.0	90.5
female, %	7.4	29.4	16.7	18.5	0	9.5

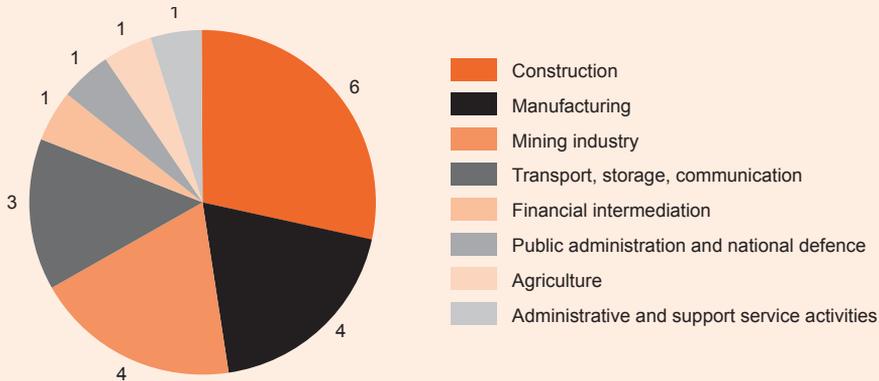
Source: Labour Inspectorate

Figure 4. Number of fatal occupational accidents per 100,000 workers, 2002–2008



Source: Labour Inspectorate; Eurostat

Figure 5. Distribution of 21 fatal occupational accidents between sectors, 2008



Source: Labour Inspectorate

Table 3. Number of fatal occupational accidents per 100,000 workers by sectors, 2000 and 2004–2008

	2000	2004	2005	2006	2007	2008
Agriculture, forestry and fishing	8	6	3	6	6	4
Mining industry	0	0	17	38	18	67
Manufacturing	7	4	3	7	3	3
Energy, gas, steam and conditioner air supply	20	17	8	0	0	0
Construction	8	10	2	9	6	7
Wholesale and retail trade; repair of motor vehicles	3	3	5	2	5	0
Accommodation and catering	0	12	0	0	0	0
Transport and storage	9	14	11	0	4	6
Finance and insurance activities	0	0	29	0	0	0
Real property intermediation	0	11	10	6	0	10
Public administration, national defence, social insurance	0	8	0	10	5	3
Education	0	2	0	0	0	0
Health and social care	0	0	3	0	0	0
Other sectors	4	4	7	5	1	2

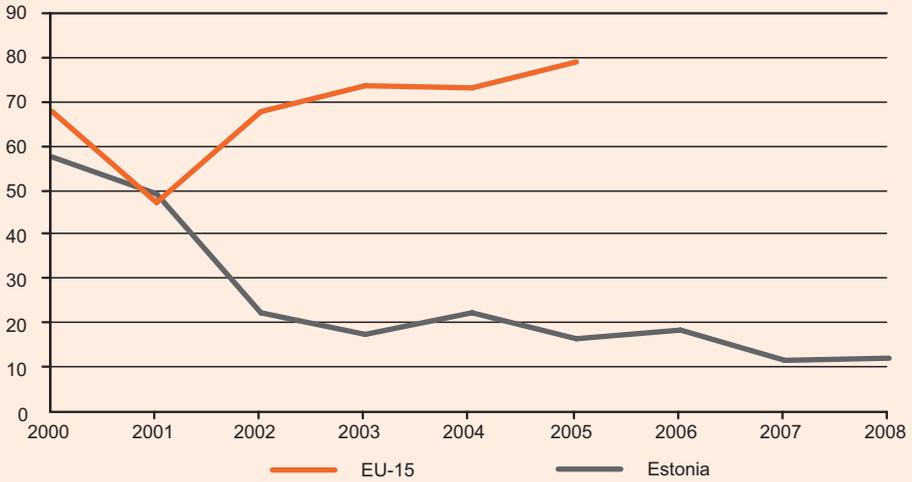
Source: Labour Inspectorate

Table 4. Number of persons diagnosed with occupational disease for the first time, 2000 and 2004–2008

	2000	2004	2005	2006	2007	2008
Total	296	132	94	117	74	76
male, %	...	55.3	54.3	45.6	41.9	38.2
female, %	...	44.7	45.7	56.4	58.1	61.8

Source: Labour Inspectorate

Figure 6. Number of occupational disease cases per 100,000 workers in the European Union and Estonia, 2000–2008



Source: Labour Inspectorate; Eurostat

Gender equality

Gender equality means equal rights, obligations, opportunities and responsibility for women and men in working life, obtaining education and participating in other domains of social life. Gender inequality is evident, for instance, in men and women's different access to resources – be it money, time, power and authority, status, relations or information. The structure of the present collection proceeds from the principle that as many possible indicators in different chapters would be distinguished by gender as possible to enable comparing the situation of men and women. This chapter mainly analyses the unequal distribution of resources among men and women, including in the fields of power and politics, labour market, reconciliation of work and family life, and education.

During the whole re-independence period of Estonia, there have been less than 25% of women among the members of Estonian parliament (the Riigikogu). However, their percentage has increased with each election. In 2007, the percentage of women among the members of the Riigikogu was 24% (that is 24 of 101 members were female), which is the largest proportion since 1992. An important prerequisite of women's election into parliament is their representation among election candidates. The 2007 election of the Riigikogu indicated a positive shift in the representation of women: in comparison to the parliamentary election of 2003, the percentage of women among election candidates increased from 21% to 27%. Despite the fact that the proportion of female candidates in the lists of candidates has increased, their "value" as vote collectors for parties is continuously smaller in comparison to male candidates. In the Riigikogu election of 2007, an average female candidate collected 456 votes, while a male candidate collected 605 votes, which means 149 votes more on the average¹¹.

Similarly to other developed countries, men and women in Estonia are also employed in different fields of activity and occupations. Women are traditionally dominant in the fields of activity and occupations which are not very highly valued in society (for instance in education as kindergarten teachers, teachers; or in welfare services as social workers). The persistence of gender stereotypes is among other things also demonstrated by the fact that the distribution of fields of activity by gender has not changed considerably from the end of 1990s. Proportion of women among employees in leading positions is also considerably smaller in comparison to men. Although women constitute approximately 75% of midlevel specialists and professionals (including, for instance, all education workers with higher education), men are still dominating among managers, senior officials and legislators. According to Eurostat, segregation of occupations and fields of activity by gender in Estonia in 2007 was the highest in the European Union.

Distribution of labour market by gender has in turn considerable effect on the difference of men and women's average wages. During the whole period of re-independence, the average

¹¹ National Electoral Committee.

hourly gross wages of women has been almost by a quarter lower than that of men. Difference between average hourly gross wages of men and women in Estonia is considerably larger than the European Union average and, according to data of 2007, the wage difference of men and women in Estonia (30.3%)¹² was the largest in comparison to other EU member states.

From the perspective of gender equality, the topic of reconciliation of work and family life is also very important – both distribution of housework and parents' employment are vivid examples of that. Being a parent affects the participation of Estonian men and women in employment to a considerable extent. Although in Estonia, the employment rate of women is relatively high, there is a large difference in the employment rates of women without small children and women with small children (children aged 0–6). While the employment rate of women without small children in 2008 was 82.2%, the employment rate of women with small children was only 55.1%. This indicates that mothers of children aged 0–6 often withdraw from any form of employment. At the same time, in case of men, small children are rather a factor contributing to employment – the employment rate of fathers of small children was somewhat higher (93.7% in 2008) than the employment rate of childless men (82.3% in 2008). Therefore, while employment rates of men and women with small children differ to a great extent, the employment indicators of women and men without small children are relatively similar.

Distribution of housework in Estonian families is traditional. According to the population survey conducted in 2009¹³, women do the majority of the daily, routine and time-consuming housework in families with two parents and children aged under 18 years. Women are mostly responsible for the maintenance of clothes, cooking, dishwashing, room cleaning and taking care of children. Men are mostly responsible for activities related to car and repair works, which are not everyday activities and are often purchased as a service.

According to this survey, important considerations in raising boys and in developing their skills include technical skills, driving a car, taking initiative and succeeding. At the same time, important considerations in raising girls include good manners and etiquette, cooking, maintaining good appearance and home cleaning skills.

Education is also an important resource that is accessed differently by gender. The number of those who drop out from general education has significantly decreased in comparison to 2006 – while around 1,300 students dropped out in the school year 2006/2007, only around

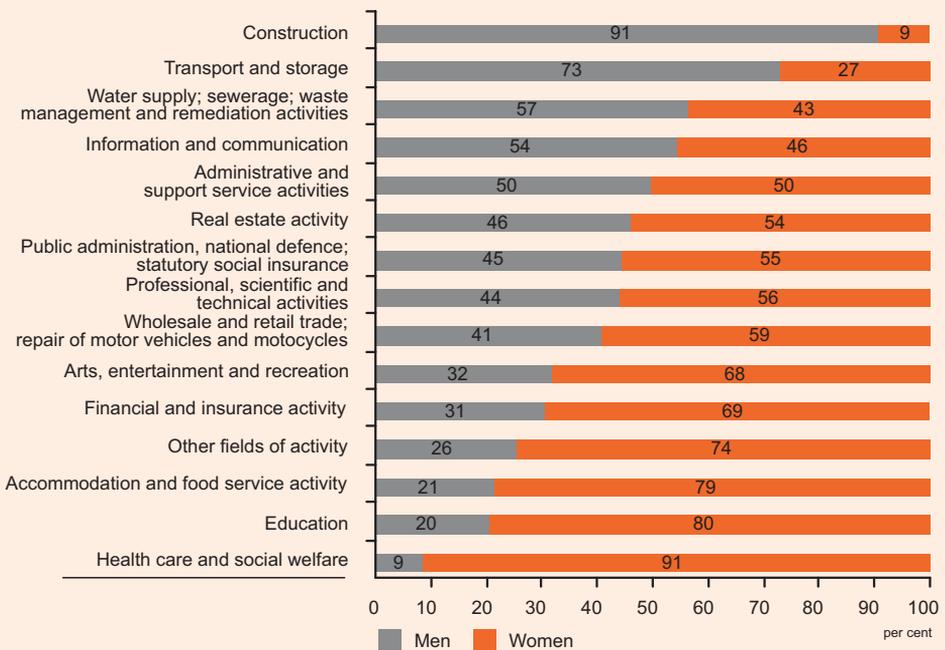
¹² The data on gender wage gap is based on the European Structure of Earnings Survey, conducted every four years, and, for the intermediate years, on the data from the national sources of the member states. The method for calculating the gender wage gap data was changed in 2008. According to the new method, the data on European countries does not include the fields of public administration and national defence; statutory social insurance; agriculture, hunting and forest management; fishing; paid household work; and extra-territorial organisations and units. In addition, the European Structure of Earnings Survey does not include companies with less than 10 employees and, unlike the previous method, includes all employees, irrespective of age and the number of hours worked. The indicators based on the new method are published by Eurostat on the years 2002, 2006 and subsequent years.

¹³ Gender equality monitoring survey 2009 (unpublished material).

500 did the same in the school year 2008/2009. It has to be noted, however, that those, who go missing from the educational system before passing the minimum school-leaving age form a small minority. However, the majority of dropouts are boys, who may or may not continue their education and whose future in the labour market and coping in further life are therefore problematic. Girls do better at school and are in the strong majority, first and foremost, among students on the higher level of education. The educational system reflects the gender stereotypes in society also in the choices of study subjects of young men and women. Gender division of broad groups of study is also apparent in the fact that male and female students tend to study “established” male and female specialties, which is later also reflected in the gender division of the labour market. By broad groups of study, in 2008/2009, for instance, most female students studied in the field of education (92.2%) and health and welfare (88.8%), while the proportion of female students was lowest in the field of technology, production and construction (25.3%).

Employment

Figure 1. **Employment in economic activities¹ by sex, 2008**



¹ According to the Estonian Classification of Economic Activities (ECEA) 2008.

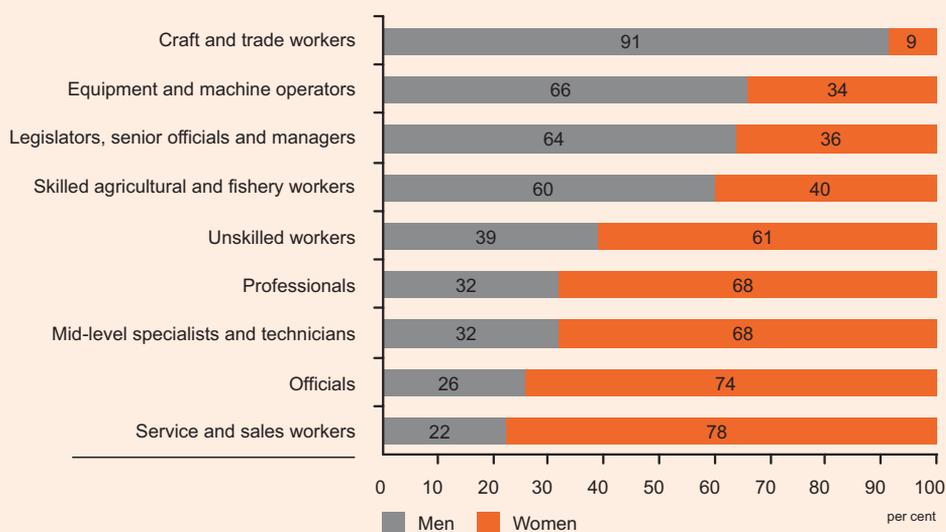
Source: *Statistics Estonia*

Table 1. **Persons running as candidates for the Riigikogu and elected persons by sex, 1992, 1995, 1999, 2003 and 2007**

	1992	1995	1999	2003	2007
Total candidates	628	1,256	1,884	963	975
male, %	86	82	73	79	73
female, %	14	18	27	21	27
Total elected	101	101	101	101	101
male, %	88	88	82	81	76
female, %	12	12	18	19	24

Source: National Electoral Committee

Figure 2. **Employment in different occupations by sex, 2008**



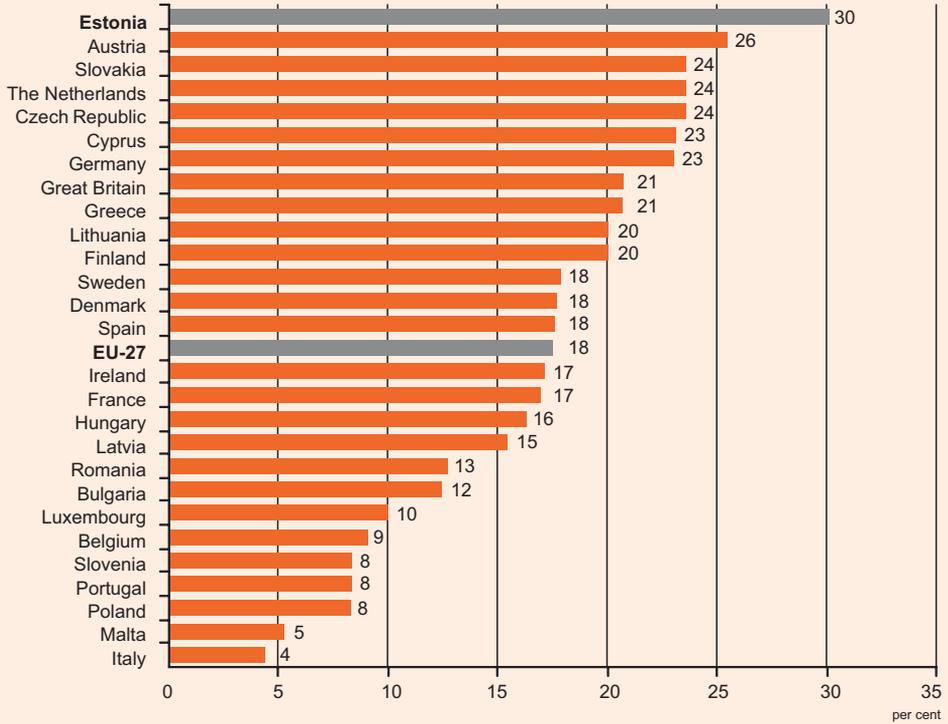
Source: Statistics Estonia

Table 2. **Male and female employment rate in the age group 20–50, with and without small children (0–6 years of age), in Estonia, 2000, 2004 and 2006–2008**

	2000	2004	2006	2007	2008
With small children					
male, %	88.3	89.4	93.0	96.3	93.7
female, %	45.4	49.0	54.5	54.1	55.1
Without small children					
male, %	72.8	74.8	81.7	82.3	82.3
female, %	77.2	77.7	80.5	81.2	82.2

Source: Statistics Estonia

Figure 3. **Gender wage gap¹ in the European Union², 2007**



¹ Due to changes in the method of measuring the gender wage gap, the indicator does not include data from public administration and national defence; statutory social insurance; agriculture, hunting and forest management; fishing; paid household work; and extra-territorial units.

² Initial data – Italy, Malta, EU 27, Greece, Estonia.

Source: Eurostat

Attitudes

Figure 4. Distribution of housework in families with two parents¹ and at least one child under 18 years of age, 2009

Question: In your family, who is mainly responsible for the completion of the following household chores? Answer option: "Mostly I". Percentage of families where the corresponding housework exists.

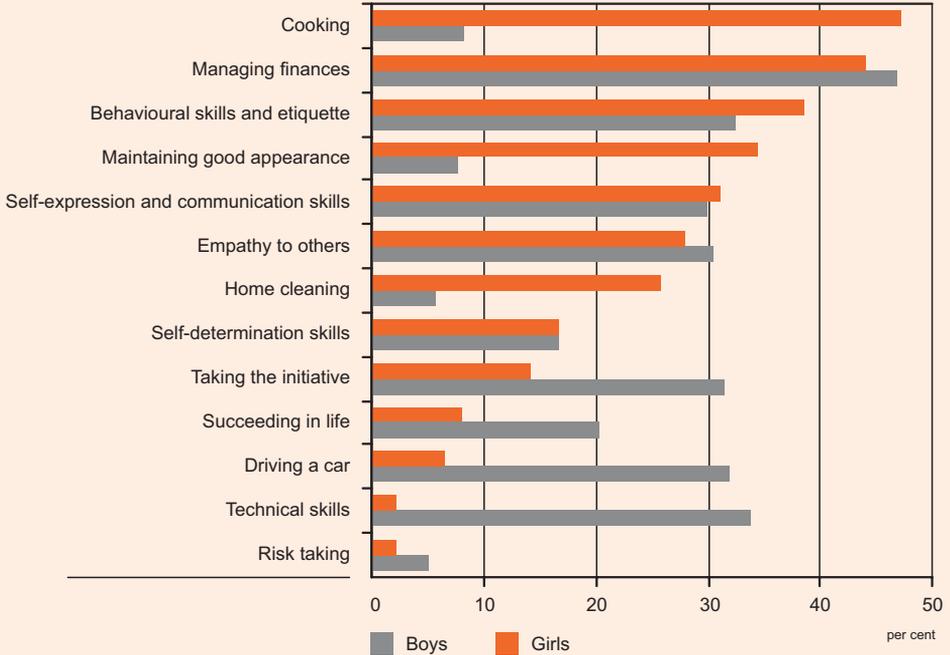


¹ Married or co-habiting respondents with at least one child under 18 years of age.

Source: Ministry of Social Affairs, Gender equality monitoring survey 2009 (unpublished material)

Figure 5. Skills and characteristics, which should be taken into particular consideration when raising boys and girls (three most important skills), 2009

Question: In your opinion, which skills and characteristics should receive special attention when raising boys and girls?



Source: Ministry of Social Affairs, Gender equality monitoring survey 2009 (unpublished material)

Education

Table 3. Persons leaving school¹ in general education² by sex, 2006–2008

Academic year	2006/2007	2007/ 2008	2008/2009
Total	1,292	721	543
boys, %	64.2	62.1	60.7
girls, %	35.8	37.9	39.3

¹ School-leavers in the middle of academic year.

² Incl. evening school and distance learning and extended study.

Source: Statistics Estonia

Table 4. **Graduates from higher education, academic year 2007/2008**

Education level	Total	Male, %	Female, %
Total¹	11,345	30.7	69.3
Professional higher education	3,863	27.4	72.6
Bachelor's study	4,591	32.1	67.9
Integrated bachelor's and master's study	404	28.7	71.3
Master's study	2,320	32.2	67.8
Doctoral study	161	52.8	47.2

¹ Incl. graduates from higher vocational education (admitted in the period 1999–2002).

Source: *Statistics Estonia*

Table 5. **Percentage of female students in higher education by study fields, 2000, 2004 and 2006–2008**
(per cent)

Field of study and academic year	2000/2001	2004/2005	2006/2007	2007/2008	2008/2009
Education	87.6	89.3	91.5	91.6	92.2
Health and welfare	85.6	88.7	89.6	88.8	88.8
Humanities and arts	74.8	76.1	73.9	73.7	73.7
Social studies, business and law	60.5	65.4	65.8	66.6	67.0
Services	44.5	49.8	52.1	54.1	54.7
Agriculture	45.7	51.6	52.3	53.6	54.2
Nature and precision sciences	38.8	38.8	37.6	38.7	38.7
Technology, production and construction	28.7	27.5	26.1	26.2	25.3

Source: *Statistics Estonia (2000–2004), "Estonian Education Information System" (2005–2008)*

Health care

There are a number of laws in Estonia that regulate the activities in the field of health.

The aim of Public Health Act is to protect and promote people's health and prevent diseases. This aim of the Act is achieved by obligations of state, local governments, legal persons governed by public and private law and natural persons, and with the measure systems of state and local governments.

The Communicable Diseases Prevention and Control Act governs the organisation of control of communicable diseases and procedure of providing health care service to infected persons, and provides obligations to prevent and control communicable diseases. The Mental Health Act regulates the procedure and conditions for provision of psychiatric care, involuntary care, coercive treatment, and the duties of the state and local governments in the organisation of psychiatric care, and the rights of persons in receiving care. The Medicinal Products Act governs handling and prescription of medicines, issue of marketing authorizations, clinical studies and advertisement and surveillance and responsibility related to medicinal products.

The provision of medical care is mainly regulated by the Health Services Organisation Act and the Health Insurance Act. The Health Services Organisation Act provides the organisation of and the requirements for the provision of health services, and the procedure for the management, financing and supervision of health care as well as the requirements for the registration of health care professionals. Health services are defined as the activities of health care professionals (doctors, nurses, midwives) for the prevention, diagnosis or treatment of diseases, injuries or intoxication in order to reduce the malaise of persons, prevent the deterioration of their state of health or development of the diseases, and restore their health. In-patient health services are services what require the patient to stay overnight at a hospital. Out-patient health services are services where the patient's stay at health care institution does not exceed a few hours. This includes day surgery and day care services.

Health care is financed from funds designated for health insurance in the state budget via the Health Insurance Fund, as well as from direct allocations from the state budget, municipal and city budgets, from patients' contributions and from other sources.

The compulsory health insurance applies in Estonia since 1992. The health insurance system is designed for compensating the insured persons for the cost of disease prevention and treatment, the cost of medicines and medical appliances and for paying benefits for temporary incapacity for work and other benefits. Health insurance is based on solidarity of insured people and limited cost-sharing, and it proceeds from the principle of providing services according to needs of insured people, equal regional access to health care and efficient use of

the health insurance funds. Employers are obligated to pay social tax for employees of which includes 13% of gross wages for health insurance.

Insured persons are permanent residents of Estonia or persons living in Estonia under a temporary residence permit, the social tax for whom is paid by the employer or the state¹⁴ or by themselves. In addition to the above, the Health Insurance Act provides that the following persons for whom social tax is not paid are equivalent to insured persons:

- pregnant women starting from the 12th week of pregnancy;
- children up to 19 years of age;
- recipients of state pension in Estonia;
- an insured person's dependent spouse with less than five years until retirement age;
- students of up to 21 years of age acquiring basic education, students of up to 24 years of age acquiring general secondary education or vocational secondary education after basic education, students acquiring vocational secondary education after secondary education and permanent residents of Estonia acquiring university education in Estonian educational institutions or in equivalent educational institutions abroad.

Uninsured persons have the right to emergency care. Emergency care means health services, which are provided by health care professionals in situations where postponement of care or failure to provide care may cause death or permanent damage to the health of the person requiring care.

The Health Insurance Fund finances outpatient and inpatient services provided to insured persons, and in certain cases also rehabilitation, nursing and dental care services. Dental care is provided free of charge to children under 19 years of age. Free dental care services are included in the list of health services of the Estonian Health Insurance Fund and are provided by health service providers with whom the Health Insurance Fund has concluded an agreement for financing treatment. From 1 January 2009, the dental care benefit of 300 EEK is available to persons who have been granted a pension for incapacity for work or an old-age pensions and to insured persons over 63 years of age. A higher benefit rate of 450 EEK applicable to pregnant women, to mothers of a child under one year of age, and to persons who require special dental care services as a result of the provision of health care services. Once every three years, the Health Insurance Fund compensates 4,000 EEK of the cost of dentures to insured persons of 63 years of age or older, old-age pensioners, and incapacity-for-work pensioners.

¹⁴ The state pays social tax for the following categories of persons: recipients of parental benefit; recipients of child care allowance; persons receiving the benefit of a parent with seven or more children; persons for whom caregiver's allowance is paid pursuant to the Social Benefits for Disabled Persons Act until they reach retirement age; in certain cases workers who have lost 40 per cent or more of their capacity for work; unemployed spouses of diplomats and employees in Estonian foreign missions until they reach retirement age; conscripts serving in the Defence Forces; unemployed persons who have participated in the elimination of the consequences of a nuclear disaster, nuclear testing or nuclear power station failure until they reach retirement age; persons receiving unemployment benefit; Estonian citizens and persons of Estonian origin, their spouses, children and parents who have settled in Estonia and receive social benefits pursuant to the Social Welfare Act. The social tax for persons receiving unemployment insurance benefit is paid by the Unemployment Insurance Fund.

Benefit for temporary incapacity for work is financial compensation paid by the Health Insurance Fund to an insured person on the basis of a certificate of incapacity for work in cases where the person does not receive income subject to individually registered social tax due to a temporary release from their duties. From 2002, the benefits for incapacity for work are calculated on the basis of the insured person's income calculated on the basis of the social tax paid during the previous year. The percentage of the benefit paid of the average income per calendar day is 70% in the case of illness, 80% in the case of caring for a sick child under 12 years of age at home, and 100% in the case of childbirth and occupational injury. The benefit period is variable: for up to 7 successive days in case of caring for a sick family member and quarantine, for up to 14 days in case of caring for a sick child under 12 years of age, and generally for up to 182 days in case of illness and occupational accident. In the case of certificates for sick leave, benefits from the fourth to the eighth day of leave are paid by the employer (calculation is based on the average wages paid in the last six months) and from the ninth day by the Health Insurance Fund (based on the social tax paid in the previous calendar year). In the case of certificates for care leave and maternity leave, the benefits are paid by the Health Insurance Fund from the first day. An exception is an illness or injury to a pregnant woman, when the Health Insurance Fund pays the benefit from the second day.

Compensation for medicinal products: the Health Insurance Fund pays a compensation to the pharmacies for a part of the price of the medicinal products entered into the list of subsidised medicinal products. From 1 January 2003, the Health Insurance Fund also pays an additional benefit for medicinal products if an insured person has paid more than 6,000 EEK a calendar year for subsidised medicinal products. The additional benefit helps to compensate the costs of medicinal products primarily to those insured persons who have to take medicines for extended periods of time and in various combinations of different products.

The provision of emergency medical care and emergency care to uninsured persons, as well as the formation, preservation and renewal of national security reserves of medicinal products and medical devices, expert evaluations ordered by a medical care quality commission, national health care programmes, health care related research and development, national investments under the Hospital Network Development Plan approved by the Government of the Republic, preparations for provision of health care services in emergency situations, and health information systems are financed from the state budget via the Ministry of Social Affairs. Independent nursing care, provided in the course of 24-hour special care, is financed through the Social Insurance Board. The provision of health care services to imprisoned persons, the application of influencing medical agents on the basis of a court ruling, and forensic psychiatric examinations and forensic pathological examinations are financed from the state budget via the Ministry of Justice. The Ministry of Defence is responsible for health care allocations from the state budget in the government area of the Ministry of Defence: determination of fitness to serve in the Defence Forces; creation, preservation and renewal of the medical supplies, including medicinal products, of the Defence Forces required to ensure the functionality of health care during peacetime and war-time; provision of medical rehabilitation to members and retired members of the Defence Forces, members of the Defence League, persons repressed by occupation regimes and family members of persons killed when perfor-

ming their service duties in the Defence Forces; and investments in building and renovation of medical centres of the Defence Forces.

The provision of health care services and other health care expenditure is financed from municipal budgets upon the relevant decision of the council of the local municipality.

The following section was prepared using the health care statistics collected by the National Institute for Health Development¹⁵ and data from the Ministry of Social Affairs, the Health Protection Inspectorate, the tuberculosis registry, the cancer registry and the Estonian Health Insurance Fund.

At the end of 2008, 1,315 legal persons (i.e., institutions) provided health services in Estonia, whereas the proportion of private sector of the general number was 95%. Private sector includes institutions with no equity belonging to state or local government or where the equity forms less than 50% in the company; in public sector institutions, the majority holding belongs to the state or local government. While only a third of the hospitals belong to private sector, this percentage is almost 100% in the case of providers of family physician's services and dental care institutions.

The number of doctors and nurses per 10,000 inhabitants has slightly increased in 2007 in comparison to 2000. The number of doctors per 10,000 inhabitants was 31.0 in 2000 and 33.6 in 2007, with the corresponding figures for nurses being 62.3 and 67.4. The number of nursing specialists per doctor has been around two persons in the period observed. It appears from the age distribution of health care professionals that the characteristic features are a large proportion of older doctors and limited addition of young doctors. The number of dentists has increased by 12% during the past seven years. In 2007, there were 8 dentists per 10,000 inhabitants (7.6 in 2000).

There is a noticeable increase in the use of outpatient care, as indicated by the increasing number of outpatient consultations and day treatment cases. The number of consultations in 2008 was 8.7 million, which makes, on the average, 6.5 consultations per persons. The number of consultations per person in 2000 was 6.0. Number of day treatment cases has increased 1.1 times from 2007 to 2008.

Larger changes can be seen in the development of nursing care. The number of independent consultations of the nursing specialists per 100 persons rose to 41 in 2008. Wider spread of home nursing and care services has increased the number of home visits by nursing specialist. A comparison of the year 2008 with 2004 indicates that the number of home visits has more than tripled, rising to 316,000 visits in 2008. Number of home visits of the nursing specialists per 100 persons has increased from 7 in 2004 to 24 in 2008.

¹⁵ The annual health statistics is published on the web site of the National Institute for Health Development (NIHD) at www.tai.ee.

Based on survey data, the increase is not restricted to the number of outpatient visits, but is also evident in the increasing proportion of population using health services. In 2008, 70% of the adult population visited a family doctor, 47% a specialist, and 49% a dentist. After the dental care of adults was made chargeable in 2001, the number of visits to dentists showed a decreasing trend, reaching the minimum in 2003. In conjunction, the percentage of adults using dental care dropped from 42% to 32% of the population in 2001–2003. The economic growth of the following years created better opportunities for the people to improve their dental health. The increasing trend in the use of dental services stopped in 2008.

Decrease of hospital beds has taken place, accompanied by shortening of average duration of stay and increase of bed turnover. Although the number of hospital beds has decreased by 23% by the end of 2008 in comparison to the end of 2000, the number of hospitalised persons per 1,000 inhabitants has decreased only by 7%. While in 2000, 204 persons per 1,000 inhabitants received hospital care and additionally 15 persons received day care (219 in total), then in 2007, 189 persons per 1,000 inhabitants received hospital care and 40 persons day care (229 in total). The number of active care hospital beds has decreased by 31% in seven years. In 2008, there were 38 active care beds per 10,000 inhabitants; the corresponding number in 2000 was 56. In the category of long-term care beds, decreases in comparison to 2000 have been recorded in the number of psychiatry beds (30%) and tuberculosis beds (15%). The number of nursing care beds per 10,000 inhabitants aged 65 and more has, however, increased in the observed period from 40 to 63, which still does not meet all the needs (the target set for the year 2015 is 100 beds). There is also a noticeable change in the structure of hospital beds: while the number of nursing care beds constituted 8% of the total number of beds in 2000, it rose to 19.1% in 2008.

The number of new cases of tuberculosis in the observed period has continuously decreased, which characterises efficient work of national tuberculosis programs (1998–2003, 2004–2007, 2008–2012). Resulting from this, the number of new cases has decreased to half of the level of 1997–1998, that means 30 cases per 100,000 inhabitants. In 39 of the new cases and relapses of tuberculosis in 2008, the patients were also HIV positive (constituting 9.4% of the total number of new cases and relapses of tuberculosis).

Alongside with the general decrease in the morbidity in infectious diseases, the number of new notified cases of HIV has slightly decreased, but the number of new AIDS cases is increasing. After the peak of morbidity to HIV in 2001 (with 1,474 new cases registered in one year), 545 new persons with HIV were registered in 2008. The percentage of women among new notified HIV cases has increased over the years, rising slightly above 42% in 2008 (in 2000, 20% of new HIV cases were women). On 1 December 2005, the government approved the National HIV and AIDS Strategy for the years 2006–2015 and the corresponding action plan for 2006–2009. The general aim of the strategy is to achieve a stable decreasing trend in the spread of HIV and to prevent a widespread epidemic in the general population.

The number of new cancer cases has increased on the basis of data from 2006. As at 31 December 2003, there were 35,384 persons (12,066 men and 23,318 women) with diagnoses

Table 2. **Practising health care professionals¹, 2000 and 2004–2007**
(at the end of the year)

	2000	2004	2005	2006	2007
Doctors²	4,233	4,312	4,294	4393	4,504
family doctors	448	818	845	853	854
Dentists²	1,041	1,166	1,202	1,196	1,167
Pharmacists	815	845	851	869	873
Nursing specialists and other graduates of medical school	9,916	10,608	10,699	10,833	11,252
nursing specialists	8,517	8,676	8,845	8,803	9,042
nurses	8,010	8,270	8,421	8,359	8,603
midwives	507	406	424	444	439
other health care professionals ³	1,399	1,932	1,854	2,030	2,210
dispensing chemists	...	587	593	582	588
Health care professionals per 10,000 inhabitants					
doctors	31.0	32.0	31.9	32.7	33.6
family doctors	3.3	6.1	6.3	6.4	6.4
dentists	7.6	8.7	8.9	8.9	8.7
pharmacists	6.0	6.3	6.3	6.5	6.5
nursing specialists and other graduates of medical school	72.5	78.7	79.6	80.7	83.9
nursing specialists	62.3	64.4	65.8	65.6	67.4
nurses	58.6	61.4	62.6	62.3	64.2
midwives	3.7	3.0	3.2	3.3	3.3
other health care professionals ³	10.2	14.3	13.8	15.1	16.5
dispensing chemists	...	4.4	4.4	4.3	4.4

¹ Doctor, dentist, nurse and midwife, when they are working in their specialty and are registered at Health Care Board. Health care professionals can provide health care services within the limits of the specialty they have acquired and to which they have been issued a certificate about being registered as a health care professional. To provide chemist service, dispensing chemist and pharmacist have to be registered in the national register of dispensing chemists and pharmacists.

² Numbers of practising doctors and dentists, incl. residents and interns.

³ Other mid-level health care and care personnel with professional education; from these, dispensing chemists have been presented separately for the years 2003–2007.

Source: National Institute for Health Development

Medical care

Table 1. **Providers of health services, 2000, 2004 and 2006–2008**
(at the end of the year)

Type of institution ¹	2000	2004	2006	2007	2008
Total hospitals	68	51	55	57	60
regional hospital ²	...	3	3	3	3
central hospital ³	...	4	4	4	4
specialised hospital	11	6	7	9	10
general hospital	39	12	12	11	11
local hospital	...	5	6	6	6
rehabilitation hospital	...	4	3	3	3
nursing care hospital	12	17	20	21	23
others	6	-	-	-	-
Outpatient medical care institutions	540	715	732	733	733
general medical care institutions	367	482	486	488	482
family physician praxis	292	473	473	476	472
specialised medical care institutions	173	233	246	245	251
Dental care institutions	364	443	453	446	457
Emergency medical care institutions⁴	7	7	5	5	5
Nursing care institutions⁵	...	8	12	22	24

¹ Categorisation of providers here bases on the main health care service provided (in the case of hospitals, providing inpatient care).

² Regional hospitals: SA Tartu Ülikooli Kliinikum, SA Põhja-Eesti Regionaalhaigla and SA Tallinna Lastehaigla.

³ Central hospitals: AS Ida-Tallinna Keskhaigla, AS Lääne-Tallinna Keskhaigla, AS Ida-Viru Keskhaigla, SA Pärnu Haigla.

⁴ In addition to independent emergency medical care institutions, emergency units also exist as subunits of other health care institutions (generally hospitals). At the end of 2007 and 2008, there were 19 such emergency units and a total of 24 emergency care service providers.

⁵ Nursing care is a health service provided by nursing specialist. Independent nursing care services are home nursing care service and school health care.

Source: National Institute for Health Development

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nursing specialists and other graduates of medical school	72.5	78.7	79.6	80.7	83.9
nursing specialists	62.3	64.4	65.8	65.6	67.4
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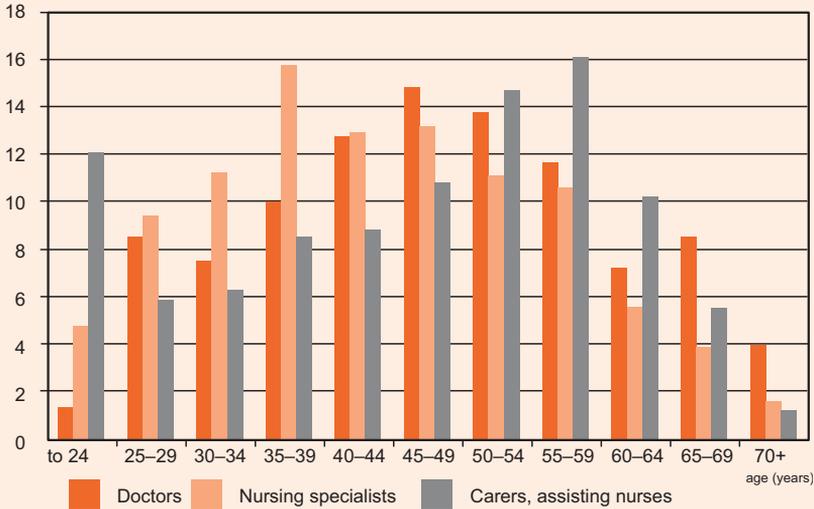
¹ Doctor, dentist, nurse and midwife, when they are working in their specialty and are registered at Health Care Board. Health care professionals can provide health care services within the limits of the specialty they have acquired and to which they have been issued a certificate about being registered as a health care professional. To provide chemist service, dispensing chemist and pharmacist have to be registered in the national register of dispensing chemists and pharmacists.

² Numbers of practising doctors and dentists, incl. residents and interns.

³ Other mid-level health care and care personnel with professional education; from these, dispensing chemists have been presented separately for the years 2003–2007.

Source: National Institute for Health Development

Figure 1. **Health care professionals by age groups¹, March 2008**
(per cent)



¹ On the basis of the health professionals' hourly wages data. Includes employees, whose data was included in the survey, independent of their workload.

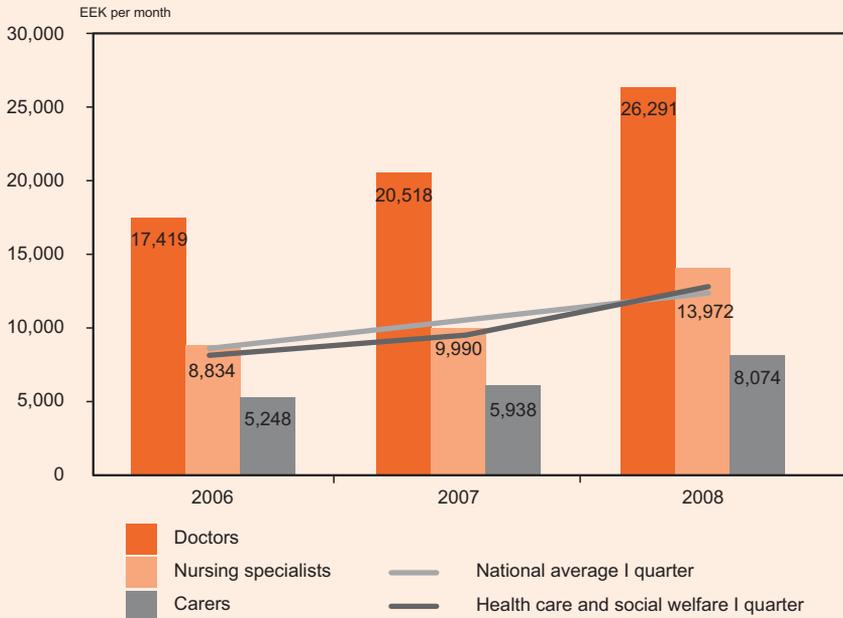
Source: National Institute for Health Development

Table 3. **Positions filled by health care professionals, 2004–2007**
(at the end of the year)

	2004	2005	2006	2007
Doctors	4,120.3	4,225.5	4,204.0	4,274.9
Dentists	1,173.4	1,190.1	1,127.9	1,140.3
Nurses	8,122.1	8,209.5	8,095.6	8,284.6
Midwives	350.9	367.8	357.4	371.6
Carers and other assistant personnel	4,298.7	4,276.2	4,284.2	4,420.5

Source: National Institute for Health Development

Figure 2. Average monthly gross wages¹ of health care professionals², 2006–2008
(March 2006, 2007 and 2008)



¹ The monthly wages includes the basic salary, additional remuneration for evening work, night work, work on holidays and national holidays, overtime and any other regular and irregular premiums.

² Calculation of the average monthly wages of health care professionals only includes fulltime employees who were not absent from work in March.

Source: National Institute for Health Development, Statistics Estonia

Table 4. **Outpatient medical care, 2000, 2004 and 2006–2008**

	2000	2004	2006	2007	2008 ²
Number of consultations, thousand					
outpatient consultations with a doctor	8,151	8,303	8,496	8,766	8,647
consultations with family physician	1,972	3,935	4,166	4,317	4,301
home visits by doctors	503	178	143	128	105
visits by family physicians	197	162	136	116	96
Average number of consultations per one family physician's position					
consultations	4,963	5,015	5,227	5,432	5,388
home visits	451	199	165	142	118
Persons per one family physician's position					
	3,127	1,652	1,632	1,644	1,643
Proportion of family physicians' consultations¹ in the overall number of outpatient consultations, %					
	24.2	47.4	49.0	49.2	49.7
Percentage of family physicians' home visits¹ in the overall number of home visits, %					
	39.2	91.3	95.1	90.6	91.4
Per person in a year					
outpatient consultations with a doctor	6.0	6.2	6.3	6.5	6.4
consultations with family physician	1.4	2.9	3.1	3.2	3.2
home visits by doctors	0.4	0.1	0.1	0.1	0.1
home visits by family physicians	0.1	0.1	0.1	0.1	0.1

¹ All family physicians' consultations and home visits, not consultations and home visits of the family physician's praxis.

² Preliminary data.

Source: National Institute for Health Development

Table 5. **Nursing care¹, 2000, 2004 and 2006–2008**

	2000	2004	2006	2007	2008 ²
Number of consultations with nursing specialist, thousand					
outpatient consultations	226	346	413	474	543
consultations with family nurse ³	...	134	238	313	373
home visits	7	100	196	243	316
home visits by family nurse ³	...	17	20	18	16
Per person in a year					
outpatient consultations	0.17	0.26	0.31	0.35	0.41
home visits	0.01	0.07	0.15	0.18	0.24

¹ In 2000, medical assistant's independent work (incl. in medical assistant centres); from 2004 independent consultations and home visits by nursing specialists (nurses, midwives).

² Preliminary data.

³ Independent work of nurses in family doctor's praxis.

Source: National Institute for Health Development

Table 6. **Emergency medical care, 2000, 2004 and 2006–2008**

	2000	2004	2006	2007	2008
Total number of persons who received emergency medical care, thousand	286	242	235	240	242
accidents ¹	35	39	37	37	36
illness ¹	178	200	195	201	204
transportation of sick persons and women giving birth ¹	19	3	2	2	2
Number of persons who received emergency aid upon call, thousand	232	233	227	230	234
Number of persons who turned to emergency units themselves and received outpatient care, thousand	54	9	8	9	8
Total number of persons who received aid per 1,000 inhabitants	209	179	175	179	181
adults (15+)	217	188	182	188	189
children (0–14)	171	134	133	126	132

¹ Before 2004, causes have been obtained about people who received aid upon call.

Source: National Institute for Health Development, since 2004 Health Care Board

Table 7. **Dental care, 2000 and 2004–2007**

	2000	2004	2005	2006	2007
Total number of visits to dentist, thousand	2,310	2,012	2,011	2,057	1,999
treatment visits	1,891	1,658	1,634	1,679	1,620
prosthetic dentistry visits	298	236	241	254	261
orthodontist visits	121	118	135	125	117
Number of visits to dentist per inhabitant	1.69	1.48	1.49	1.53	1.49
treatment visits per person	1.38	1.23	1.21	1.25	1.21
adult (15+)	1.31	1.09	1.08	1.12	1.06
children (0–14)	1.68	1.99	1.95	1.99	2.03

Source: National Institute for Health Development

Table 8. **Hospital care and day care (incl. day surgery) departments, 2000, 2004 and 2006–2008**

	2000	2004	2006	2007	2008 ¹
Inpatient care					
no. of hospital beds, end of the year	9,828	7,850	7,588	7,473	7,601
active care beds ²	7,600	5,750	5,287	5,101	5,146
hospital beds per 10,000 inhabitants	71.9	58.3	56.5	55.7	56.7
active care beds ² per 10,000 inhabitants	55.6	42.7	39.3	38.0	38.4
nursing care beds per 10,000 inhabitants aged 65+	39.9	49.0	56.2	58.7	63.1
rehabilitation care beds per 10,000 inhabitants	2.2	2.9	2.5	2.5	2.5
psychiatric care beds per 10,000 inhabitants	7.5	5.3	5.5	5.6	5.6
tuberculosis care beds per 10,000 inhabitants	2.3	2.2	2.0	2.0	1.8
number of hospitalisations per year, thousand	279.5	258.8	252.9	253.8	254.8
hospitalisations per 1,000 inhabitants	204.1	191.8	188.3	189.1	190.1
average number of bed days ³ per patient (ALOS)	9.2	8.0	7.8	8.0	7.9
bed occupancy rate ⁴ , %	...	72.6	74.1	75.5	75.7
bed turnover ⁵	27.7	33.2	34.6	34.5	35.0
Day care (incl. day surgery)⁶					
number of care beds, end of the year	380	334	361	416	458
day-care beds per 10,000 inhabitants	2.8	2.5	2.7	3.1	3.4
number of hospitalisations per year, thousand	21.0	35.4	45.6	53.4	56.1
hospitalisations per 1,000 inhabitants	15.3	26.2	33.9	39.8	41.8

¹ Preliminary data.

² Active care or short-term beds – hospital beds, excluding nursing care beds, psychiatry beds and tuberculosis beds.

³ Average number of bed days = general number of bed days per year / number of discharged persons.

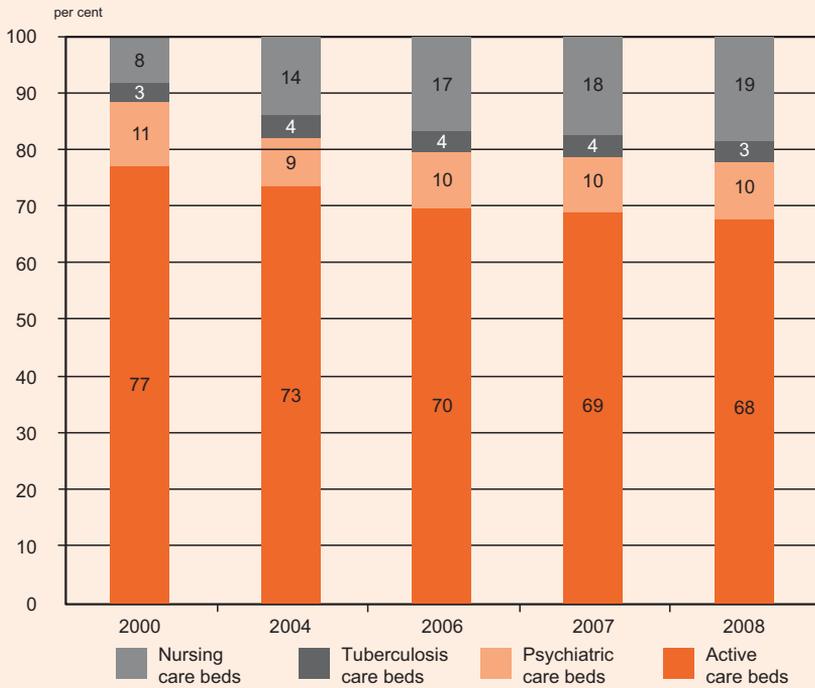
⁴ Percentage of days in year when hospital bed is occupied.

⁵ Number of hospitalised people per one hospital bed.

⁶ Until 2004, only data from day care departments at hospitals. From 2006, data from day care departments at hospitals and at outpatient institutions.

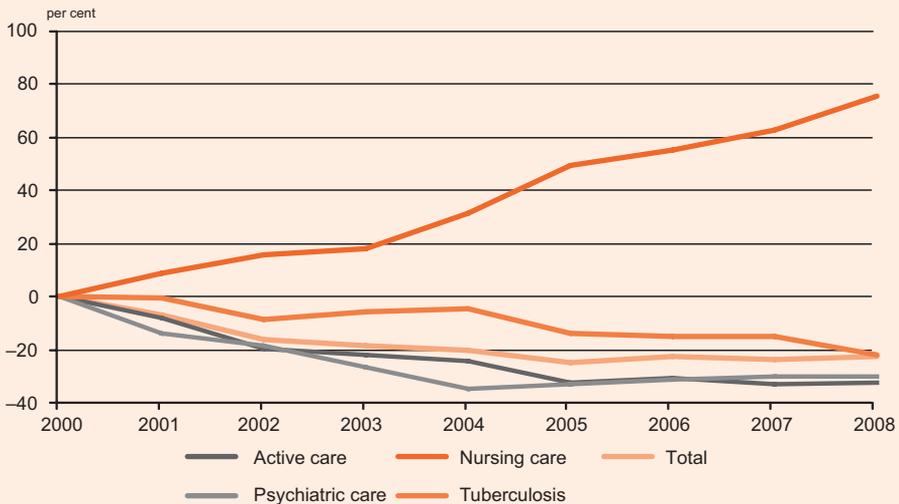
Source: National Institute for Health Development

Figure 3. Distribution of hospital beds by types, 2000, 2004 and 2006–2008



Source: National Institute for Health Development

Figure 4. Changes in the number of hospital beds compared to 2000, 2001–2008



Source: National Institute for Health Development

Table 9. **Registered new cases and relapses of active tuberculosis, 2000, 2004 and 2006–2008**

	2000	2004	2006	2007	2008
New cases of active tuberculosis	642	477	373	372	354
male	448	330	253	295	253
female	194	147	120	113	101
incidence rate of active tuberculosis per 100,000 inhabitants	46.9	35.4	27.8	27.7	26.4
male	70.9	53.1	40.9	47.7	41.0
female	26.3	20.2	16.6	15.6	14.0
New cases and relapses of active tuberculosis	782	561	438	466	415
new cases and relapses of active tuberculosis per 100,000 inhabitants	57.1	41.6	32.6	34.7	31.0
HIV¹ positive cases among new cases and relapses of active tuberculosis	2	22	38	49	39
HIV ¹ positive cases among first new cases and relapses of active tuberculosis, %	0.3	3.9	8.7	10.5	9.4

¹ Human immunodeficiency virus.

Source: Tuberculosis Register

Table 10. Registered first incidences of selected infectious and mainly sexually transmitted diseases, 2000, 2004 and 2006–2008

	2000	2004	2006	2007	2008
Pertussis	503	455	153	409	485
male	219	185	61	176	170
female	284	270	92	233	315
Tick-borne encephalitis	272	182	171	140	90
male	149	83	87	76	52
female	123	99	84	64	38
Acute viral hepatitis B	437	127	45	44	53
male	319	76	29	22	39
female	118	51	16	22	14
Acute viral hepatitis C	365	124	57	36	64
male	265	82	42	21	39
female	100	42	15	15	25
Incidence rate of C and B hepatitis per 100,000 inhabitants	58.6	18.6	7.6	6.0	8.7
Syphilis	587	184	125	82	71
male	242	39	39	25	33
female	317	113	86	57	38
Urogenital chlamydial diseases	3,805	2,691	2,531	2,436	2,200
male	1,308	604	507	426	330
female	2,498	2,167	2,024	2,010	1,870
HIV¹ infection	390	743	668	633	545
male	312	497	429	373	315
female	78	246	239	260	230
Incidence rate of HIV ¹ infection per 100,000 inhabitants	28.5	55.1	49.7	47.2	40.6
male	49.4	80.0	69.3	60.4	51.0
female	10.6	33.8	33.0	35.9	31.8
HIV¹ disease (AIDS)	3	27	34	57	61
male	3	17	24	45	44
female	–	10	10	12	17

¹ Human immunodeficiency virus.

Source: Health Protection Inspectorate

Table 11. **Cancer morbidity¹, 2000 and 2004–2006**

	2000	2004	2005	2006
Number of incident cases	6,013	6,418	6,090	6,680
male	2,899	3,148	2,971	3,384
female	3,114	3,270	3,119	3,296
Number of incident cases per 100,000 inhabitants	439.1	477.9	454.4	500.9
male	459.0	506.5	479.2	546.9
female	422.0	449.3	429.5	454.8

¹ Data on 2000 are based on the information of the Cancer Register as at 15.05.2007, data on 2004 as in March 2008, and data on 2005–2006 as at 16.03.2009. Data is preliminary and therefore prevalence is not available.

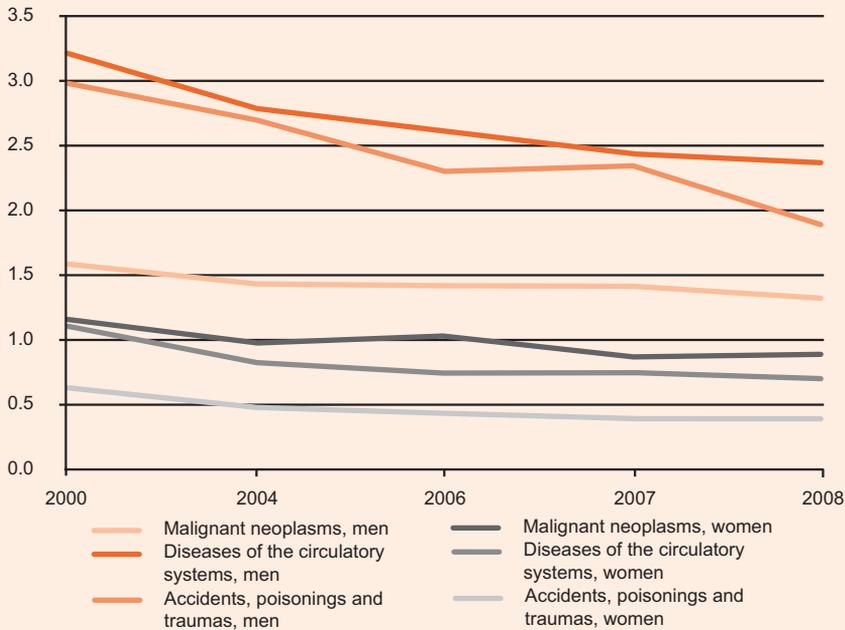
Source: *Cancer Register*

Table 12. **Mortality by main causes, 2000, 2004 and 2006–2008**

	2000	2004	2006	2007	2008
Total number of deaths	18,403	17,685	17,316	17,409	16,675
male	9,265	9,067	8,853	8,985	8,403
female	9,138	8,618	8,463	8,424	8,272
malignant neoplasms	3,365	3,463	3,533	3,525	3,543
male	1,806	1,889	1,921	1,943	1,906
female	1,559	1,574	1,612	1,582	1,637
diseases of the circulatory system	9,981	9,402	9,187	9,057	9,074
male	4,295	4,127	4,107	4,066	3,964
female	5,686	5,275	5,080	4,991	5,110
accidents, poisonings and traumas	2,093	1,766	1,628	1,612	1,358
male	1,610	1,405	1,246	1,269	1,056
female	483	361	382	343	302
Number of deaths per 100,000 inhabitants	1,343.8	1,310.7	1,288.8	1,297.6	1,243.8
male	1,467.0	1,458.8	1,430.7	1,454.3	1,361.1
female	1,238.3	1,184.2	1,167.7	1,163.8	1,143.6
malignant neoplasms	245.7	256.7	263.0	262.7	264.3
male	286.0	303.9	310.5	314.5	308.7
female	211.3	216.3	222.4	218.6	226.3
diseases of the circulatory system	728.8	696.8	683.8	675.1	676.8
male	680.0	664.0	663.7	658.1	624.1
female	770.5	724.8	700.9	689.5	706.5
accidents, poisonings and traumas	152.8	130.9	121.2	120.2	101.3
male	254.9	226.1	201.4	205.4	171.1
female	65.5	49.6	52.7	47.4	41.8

Source: *Statistics Estonia*

Figure 5. **Number of deaths aged 15–64 per 1,000 inhabitants by sex, 2000, 2004 and 2006–2008**
(deaths per 1,000 inhabitants)



Source: Statistics Estonia

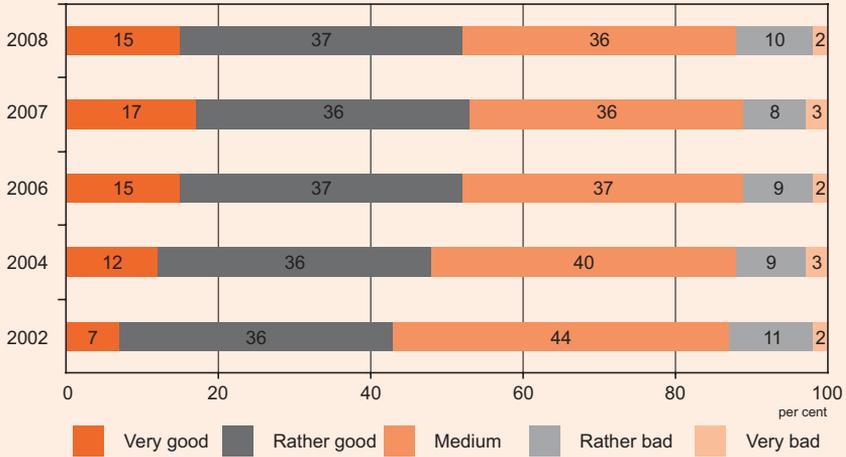
Tabel 13. **Average life expectancy and healthy life years, 2000, 2004 and 2006–2008**

	2000	2004	2006	2007	2008
Life expectancy at birth	70.6	72.0	73.0	73.0	74.1
male	65.1	66.3	67.4	67.1	68.6
female	76.0	77.8	78.5	78.7	79.2
Healthy life years	...	51.8	51.8	52.2	55.2
male	...	50.0	49.6	49.6	52.9
female	...	53.5	53.7	54.7	57.3

Source: Statistics Estonia

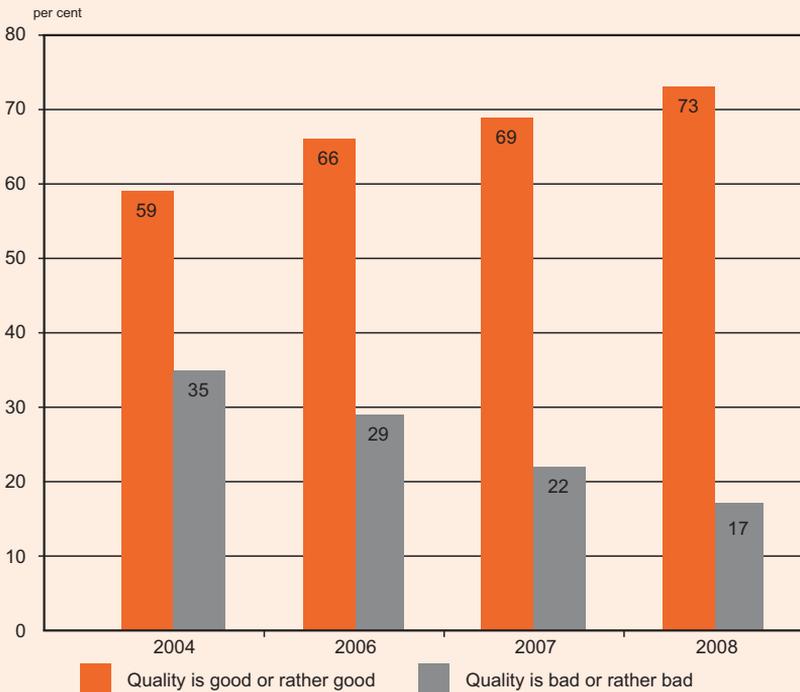
Assessment of health status and medical care among people

Figure 6. Self-perceived health, 2002, 2004 and 2006–2008



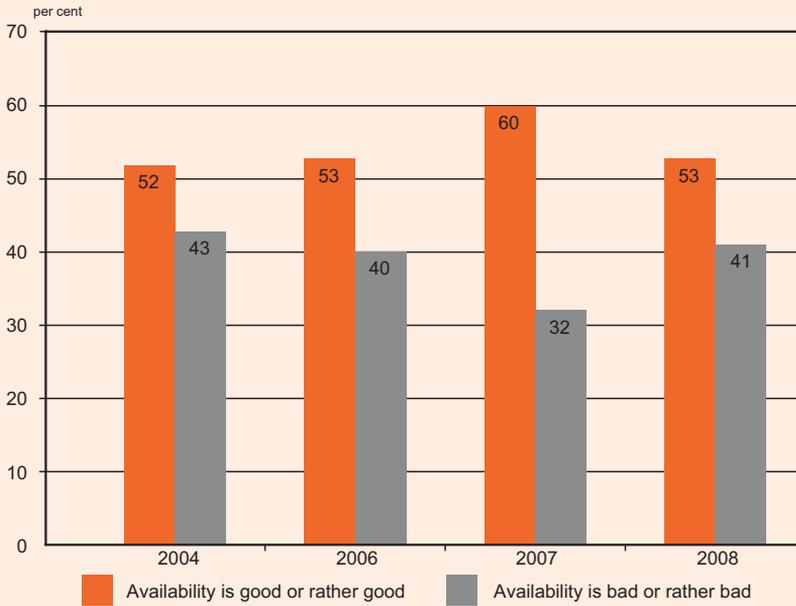
Source: Ministry of Social Affairs and Health Insurance Fund, “Patients’ assessment of health and medical care 2008”

Figure 7. Assessment of the quality of medical care, 2004 and 2006–2008



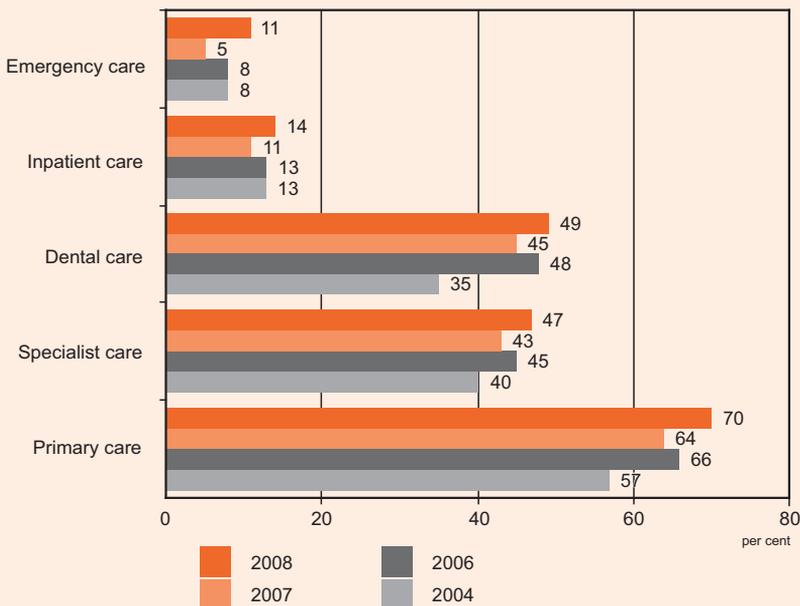
Source: Ministry of Social Affairs and Health Insurance Fund, “Patients’ assessment of health and medical care 2008”

Figure 8. **Assessment of the availability of medical care, 2004 and 2006–2008**



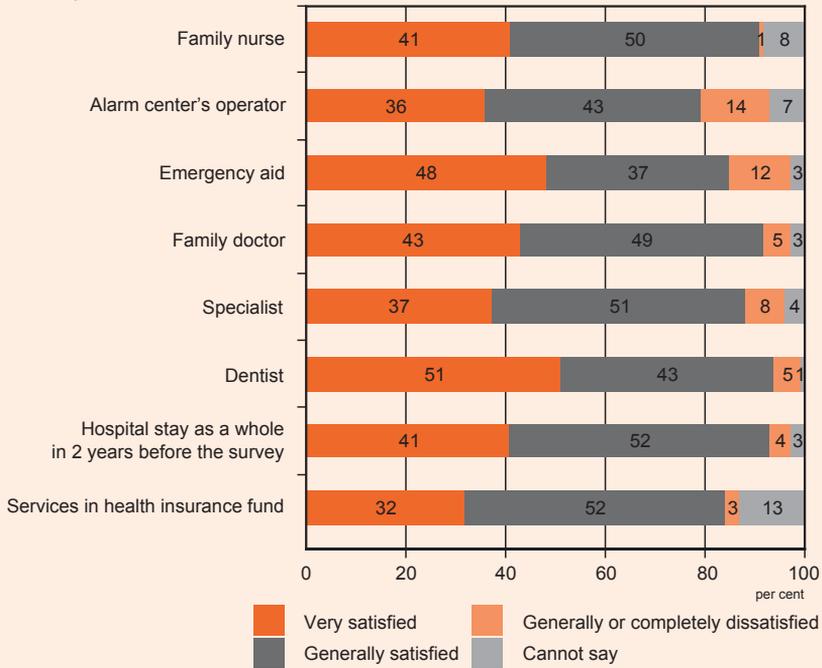
Source: Ministry of Social Affairs and Health Insurance Fund, “Patients’ assessment of health and medical care 2008”

Figure 9. **Percentage of users of health services in population in the last 12 months, 2004 and 2006–2008**



Source: Ministry of Social Affairs and Health Insurance Fund, “Patients’ assessment of health and medical care 2008”

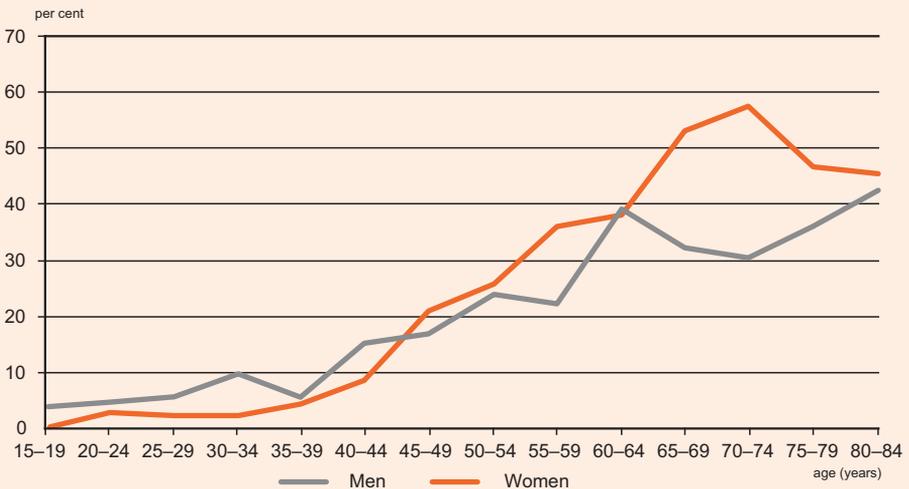
Figure 10. **User¹ satisfaction with health care providers and ancillary health services, 2008**



¹ Persons who have used the service in the last 12 months (in case of hospital care last two years).

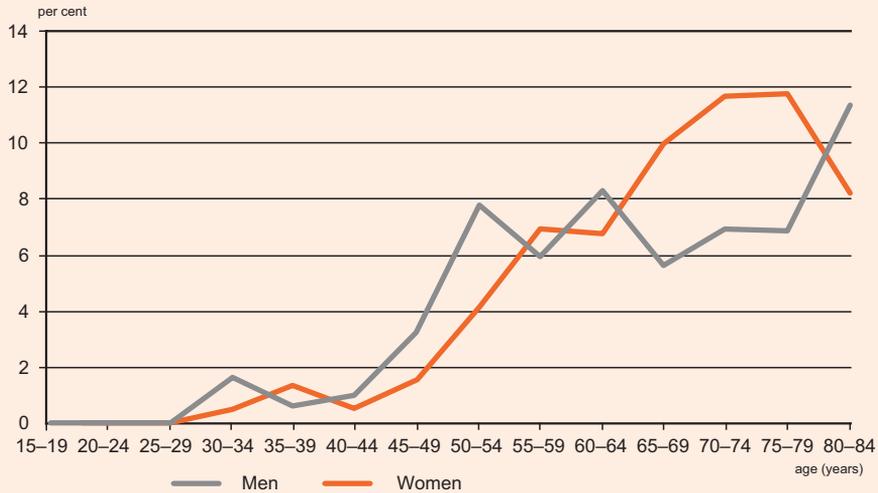
Source: Ministry of Social Affairs and Health Insurance Fund, "Patients' assessment of health and medical care 2008"

Figure 11. **Presence of hypertension or high blood pressure during lifetime by sex/age, 2006**



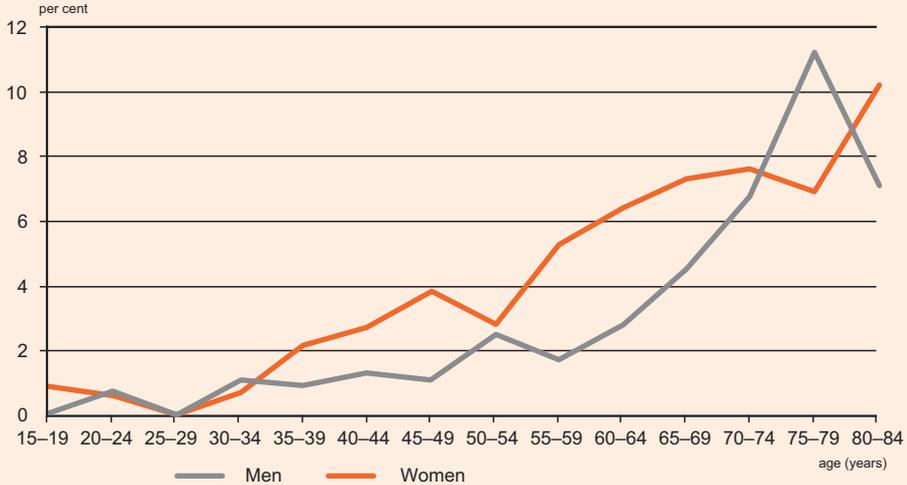
Source: National Institute for Health Development, "Estonian Health Interview Survey 2006"

Figure 12. Presence of diabetes during lifetime by sex/age, 2006



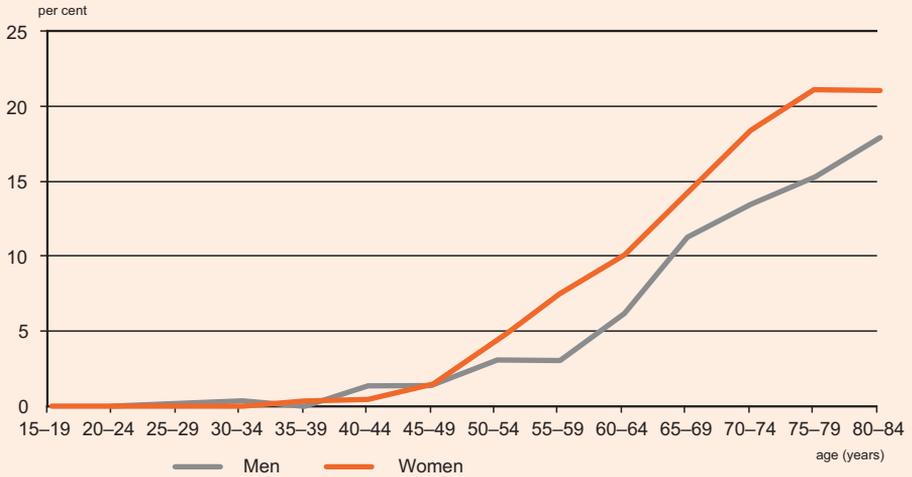
Source: National Institute for Health Development, "Estonian Health Interview Survey 2006"

Figure 13. Presence of cancer during lifetime by sex/age, 2006



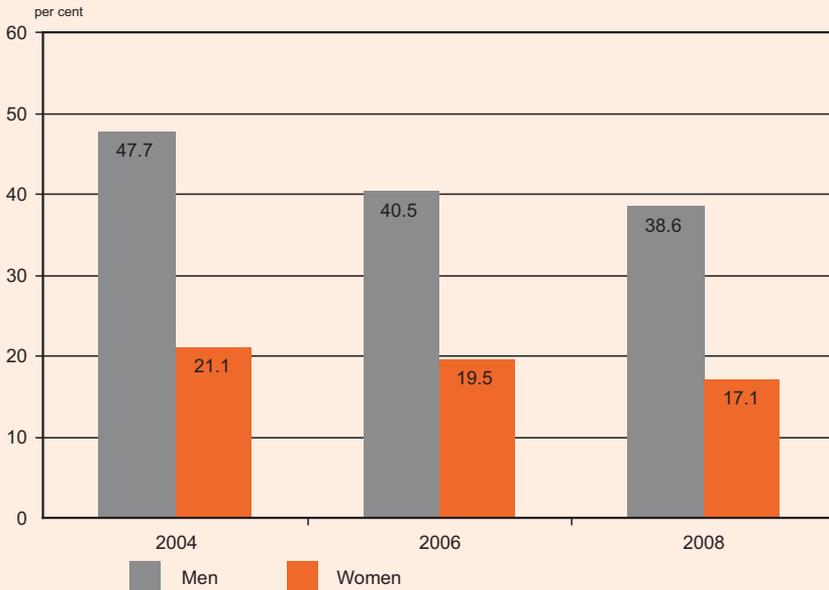
Source: National Institute for Health Development, "Estonian Health Interview Survey 2006"

Figure 14. Presence of coronary heart disease during lifetime by sex/age, 2006



Source: National Institute for Health Development, "Estonian Health Interview Survey 2006"

Figure 15. Percentage of daily smokers among adults (16-64 years) by sex, 2004, 2006 and 2008



Source: National Institute for Health Development, "Health Behavior among Estonian Adult Population" survey 2004, 2006, 2008

Health insurance and health care financing

Table 14. **Health insurance coverage, 2000, 2004 and 2006–2008**
(at the end of the year)

	2000	2004	2006	2007	2008
Number of people covered by compulsory health insurance	1,276,923	1,271,558	1,278,016	1,287,765	1,281,718
% of the population	93.4	94.5	94.8	96.0	95.6
employed insured persons	...	595,734	651,141	672,706	658,079
employed insured persons, %	...	46.9	51.0	52.2	51.3

Source: Estonian Health Insurance Fund

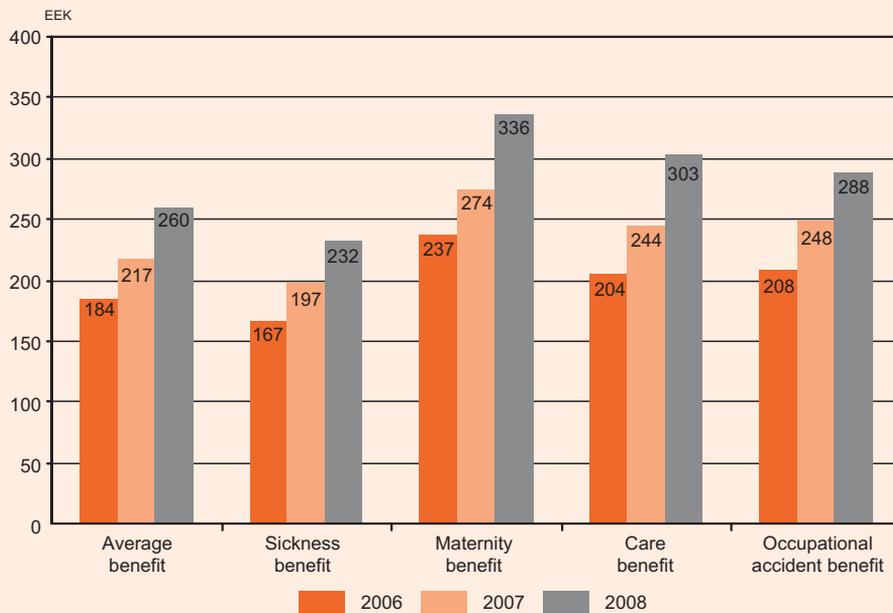
Table 15. **Number of days covered by the benefit for temporary incapacity for work, 2000, 2004 and 2006–2008**

	2000	2004	2006	2007	2008
Number of days covered by the benefit for temporary incapacity for work¹, thousand					
Total	6,763	7,321	8,195	8,889	9,182
sickness benefits days	4,819	5,222	5,751	6,210	6,354
care benefit days	614	624	797	871	950
occupational accident benefit days	157	119	132	132	135
maternity benefit days	1,066	1,356	1,515	1,676	1,743
Average number of days of temporary incapacity for work per one employed person					
Total	11.8	12.3	12.7	13.2	13.7
sickness benefits days	8.4	8.8	8.9	9.2	9.5
care benefit days	1.1	1.0	1.2	1.3	1.4
occupational accident benefit days	0.3	0.2	0.2	0.2	0.2
Average number of days of temporary incapacity for work per one certificate of temporary incapacity for work					
sickness benefit	12.9	12.7	12.3	12.2	13.5
care benefit	8.8	8.5	8.3	8.3	8.5
occupational accident benefit	22.7	20.3	20.5	20.4	21.9
maternity benefit	100.6	117.6	127.3	129.1	131.7

¹ Since no benefit is paid for the first day of sick-leave of an insured person, the number of workdays actually lost due to temporary incapacity for work is somewhat higher.

Source: Estonian Health Insurance Fund

Figure 16. **Average benefit for temporary incapacity for work per one day of temporary incapacity by type of benefit, 2006–2008**



Source: Estonian Health Insurance Fund

Table 16. **Health insurance expenditure, 2000, 2004 and 2006–2008**
(million EEK)

	2000	2004	2006	2007	2008
Total health insurance benefits	4,050.8	6,137.0	7,946.1	10,148.8	12,223.0
Non-monetary benefits	3,325.0	4,962.6	6,362.5	8,037.2	9,633.8
medical treatment ¹	2,881.0	4,098.8	5,395.7	6,904.0	8,352.3
subsidised medicinal products	444.0	863.8	966.8	1,120.6	1,281.5
Monetary benefits	725.8	1,174.4	1,583.6	2,111.6	2,589.2
benefits for temporary incapacity for work	725.8	1,102.0	1,506.4	1,926.9	2,387.5
sickness benefit	488.1	723.5	957.7	1,222.3	1,474.6
care benefit	77.0	104.9	162.5	212.3	287.8
maternity benefit	132.3	253.2	358.8	459.5	586.2
occupational accident benefit	19.5	20.4	27.4	32.7	38.9
other benefits (transferred to easier work) ²	8.9	–	–	–	–
other cash benefits ³	–	72.4	77.2	184.7	201.7
Percentage of health insurance benefits of GDP, %	4.2	4.1	3.8	4.2	4.9
Operating expenses of the Health Insurance Fund, million EEK	46.9	80.1	87.0	95.1	116.3

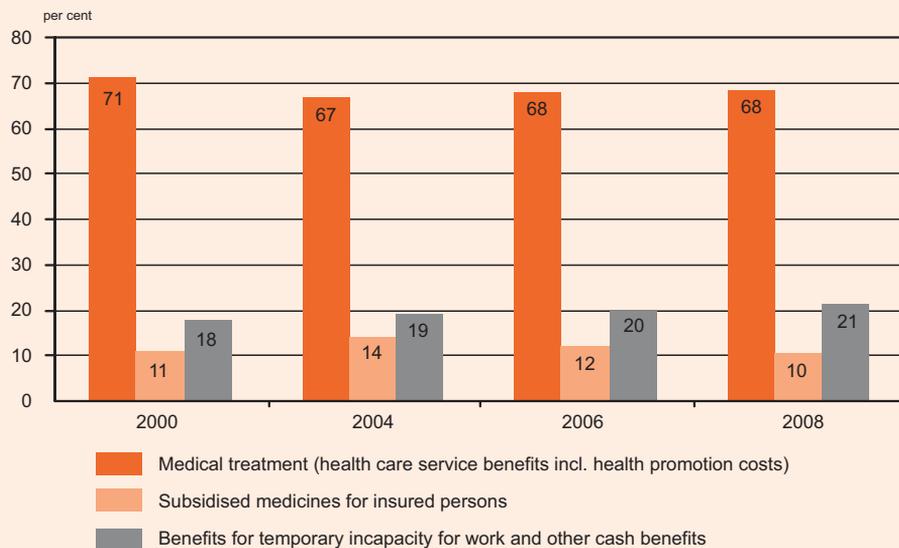
¹ Expenditure on medical services, prevention of diseases, health promotion, nursing care, dental care services, benefits for technical aids and costs related to foreign agreements.

² Included under sickness benefits from 2004.

³ Benefit for dental care services for adults and supplementary benefit for medicines.

Source: *Estonian Health Insurance Fund*

Figure 17. **Distribution of health insurance benefits, 2000, 2004, 2006 and 2008**



Source: *Estonian Health Insurance Fund*

Table 17. Health care expenditure from the state budget¹, 2000 and 2004–2007
(million EEK)

	2000	2004	2005	2006	2007
Health care expenditure	431.2	659.3	825.4	982.2	1,261.9
medical services	87.5	97.6	103.2	134.9	137.0
emergency medical aid to uninsured persons	72.0	91.8	97.3	123.9	103.2
rehabilitative care	5.7	3.5	4.9	2.4	2.8
long-term nursing care	0.3	57.1	99.9	147.3	190.5
ancillary health services	126.0	172.9	207.9	250.5	343.9
support to emergency medical care	122.5	172.8	206.1	228.7	334.6
medical products, medicines and auxiliary aids for outpatients	49.5	94.3	129.2	133.7	169.4
medicines and medicinal products	26.3	47.3	59.7	25.3	32.9
medicines	23.8	26.6	29.9	18.8	24.3
disease prevention and public health programmes	23.5	42.3	76.4	109.1	174.2
prevention of infectious diseases	10.4	31.4	42.5	74.3	116.5
prevention of non-infectious diseases	9.9	7.6	28.1	27.4	45.8
health care administration ²	62.1	158.0	166.6	149.3	191.6
capital expenses	76.6	33.6	37.3	55.0	52.4
Functions³ related to health care	110.6	201.8	170.3	235.1	260.3
Total expenditure on health care and related functions	541.8	861.1	995.7	1,162.4	1,522.2
percentage in GDP, %	0.57	0.57	0.57	0.57	0.64

¹ This table is compiled on the basis of OECD classification of health care functions ICHA-HC, which is used for calculating the total health care expenditure.

² Since 2004, the health care expenditure incurred from the own income of sub-institutions has been added (North-Estonian Blood Centre, Health Protection Inspectorate etc).

³ Teaching and training health care personnel; health care research and development; control of food, hygiene and drinking water; administration of cash benefit system related health care and payment of benefits.

Source: National Institute for Health Development

Table 18. **Total health expenditure¹, 2000 and 2004–2007**

	2000	2004	2005	2006	2007
Total health expenditure, million EEK	5,145.5	7,782.6	8,787.4	10,511.3	12 973.1
percentage in GDP, % ²	5.4	5.2	5.1	5.1	5.4
Sources of financing, %					
national health insurance	66.0	65.7	66.2	62.1	64.2
state budget	8.4	8.5	9.4	9.3	9.7
local government	2.0	1.3	1.1	1.8	1.7
private sector	23.3	24.0	23.0	26.1	23.3
households	19.7	21.3	20.4	25.1	21.9
insurance	1.0	0.1	0.3	0.3	0.3
employers	2.6	2.6	2.3	0.8	1.1
foreign aid	0.3	0.5	0.3	0.6	1.1

¹ Calculated using OECD methodology, which is commonly used in the EU member states.

² Period 2000–2005 is based on GDP indicators adjusted by Statistics Estonia in 2007. Period 2006–2007 is based on the corresponding indicators of Statistics Estonia from 2009.

Source: National Institute for Health Development, Statistics Estonia

Family benefits and parental benefit

The right to social security in the case of birth, raising of and care for children is ensured by the State Family Benefits Act and the Parental Benefit Act. Payment of state family benefits is regulated by the State Family Benefits Act. Family benefits may be granted as single non-recurrent, monthly or annual payments. Monthly benefits include child allowance, childcare allowance, single parent's child allowance, conscript's child allowance, foster care allowance, allowance for families with seven or more children. Single non-recurrent benefits include childbirth allowance, adoption allowance and start in independent life allowance payable upon the start of independent life of young persons who have been in substitute care or have been raised without parental care in a school for children with special needs. A family benefit payable once a year is school allowance¹⁶. If a person is entitled to several types of family benefits, these benefits are granted and disbursed simultaneously. State family benefits are generally payable until the child reaches 16 years of age, or 19 years of age if the child continues his or her education. In the latter case, the family benefits are disbursed until the end of the current school year in which the child reached 19 years of age.

Family benefits, except childcare allowances, allowances for families with seven or more children, birth allowance and adoption allowance, are calculated on the basis of child allowance rate. Childcare allowances and allowances for families with seven or more children are calculated on the basis of childcare allowance rate. The family benefits are coefficients of those rates. From 1997, the child allowance rate was been 150, and from 2000, the childcare allowance rate 1,200 EEK.

The total number of receivers of family benefits is found on the basis of statistical data on the receivers of child allowance. Child allowance is paid on all children. In the end of 2008, state family benefits were paid in total to 172,958 families and 265,418 children. The majority of the families receiving state family benefits are families with one child – 59% of all families receiving family benefits in 2008. The percentage of benefiting families with two children has been around 31–32% between 2000 and 2008. Families with three or more children make up around one tenth of all families receiving family benefits. A comparison of the families receiving state family benefits on the basis of the number of children indicates that the most children are growing in families with two children (41%). Almost the same percentage of children is growing in families with one child (38%). One fifth of all children receiving family benefits are growing in families with three or more children.

¹⁶ The school allowance is no longer paid from 2009.

From 1 January 2004, the Parental Benefit Act entered into force. The aim of the Parental Benefit Act is to maintain for income not received by stay-at-home parents and support parents in balancing their work and family lives. Persons who did not receive any income, are paid the parental benefit at the parental benefit rate. The right to the parental benefit is granted to the parent, adoptive or foster parent, guardian or caregiver.

There are several different types of parental benefits. In the case of 100% benefit, the amount of the benefit is calculated according to the applicant's average monthly income taxed with social tax in the previous calendar year. The maximum amount of the monthly benefit is three times the average monthly income taxed with social tax in the calendar year before. Persons who did not receive any income, are paid the parental benefit at the parental benefit rate. Persons whose average monthly income in the previous year was less than or equal to the minimum wages are paid the parental benefit in the amount of the minimum monthly wages. If the parent has joined a mandatory funded pension scheme (2nd pillar), the state pays one per cent of the amount of parental benefit to the 2nd pillar pension fund on each child.

The parents may choose whether the parental benefit is used by the father or the mother. In case of the mother, eligibility for the parental benefit starts from the first day after the final day of the pregnancy and maternity leave. If the mother was not on the pregnancy and maternity leave, the eligibility for the parental benefit starts from the birth of the child. Pursuant to a legislative amendment that entered into force on 1 September 2007, the father is now eligible for the parental benefit from the day the child reaches 70 days of age. Previously, fathers became eligible for the parental benefit after the child reached six months of age.

In 2004 and 2005, parental benefit was paid until the end of a 365-day period from the beginning of the pregnancy and maternity leave. In 2006 and 2007, parental benefit was paid until the end of a 455-day period from the beginning of the pregnancy and maternity benefit period (on the condition that the mother went on pregnancy and maternity leave at least 30 calendar days before the presumed date of birth). From 1 January 2008, the parental benefit payment period has been extended to 575 days.

The majority of the receivers of parental benefits are persons whose parental benefit comprises 100% of their monthly income in the previous calendar year; they accounted for 58% of all receivers of the benefit in 2008. The receivers of the two types of lower benefits accounted for 36% of all receivers of the parental benefit in 2008. Compared with previous years, the number of persons who were paid the benefit at the parental benefit rate or in the amount of minimum monthly wages decreased in 2008 while the number of persons whose benefit comprised 100% of their monthly income increased. The percentage of persons who received the maximum amount of the parental benefit was 6% in 2008.

The percentage of men among the receivers of parental benefits has been very low. Men only accounted for 1.7% of all persons who received parental benefits in 2006, 3.9% in 2007, and 6.5% in 2008. The increase in the percentage of men was facilitated by the legislative amend-

ment in the autumn of 2007, which enabled the fathers to receive the parental benefit after the child became 70 days old, instead of the previous six months.

The number of persons who used the paternity leave¹⁷ also increased significantly in 2008. In 2008, the fathers could take up to 10 working days as paternity leave, either during the pregnancy and maternity leave of the mother or during the first two months after the birth. The increase in the number of users of the leave was facilitated by the legislative amendment, which enabled the fathers to receive holiday pay for the leave period¹⁸ on the basis of the average salary of the father (instead of the previous 66 EEK per day). As a result of this, the expenditure on paternity leave increased significantly.

The expenditures of family benefits have moderately increased in recent years. In 2008, expenditures on state family benefits amounted to 1.71 billion EEK. Expenditures on the parental benefit have increased significantly. A total of 1.87 billion EEK were paid as parental benefits in 2008, which is more than four times the amount paid in 2004. The percentage of family benefits in GDP has decreased in the last ten years, but the percentage in GDP of the parental benefits, introduced in 2004, is increasing.

¹⁷ Until the end of 2007, it was called “father’s additional child care leave”, which could last for up to 14 calendar days and could be used during the mother’s pregnancy and maternity leave or during two months after the birth.

¹⁸ Payment of holiday pay for paternity leave has been suspended from 1 January 2009 to 1 January 2013.

Table 1. Amounts of state family benefits, 2000, 2004 and 2006–2009 (EEK)

Type of benefit	2000	2004	2006	2007	2008	2009
Birth allowance, single allowance						
1st child (incl. multiple births, from 2000)	3,750	3,750	5,000	5,000	5,000	5,000
2nd and subsequent child	3,000	3,000	5,000	5,000	5,000	5,000
Adoption allowance, single allowance	–	3,000	5,000	5,000	5,000	5,000
Child allowance, per month						
1st child	150	300	300	300	300	300
2nd child	225	300	300	300	300	300
3rd and subsequent child ¹	300	300	300	900	900	900
Childcare allowance, per month²						
for child up to 3 years of age	600	600	600	600	600	600
for children aged 3–8 years in families with a child under 3 years	300	300	300	300	300	300
for children aged 3–8 in families with 3 or more children	300	300	300	300	300	300
supplementary childcare allowance for a child up to 1 year of age	–	100	100	100	100	100
Parental allowance of a family with 7 and more children, for one parent per month³	–	–	2,520	2,640	2,640	2,640
Child's school allowance, at the beginning of the school year	450	450	450	450	450	–
Single parent's child allowance, per month	300	300	300	300	300	300
Allowance for a child in guardianship or in foster care, per month	300	900	900	1,500	3,000	3,000
Conscript's child allowance, per month⁴	750	750	750	750	750	750
Start in independent life allowance, single allowance⁵	5,000	6,000	6,000	6,000	6,000	6,000
Allowance for families with three or more children, per child in a quarter⁶	–	150	–	–	–	–
per child for families with 3 children	–	–	300	–	–	–
per child for families with 4–5 children	–	–	450	–	–	–
per child for families with 6 and more children	–	–	450	–	–	–
Allowance for families with triplets, per family in a quarter⁷	–	600	1,350	–	–	–

¹ From 1 July 2007, an increased rate of child allowance is used from the third child and the allowance for families with three or more children is no longer paid.

² From 1 January 2009, childcare allowance is not paid for any child in the family during the period of the parental benefit.

³ Children entitled to child allowance.

⁴ From 1 January 2009, the conscript's child allowance is paid from the budget of the Ministry of Defence.

⁵ Paid to children without parental care raised in child welfare institutions or at schools for the children with special needs, when starting independent life.

⁶ From 1 January 2004, allowance for families with three or more children is paid instead of former allowance for families with four or more children.

⁷ If the family raises only triplets.

Table 2. Receivers of state family benefits, 2000, 2004 and 2006–2008
(number of people receiving the allowance at the end of the year, in case of single benefits total during the year)

Type of benefit	2000	2004	2006	2007	2008
Birth allowance	12,636	14,402	14,917	15,624	16,070
Child allowance¹	312,172	290,281	274,985	270,087	265,418
1st child	198,337	189,007	180,096	176,512	172,958
2nd child	87,267	76,872	72,476	71,571	70,814
3rd and subsequent child	26,568	24,402	22,413	22,004	21,646
Childcare allowance	55,056	48,543	48,355	50,331	46,989
for child up to 3 years of age	35,712	28,601	27,722	28,742	24,823
for children aged 3–8 years in families with a child under 3 years	10,597	11,219	12,076	12,927	13,474
for children aged 3–8 in families with 3 or more children	8,747	8,723	8,557	8,662	8,692
Allowance to a family raising three or more children and raising triplets, children²	–	68,061	67,836	60,039	–
Allowance to a family raising seven or more children, families	–	–	198	185	176
Child's school allowance	228,091	200,097	180,594	172,624	165,452
Single parent's child allowance, children	...	28,540	27,258	26,287	25,188
single parent's child allowance, families	22,300	24,332	23,040	22,145	21,160
Allowance for a child in guardianship or in foster care, children	...	2,835	2,262	2,087	2,038
allowance for a child in guardianship or in foster care, families	2,407	2,258	1,859	1,722	1,668
Adoption allowance, children	–	32	42	28	20
Conscript's child allowance	56	11	30	25	27
Start in independent life allowance³	76	108	110	155	167
Single supplementary allowance to families with four or more children	22,953	–	–	–	–

¹ The number of children for whom the allowance is paid. The number of people receiving the allowance for the first child also shows the general number of families to whom child allowances are paid.

² From 1 July 2007, an increased rate of child allowance is used from the third child and the allowance for families with three or more children is no longer paid.

³ Paid to children without parental care raised in child welfare institutions or at schools for the children with special needs, when starting independent life.

Source: Social Insurance Board

Table 3. **Receivers of parental benefit by benefit type, sex and average amount of benefit, 2004, and 2006–2008**

	2004 ¹	2006	2007	2008
Total persons who have been granted parental benefit	21,643	14,642	15,096	15,868
male, %	2.0	1.7	3.9	6.5
female, %	98.0	98.3	96.1	93.5
Types of parental benefit				
Parental benefit in amount of 100% of the income of one calendar month	9,305	7,483	8,272	9,260
male, %	3.3	2.7	5.5	8.1
female, %	96.7	97.3	94.5	91.9
Parental benefit in maximum amount	864	618	669	883
male, %	7.4	5.3	13.8	18.9
female, %	92.6	94.7	86.2	81.1
Parental benefit in the amount of minimum monthly wages	4,890	3,871	3,760	3,770
male, %	0.6	0.5	0.7	1.6
female, %	99.4	99.5	99.3	98.4
Parental benefit at the parental benefit rate	6,344	2,670	2,395	1,955
male, %	0.4	0.2	0.8	2.4
female, %	99.6	99.8	99.2	97.6
Parental benefit in the amount of minimum monthly wages if the previous child is under 2.5 years of age and no income is received	240	–	–	–
male, %	–	–	–	–
female, %	100.0	–	–	–
Amount of parental benefit average per year, EEK	4,712	6,182	7,461	9,421
male	8,988	10,913	12,658	14,284
female	4,626	6,099	7,249	9,084

¹ Data of the year 2004 also include children born in 2003.

Source: Social Insurance Board

Table 4. **Expenditure on state family benefits and parental benefit, 2000, 2004 and 2006–2008**
(million EEK)

Type of benefit	2000	2004	2006	2007	2008
Family benefits and parental benefit total	1,317.0	2,106.0	2,541.6	2,790.6	3,577.2
Birth allowance total, single allowance	42.0	48.9	72.6	78.1	80.4
Child allowance	711.8	1,058.0	1,006.7	1,059.8	1,125.3
Childcare allowance ¹	352.2	293.5	268.9	278.4	254.4
Allowance to a family raising three and more children and raising triplets	–	37.3	80.8	40.3	–
Allowance to a family raising seven and more children	–	–	6.0	6.2	5.8
Single allowance for families with four or more children	11.5	–	–	–	–
Child's school allowance, once a year	102.5	90.5	81.3	77.7	74.5
Single parent's child allowance	85.1	103.7	100.2	96.6	93.2
Allowance for a child in guardianship or in foster care	10.2	32.0	26.0	39.1	75.4
Adoption allowance, single allowance	–	0.1	0.2	0.1	0.1
Conscript's child allowance	0.6	0.1	0.2	0.2	0.2
Start in independent life allowance, single allowance	0.4	0.6	0.6	0.9	1.0
Other allowances	0.6	–	–	–	–
Parental benefit	–	441.3	898.0	1,113.1	1,866.9
Social tax paid from the state budget ²	107.9	102.9	218.3	321.9	532.3
Percentage of family benefits and parental benefit, %					
In GDP ³	1.37	1.39	1.23	1.14	1.42
In the state budget ⁴	4.65	3.99	3.93	3.67	3.97

¹ From 2003, an additional 100 EEK childcare allowance was paid monthly for a child up to one year of age. This has caused the sum paid as childcare allowances to rise in 2003. In 2004, the Parental Benefit Act was enforced, under which no childcare allowance is paid during the period, for which the parental benefit is paid, and this is why the childcare allowance expenditure decreased.

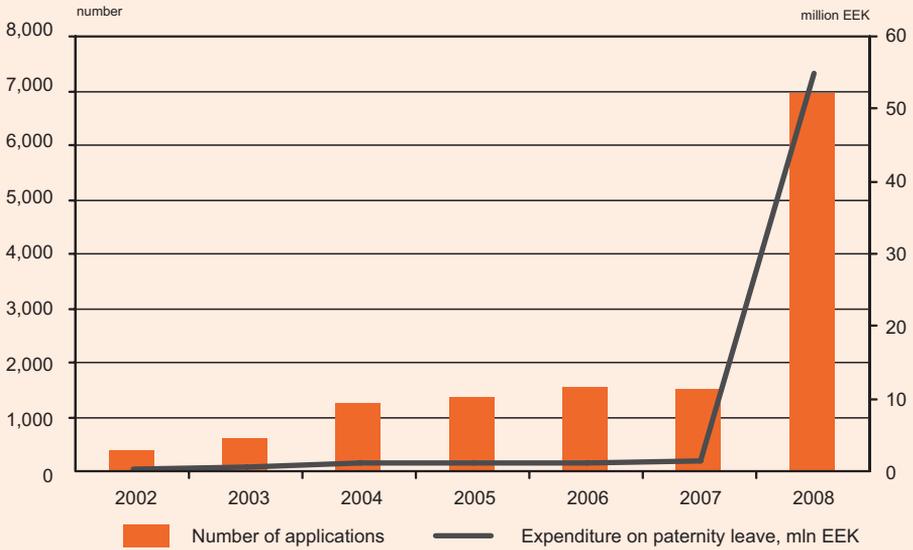
² Social tax is paid from the state budget pursuant to regulation provided in the Social Tax Act and the State Family Benefits Act for the receivers of parental benefit, child care allowance and allowance for families with seven or more children.

³ Indicators are based on corrected data of Statistics Estonia on the period 2000–2008 as at 8.09.2009.

⁴ Implementation of the state budget by expenditures; macro indicators can be found at the end of the chapter on "Social Protection".

Source: Social Insurance Board

Figure 1. Use of paternity leave¹, 2002²-2008

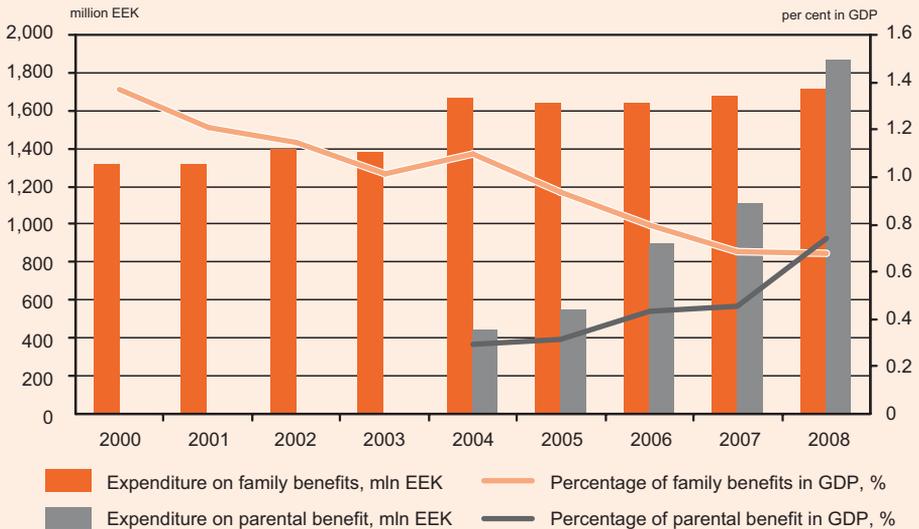


¹ From 2008, "paternity leave" (replacing the previous "father's additional child care leave") means a leave of up to 10 working days (previously 14 calendar days), which the father may use during the pregnancy and maternity leave of the woman or during two months after the birth. In 2008, the holiday pay was based on the father's average salary (instead of the previous 66 EEK per day).

² Payment of compensation for the father's additional child care leave started in July 2002.

Source: Social Insurance Board

Figure 2. Expenditure on family benefits and parental benefit and percentage in GDP, 2000-2008



Source: Social Insurance Board

Pensions

In the case of old age, incapacity for work and loss of provider, a person's income is ensured by the state pension insurance. The types and extent of state pensions, the conditions and procedure for the eligibility and receiving of state pensions, the organisation of state pension insurance and the calculation of funds for state pension insurance are established in the State Pension Insurance Act applicable since 2000. The new Pension Insurance Act entered into force in 2002, but the general principles of pension insurance remained unchanged.

The types of state pension are old-age pension, pension for incapacity for work, survivor's pension and national pension. Permanent residents of Estonia and aliens residing in Estonia on the basis of temporary residence permits have the right to receive all the above mentioned types of pensions.

Persons who have attained 63 years of age and whose length of pensionable service earned in Estonia is at least 15 years have the right to receive an old-age pension. The age limit established by law is applicable for men from 2001, while for women it will start applying from 2016, when women born in 1953 will reach retirement age. The gradual equalisation in the retirement of women is taking place at a six-month age cycle. This means that while women born in 1947 became entitled to retirement at the age of 60, women born in 1948 became entitled to retirement at the age of 60.5 etc.

The following persons have the right to receive a pension for incapacity for work until the age of retirement: persons at least 16 years of age who have been declared permanently incapacitated for work, with 40 to 100% loss of capacity for work, and who have – depending on their age – earned the pensionable period required by law for eligibility for a pension for incapacity for work. For instance, persons aged 60–62 applying for a pension for incapacity for work are required to have a pension qualifying period of at least 14 years, while there is no requirement for length of service for persons aged 16–20. Similarly, there is no requirement for length of service, if the permanent incapacity for work is caused by an occupational injury or disease identified on the basis of Estonian legal acts.

Upon the death of a provider, dependent family members have the right to receive a survivor's pension. A survivor's pension is granted on the basis of the provider's pension qualifying period earned in Estonia (on the same grounds with the pension for incapacity for work). If the provider's death is caused by an occupational injury or disease, no requirement for length of service is set when granting a survivor's pension.

The following persons have the right to receive a national pension: persons who have attained 63 years of age and who do not have required length of pensionable service for old-age pension and who have been permanent residents of Estonia or have resided in Estonia on the

basis of a temporary residence permit for at least five years immediately before making a pension claim.

Superannuated pensions are granted to workers and specialists in occupations, which involve a loss or reduction of professional capacity for work before attaining pensionable age, preventing continued working in the given field or position (e.g. police officers, workers of life-saving service, employees of penal institutions, some mining and excavation workers; some categories of aviation workers etc.). Granting and payment of superannuated pensions is governed by the Superannuated Pensions Act. Superannuated pensions are, in the presence of conditions established in the said Act, granted to persons with at least 15 years of pensionable length of service earned in Estonia.

On 1 January 2009, the Estonian population included 382,316 persons who received a state pension and 63% of them were women. The percentage of pension recipients accounted for 28.5% of the total population in the beginning of 2009 and has been increasing continuously during the years after the pension reform – growth by 0.9 percentage points in comparison to 2000. The total number of pension receivers has increased by 0.8% from 2000 to 2009.

More than three quarters of pension receivers are old-age pensioners, with a total of 290,967 persons in the beginning of 2009. The number of incapacity-for-work pensioners was 70,024 persons, i.e., slightly over 18% of pension receivers. The aggregate number of receivers of survivor's pension, national pension and superannuated pension was 21,325 persons, i.e., 5.6% of pension receivers (3.0%, 1.9% and 0.7%, respectively, in each category).

The largest changes in the number and percentage of pension receivers during the period 2000–2009 have been recorded in the group of persons receiving pension for incapacity for work. This was due to the Pension Insurance Act that entered into force in 2000. According to the Act, the persons who had received disability pension and were in retirement age were now paid the old-age pension and disabled persons in employable age were paid the pension for incapacity for work. As a result of this amendment, the number of persons receiving pension for incapacity for work decreased by 18,700 in 2001 (decrease by 30%) in comparison to the number of former disability pensioners (not including disabled children). At the same time, the number of old-age pensioners increased by 13,000 and the number of receivers of national pension due to incapacity for work increased by some 3,200 persons. At the beginning of 2009, the number of incapacity-for-work pensioners exceeded the level from the time before the pension reform by over 3,000 persons. In comparison to the post-reform year 2001, the number of incapacity-for-work pensioners has increased by more than 26,600 individuals, with 47% of them having a moderate loss of capacity (40–50%). The number of old-age pensioners has decreased by some 8,800 persons from 2002, the peak year of the post-reform period. The rate of decrease has decelerated in the last three years and the number of old-age pensioners showed very little movement in 2008 and 2009.

The average calculated pension (across all pension types) in the beginning of 2009 amounted to 4,103 EEK, which represents an increase by over 2,600 EEK in comparison to 2001. The

highest increase in pensions (708 EEK) occurred in 2008. At the monthly level of 4,554 EEK, the old-age pension was by 11% higher than the average pension, whereas this difference with the average pension was only 6.2% in 2001. The amount of the average calculated pension is mainly affected by the low pension for incapacity for work. The average pension for incapacity for work was 2,703 EEK in the beginning of 2009. The gap between this type of pension and the average pension has been increasing during the reviewed years. While the average pension for incapacity for work was at the level of 72% of the average pension in 2001, this percentage had dropped to 66% by the beginning of 2009. This change was caused by a significant increase in the percentage of pensioners with a limited loss of capacity for work among the persons receiving pensions for incapacity for work (from 31% in 2001 to 41% in 2009).

Expenditures of state pension insurance amounted to 18.0 billion EEK in 2008. This represents an increase by times of 2.8 in comparison to the year 2000. The significant growth in pension expenditure in 2008 increased the share of pension expenditure both in GDP and the state budget. The percentage of pension expenditure in GDP amounted to 7.16% in 2008, which is the highest level of the entire period considered. In the state budget of 2008, pensions accounted for almost one fifth (19.99%) of total expenditure, which is the highest level of the last five years.

Table 1. **Persons receiving state pensions by pension types 2000, 2004, 2006–2009**
(as at 1 January)

Type of pension	2000	2004	2006	2007	2008	2009
Total number of pension receivers¹	379,292	377,343	380,423	381,360	381,121	382,316
Percentage of pensioners in population, %						
men in all pension receivers, %	27.6	27.9	28.3	28.4	28.4	28.5
women in all pension receivers, %	34.1	36.0	36.6	36.7	36.6	36.8
Total number of receivers of old-age pension						
old-age pensioners	65.9	64.0	63.4	63.3	63.4	63.2
early-retirement pension	284,327	294 063	292,970	291,580	290,903	290,967
deferred old-age pension	284,305	293,032	291,777	290,342	289,628	289,624
receivers of national special pension	–	7,715	10,704	12,071	13,409	14,639
Receivers of superannuated pension						
	–	168	338	423	487	559
	22	1,031	1,193	1,238	1,275	1,343
	3,240	2,820	2,848	2,908	2,772	2,683

continued ►

► continuation

Receivers of pension for incapacity for work²	66,814	55,480	61,921	65,497	67,459	70,024
100% loss of capacity	–	7,538	8,169	8,620	8,853	9,001
90% loss of capacity	–	2,747	3,068	3,171	3,280	3,314
80% loss of capacity	–	21,550	21,984	22,295	22,152	22,342
70% loss of capacity	–	3,898	4,929	5,521	6,022	6,430
60% loss of capacity	–	10,174	11,182	11,923	12,257	12,719
50% loss of capacity	–	4,163	5,408	6,049	6,484	7,046
40% loss of capacity	–	5,410	7,181	7,918	8,411	9,172
Receivers of survivor's pension						
families	15,318	7,924	9,766	9,537	9,126	8,724
family members	23,256	11,613	13,500	12,982	12,247	11,554
Total number of receivers of national pension³	1,655	13 367	9,184	8,393	7,740	7,088

¹ For all types of pensions, the number of persons receiving pension has been taken into account.

² Until 2000, disability groups were determined. From 1 April 2000, the percentage of loss of capacity for work is determined. The right to receive a pension for incapacity for work begins from 40% loss of capacity for work.

³ From 2003, some receivers of survivor's pension started to receive national pension due to a legislative amendment (this is also a cause for the increase in the number of pension receivers after the pension reform).

Source: Social Insurance Board

Table 2. **Average amount of pensions 2000, 2004, 2006–2009**
(as at 1 January, EEK per month)

Type of pension	2000	2004	2006	2007	2008	2009
Estimated average pension	1,459	1,890	2,478	2,819	3,395	4,103
Old-age pension	1,551	2,072	2,739	3,129	3,763	4,554
early-retirement pension	–	1,657	2,180	2,484	2,991	3,616
deferred old-age pension	–	2,061	2,873	3,336	4,052	4,955
national special pension ¹	–	5,903	6,229	6,392	7,971	9,653
Superannuated pension	1,083	1,651	2,279	2,595	3,510	4,424
Pension for incapacity for work²	1,141	1,244	1,625	1,842	2,241	2,703
100% loss of capacity	–	1,644	2,214	2,532	3,084	3,735
90% loss of capacity	–	1,492	1,995	2,287	2,785	3,381
80% loss of capacity	–	1,328	1,770	2,027	2,470	2,994
70% loss of capacity	–	1,176	1,571	1,804	2,197	2,666
60% loss of capacity	–	1,004	1,344	1,542	1,880	2,279

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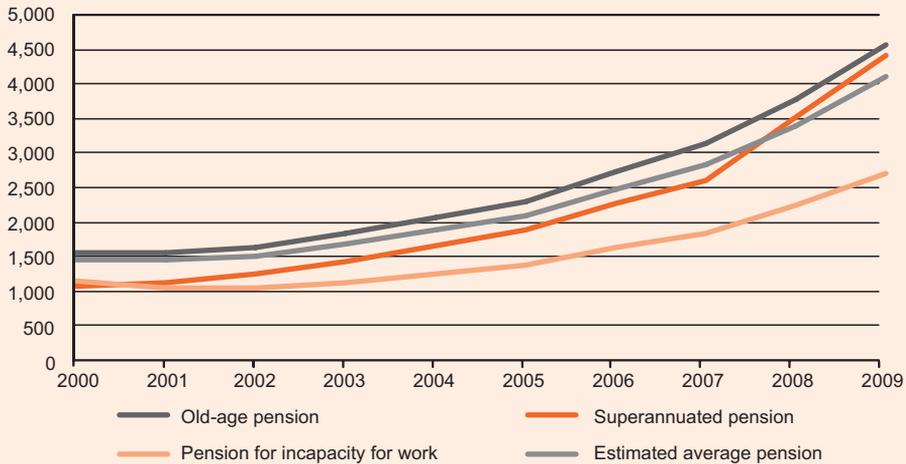
50% loss of capacity	–	938	1,179	1,311	1,614	1,959
40% loss of capacity	–	933	1,160	1,273	1,579	1,920
Survivor's pension						
per family receiving the pension	1,280	1,001	1,319	1,492	1,814	2,187
per family member receiving the pension	843	707	964	1,104	1,352	1,652
National pension						
due to age	...	984	1,162	1,270	1,574	1,916
due to incapacity for work	...	837	907	968	1,187	1,443

¹ Occupational pension of police officers, National Audit Office officials, judges, prosecutors and the Chancellor of Justice, allocated from the state budget.

² Until 2000, pension was paid according to disability groups. From 1 April 2000, pension is paid according to the percentage of the loss of capacity and the right to receive a pension for incapacity for work begins from 40% loss of capacity for work.

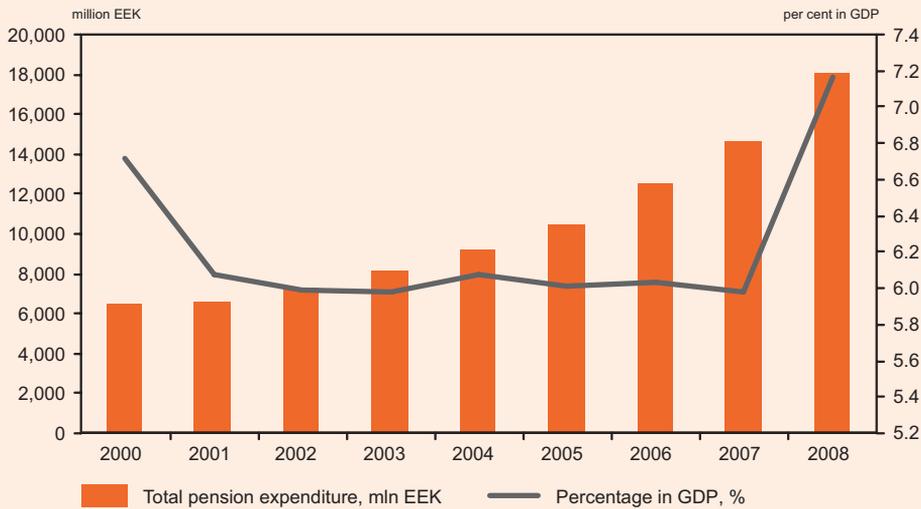
Source: Social Insurance Board

Figure 1. Average amount of pensions, 2000–2009
(at the beginning of year, EEK per month)



Source: Social Insurance Board

Figure 2. Pension expenditure and percentage in GDP, 2000–2008



Source: Social Insurance Board

Table 3. Expenditure on state pension insurance 2000, 2004, 2006–2008 (million EEK)

Type of pension	2000	2004	2006	2007	2008
Old-age pension	5,467.8	7,938.5	10,685.6	12,444.7	15,256.7
Pension for incapacity for work	663.3	931.6	1,400.6	1,720.5	2,220.1
Survivor's pension	229.4	122.1	173.3	195.7	230.4
Superannuated pension	36.9	56.9	81.4	98.3	126.9
National pension	67.3	125.8	104.0	109.8	124.4
Parliamentary pension, President's occupational pension ¹	9.1	24.4	32.9	42.8	54.8
Total pension expenditure	6,473.8	9,199.3	12,477.8	14,611.8	18,013.2
pensions financed from social tax payments	6,214.3	8 789.9	12,015.6	14,072.1	17,356.1
pensions and pension supplements financed from the state budget ²	259.5	409.4	462.2	539.7	657.1
Percentage of pension expenditure, %					
in GDP ³	6.72	6.07	6.03	5.98	7.16
in the state budget ⁴	22.84	17.44	19.31	19.22	19.99

¹ Payable from the budget of the Riigikogu and the Office of the President. Includes old-age pensions (75% of salary) and pensions for incapacity for work (up to 70% of salary) of the members of the Supreme Council and the Riigikogu of the Republic of Estonia, as well as the survivor's pension for the family members of a member of the parliament (30% of salary per each family member who is incapable of work); the President's occupational pension (75% of salary) and survivor's pension for family members (up to 75% of the President's salary). National old-age pension is not paid to the members of the parliament while they are working in the Riigikogu.

² Different types of pensions and pension supplements can be financed from the state budget: national pension, pensions of certain officials (judges, prosecutors, National Audit Office officials, Chancellor of Justice, members of the Defence Forces, police officers, members of the Riigikogu, President) and pension supplements payable according to length of service and other supplements (incl. for officials).

³ Indicators are based on corrected data of Statistics Estonia on the period 2000–2008 as at 8.09.2009.

⁴ Implementation of the state budget by expenditures; macro indicators can be found at the end of the chapter on "Social Protection".

Source: Social Insurance Board

Benefits for disabled persons

Disability is the loss of or an abnormality in an anatomical, physiological or mental structure or function of a person, which in conjunction with different relational and environmental restrictions prevents participation in social life on equal bases with the others.

Disabled persons are paid special benefits to support independent coping, social integration and equal opportunities of disabled persons on the basis of the Social Benefits for Disabled Persons Act, which was partially enforced in 2000 and fully enforced in January 2001.

Social benefits for disabled persons are granted and paid to permanent residents in Estonia or persons living in Estonia on the basis of a temporary residence permit or on the basis of a right of temporary residence, also to an internationally protected person in case of moderate, severe or profound disabilities for compensating additional expenses arising out of the disability and for activities established in the rehabilitation plan.

In 2008, disabled persons were paid ten different types of benefits from the state budget. Four of these benefit types – disabled child allowance, caregiver’s allowance, disabled parent’s allowance and education allowance – were implemented in 2000. The disabled adult allowance, rehabilitation allowance and in-service training allowance were added in 2001. Work allowance was introduced in 2008 and the disabled adult allowance was replaced by disability allowance for a person of working age and disability allowance for a person of retirement age.

Benefits are calculated on the basis of the social benefit rate for disabled persons, which is established by the Riigikogu for each budgetary year (approved together with the state budget). From 2000, the monthly social benefit rate for disabled persons has been 400 EEK and it was not changed in 2009.

From 1 April 2005, the procedure for the payment of caregiver’s allowance for disabled adults was amended. The funds for the payment of caregiver’s allowance to disabled adults were transferred from the Social Insurance Board to local governments. The purpose of the change was to improve the accessibility of benefits to disabled persons and to increase the capacity of local governments to manage the welfare services for the disabled persons (for details, see the chapter “Social Welfare”).

Major changes were also introduced in 2008. The aim was to motivate disabled persons to participate in employment and to compensate the additional expenses of disabled persons in

connection with active participation in society to keep the compensation in proportion with the compensation paid to less active disabled persons (i.e., active persons receive more compensation). Therefore, the objective in the case of persons of working age was to bring them to the labour market and in the case of elderly persons to ensure better availability of services, because the problems of disabled persons are not solved by paying larger benefits.

The number of disabled persons, i.e., persons with an officially established degree of disability as certified by a medical assessment committee of the Social Insurance Board, in Estonia in the beginning of 2009 amounted to over 118,000 persons, or 8.8% of the total population. This mostly includes elderly people – 59% of the disabled people are 63 years of age or older.

The number of disabled persons who were registered for the first time in 2008 was somewhat lower than in previous years – a degree of disability was established for the first time in the case of 14,828 persons (e.g., the figure was 18,300 in 2006). However, any conclusions should take into account that difficulties with the application of legislative amendments in the age group of working age people exerted a certain restricting influence. Half of the new persons with a disability were in retirement age, 9% were children and 41% were in working age.

The number of receivers of the disabled adult allowance has been gradually increasing in each year, crossing the 110,000 margin in 2007 and reaching 110,665 persons in 2008. The number of receivers of disabled child allowance was 5,745 in 2008, representing an increase by almost one third (30.3%) in comparison to 2000.

In connection with the transfer of the funds for the disabled adult caregiver's allowance to local governments from the second quarter of 2005, the amount of caregiver's allowance paid via the Social Insurance Board decreased. While the Social Insurance Board paid caregiver's allowance for 38,060 disabled persons under care in 2004, the number of disabled persons under care dropped to 1,837 in 2006, because this benefit was now paid only for caring for children aged 3–18. Consequently, the total amount of benefits paid to disabled people via the Social Insurance Board decreased steeply. Even though the decrease in the number of disabled children eligible for caregiver's allowance continued in 2006, the decrease in the total amount of benefits paid to the disabled persons via the Social Insurance Board turned into an increase. The annual growth of expenditure was particularly fast in 2008 – over one tenth (10.6%), having been only around two or three per cent points a few years before (2006 and 2007). The total expenditure on benefits for disabled persons in 2008 was 662.2 million EEK. An overview of the use of funds transferred to local governments is provided in the chapter "Social Welfare".

Incapacity of work

Table 1. **People declared as permanently incapacitated for work by sex, age and percentage of loss of capacity, 2006–2009**
(at the beginning of year)

Year	Total, persons		Percentage in population, %	By sex, %		By age %			
				Male	Female	Under 30	30–44	45–59	60+
2006	71,734	5.3	54.5	45.5	12.9	22.2	57.3	7.6	
2007	74,576	5.6	53.4	46.6	11.6	20.0	55.3	13.1	
2008	76,838	5.7	53.4	46.6	12.1	20.7	58.0	9.2	
2009	76,661	5.7	52.3	47.7	12.4	19.6	57.1	10.8	
By percentage of loss of capacity for work									
2006	100%	9,670	0.7	63.1	36.9	13.5	20.4	52.2	13.9
	80–90%	28,106	2.1	55.3	44.7	12.6	23.9	55.9	7.6
	40–70%	32,463	2.4	51.4	48.6	12.9	21.0	60.4	5.7
	10–30%	1,495	0.1	52.1	47.9	15.4	25.2	50.4	9.0
2007	100%	10,164	0.8	62.5	37.5	12.5	18.6	47.9	21.0
	80–90%	28,279	2.1	54.3	45.7	11.3	22.3	52.9	13.5
	40–70%	34,627	2.6	50.0	50.0	11.4	18.6	59.5	10.5
	10–30%	1,506	0.1	53.8	46.2	13.7	21.2	52.1	13.0
2008	100%	10,631	0.8	62.3	37.7	13.0	19.0	50.6	17.4
	80–90%	28,308	2.1	54.5	45.5	12.2	23.0	55.4	9.4
	40–70%	36,262	2.7	49.9	50.1	11.6	19.4	62.4	6.6
	10–30%	1,637	0.1	52.8	47.2	14.4	23.5	51.5	10.6
2009	100%	10,152	0.8	62.1	37.9	13.6	17.2	49.3	19.7
	80–90%	26,595	2.0	53.8	46.2	12.7	22.0	53.8	11.5
	40–70%	38,228	2.9	48.5	51.5	11.8	18.6	61.7	7.9
	10–30%	1,686	0.1	53.4	46.6	15.8	24.3	49.9	10.0

Source: Social Insurance Board

Disability

Table 2. **Persons with a determined degree of severity of disability by sex and age, 2006–2009**
(at the beginning of year)

Year	Total, persons		Percentage in population, %	By sex, %		By age, %					
				Male	Female	0–6	7–15	16–29	30–44	45–62	63+
2006	113,009	8.4	39.7	60.3	1.6	3.5	5.1	7.3	22.2	60.3	
2007	115,354	8.6	39.6	60.4	1.4	3.6	5.0	6.6	20.9	62.5	
2008	117,646	8.8	39.0	61.0	1.5	3.3	4.9	6.9	21.9	61.5	
2009	118,365	8.8	39.8	60.2	1.8	3.6	5.2	7.2	22.9	59.3	
By degree of severity of disability											
2006	moderate	36,529	2.7	40.2	59.8	1.5	3.8	5.6	8.0	30.2	50.9
	severe	61,302	4.6	39.2	60.8	1.7	3.5	4.7	7.2	19.6	63.3
	profound	15,178	1.1	40.9	59.1	1.9	2.8	5.2	6.2	13.4	70.5
2007	moderate	39,048	2.9	39.4	60.6	1.1	3.8	5.3	7.5	29.8	52.5
	severe	62,030	4.6	39.3	60.7	1.5	3.7	4.9	7.1	19.6	63.2
	profound	14,276	1.1	42.0	58.0	1.9	3.0	6.0	6.8	14.8	67.5
2008	moderate	38,249	2.9	38.8	61.2	1.3	3.4	5.1	7.4	29.9	52.9
	severe	64,328	4.8	38.5	61.5	1.6	3.4	4.6	6.6	19.0	64.8
	profound	15,069	1.1	41.6	58.4	1.9	2.5	5.5	6.7	14.4	69.0
2009	moderate	39,247	2.9	39.5	60.5	1.3	3.6	5.3	7.8	31.1	50.9
	severe	64,394	4.8	39.2	60.8	1.9	3.9	4.9	7.0	19.6	62.7
	profound	14,724	1.1	42.8	57.2	2.3	2.6	6.2	7.0	15.4	66.5

Source: Social Insurance Board

Table 3. **Persons with a determined degree of severity of disability by dominant disability type, sex and age, 2007 and 2009**
(at the beginning of year)

Year	Type of dominant disability	Total, persons	Percentage in population, %	By sex		By age, %				
				Male	Female	0-15	16-29	30-44	45-62	63+
2007	Disabled persons in total	115,354	8.6	45,713	69,641	5.0	5.2	7.2	22.5	60.1
	Mental disorder, intellectual disability	21,004	1.6	10,001	11,003	5.6	15.7	21.9	33.8	23.0
	Speech impairment	450	0.03	286	164	29.3	6.2	4.7	20.9	38.9
	Hearing impairment	2,276	0.2	1,078	1,198	13.4	14.6	14.5	20.6	36.9
	Visual impairment	4,588	0.3	1,717	2,871	4.7	4.1	5.3	19.3	66.6
	Physical disability	49,065	3.7	17,932	31,133	2.6	2.0	3.8	21.0	70.6
	Other disability	35,907	2.7	14,104	21,803	7.4	3.0	3.4	19.5	66.7
	Information on disability type not available	2,064	0.2	595	1,469	3.4	0.5	0.5	3.7	91.9
2009	Total disabled persons	118,366	8.8	47,083	71,283	5.4	5.2	7.2	22.9	59.3
	Mental disorder, intellectual disability	21,837	1.6	10,325	11,512	4.3	15.2	22.1	35.9	22.5
	Speech impairment	403	0.03	263	140	40.0	5.4	4.2	19.9	30.5
	Hearing impairment	2,061	0.2	933	1,128	12.5	15.0	15.2	19.5	37.8
	Visual impairment	3,828	0.3	1,407	2,421	4.1	4.0	4.8	18.9	68.2
	Physical disability	46,484	3.5	16,306	30,178	2.0	1.9	3.5	19.8	72.8
	Other disability	31,735	2.4	12,301	19,434	8.8	2.8	3.0	17.2	68.2
	Multiple disability	12,018	0.9	5,548	6,470	10.0	4.7	5.1	28.1	52.1

Source: Social Insurance Board

Table 4. **Recipients of social benefits for disabled persons¹, 2000, 2004 and 2006–2008**
(at the end of the year)

Type of benefit	2000	2004	2006	2007	2008
Disabled child allowance	4,409	5,302	5,295	5,538	5,745
moderate disability, %	...	34.2	33.7	31.5	30.3
severe and profound disability, %	...	65.8	66.3	68.5	69.7
Disabled adult allowance²	–	98,032	107,431	110,495	110,665
moderate disability, %	–	32.1	32.6	32.6	32.5
severe disability, %	–	54.0	54.4	54.6	55.1
profound disability, %	–	13.9	13.0	12.8	12.4
Work allowance³					50
Caregiver's allowance (by number of persons under care) ⁴	2,071	38,060	1,837	1,602	1,594
to non-working parent of a disabled child of 3–16 years of age	1,958	1,975	1,665	1,441	1,450
to non-working parent of a disabled child of 16–18 years of age and to non-working caregiver or guardian of a person not less than 18 years of age	113	36,085	172	161	144
severe disability, %	–	74.1	77.3	78.9	81.3
profound disability, %	–	25.9	22.7	21.1	18.8
Disabled parent's allowance, number of children	1,472	1,521	1,580	1,550	1,414
Disabled parent's allowance, number of families	...	1,154	1,212	1,187	1,049
Education allowance to non-working disabled student	15	27	19	19	22
Rehabilitation allowance, to persons of 16–65 years of age, non-recurrent	–	1,815	2,274	2,082	2,160
In-service training allowance, non-recurrent	–	34	51	52	71

¹ As at the end of the year, except for rehabilitation, in-service training and work allowance (figure progressively from the beginning of year).

² The indicator of 2008 includes recipients of three types of benefits: recipients of the allowance for disabled persons of at least 16 years of age, for disabled persons of working age, and for disabled persons of retirement age.

³ Applied from 2008.

⁴ From 1 April 2005, the funds of caregiver's allowance for disabled adults were transferred to local governments, see the chapter "Social Welfare".

Source: Social Insurance Board

Table 5. Amounts of social benefits for disabled persons¹, 2000 and 2002–2008 (EEK)

Type of benefit	2000	2002–2005	2006–2007 ³	2008
Disabled child allowance				
moderate disability	840	860	1,080	1,080
severe and profound disability	940	1,020	1,260	1,260
Allowance for disabled persons of at least 16 years of age				
for persons of working age with moderate disability	–	200	200	260
for persons of retirement age with moderate disability	–	200	200	200
for persons of working age with severe disability	–	420	420	560
for persons of retirement age with severe disability	–	420	420	420
for persons of working age with profound disability	–	640	640	840
for persons of retirement age with profound disability	–	640	640	640
Disability allowance for a person of working age				
moderate disability	–	–	–	260
severe disability	–	–	–	560
profound disability	–	–	–	840
Disability allowance for a person of retirement age				
moderate disability	–	–	–	200
severe disability	–	–	–	420
profound disability	–	–	–	640
Work allowance	–	–	–	up to 4,000 in three years
Caregiver's allowance				
to non-working parent of a disabled child of 3–16 years of age	300	300	300	300
to non-working parent of a severely disabled child of 16–18 years of age	–	240	240	240
to non-working parent of a profoundly disabled child of 16–18 years of age	–	400	400	400
to non-working caregiver or guardian of a severely disabled person of at least 18 years of age	–	240	–	–
to non-working caregiver or guardian of a profoundly disabled person of at least 18 years of age	–	400	–	–

continued ►

► continuation

Disabled parent's allowance²	300	300	300	300
Education allowance to non-working disabled student	100–400	100–400	100–400	100–400
Rehabilitation allowance, 16–65 years of age	–	up to 800 per year	up to 800 per year	up to 800 per year
In-service training allowance, non-recurrent	–	up to 9,600 in three years	up to 9,600 in three years	up to 9,600 in three years

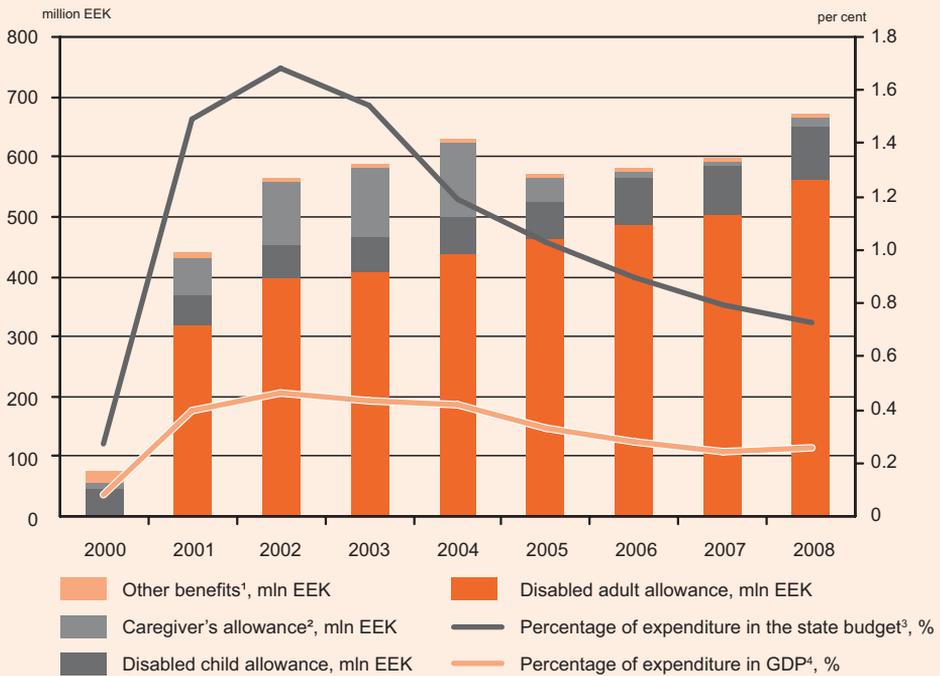
¹ EEK per month, except for work, rehabilitation and in-service training allowance.

² Allowance per child.

³ From 1 April 2005, the funds of caregiver's allowance for disabled adults were transferred to local governments.

Source: Ministry of Social Affairs

Figure 1. Expenditure on state social benefits for disabled persons and percentage in GDP and the state budget, 2000–2008



¹ Other benefits include work allowance, disabled parent's allowance, education allowance to non-working disabled student, rehabilitation allowance to persons of 16–65 years of age, and in-service training allowance.

² From 1 April 2005, the funds of caregiver's allowance for disabled adults were transferred to local governments.

³ Implementation of the state budget by expenditures, the macro indicators are presented at the end of chapter "Social protection".

⁴ Indicators are based on corrected data of Statistics Estonia on the period 2000–2008 as at 8.09.2009.

Source: Social Insurance Board

Social welfare

Overview of the legal context

The aim and purposes of social welfare are to provide assistance to persons or families in preventing, eliminating and relieving difficulties in coping, and to assist persons with special social needs in social security, development and integration into society.

The Social Welfare Act provides the organisational, economic and legal basis of social welfare, and regulates the relations emerging in social welfare.

Permanent residents of Estonia, aliens residing in Estonia on the basis of a residence permit or a right of residence, and persons under international protection on Estonian soil have the right to receive social services, social benefits and other assistance. Every person on Estonian soil has the right to receive emergency social assistance.

Social services and social benefits are financed from the state budget, local government budgets, funds of legal persons and natural persons who voluntarily engage in social welfare and other funds.

The extent of state financing is specified by the state budget act for the corresponding budget year.

The following is financed from the state budget: expenditure relating to state social welfare management, state social programmes and projects, expenditure relating to the welfare of children, the welfare services to adults with special mental needs and services for partially disabled persons (rehabilitation services, partial compensation for prostheses and medical devices), expenditure relating to state social benefits, and other expenses relating to performance of state social welfare duties and events.

Local governments cover the costs of social welfare services not financed from the state budget from the local government budget.

A fee may be collected from a person for social services provided to the person or to his or her family. The fee collected depends on the extent and cost of the service and the financial situation of the person and family receiving the service. The collection of a fee from a person for social services is decided by the institution which provides or pays for the service.

Other funding sources are revenue received from various funds, foundations, non-profit activities, donations and sponsorships and the funds of persons applying for social services or other assistance.

The main target groups of social welfare are children, the elderly and persons with disabilities, persons with special mental needs, and persons using social services in the case of emergencies.

Children's welfare is organised on the levels of both the state and local governments. For the administration of children's welfare and the creation of an environment favourable for children's development, rural municipality or city governments shall support children and persons raising children co-operating with family members, other persons and agencies concerned; if necessary, appoint support persons or support families for children or persons raising children; organise the guardianship of children and assist in arranging adoptions. If the separation of a child from the family is inevitable (deficiencies in the care and raising of the child endanger the child's life, health or development or other measures applied with respect to the family and child have not been sufficient), the child is provided either substitute care in a foster or guardian family or provided substitute home care in children's welfare institution.

Social welfare for the elderly and disabled persons is organised by local governments. This concerns, in particular, home care services, personal assistant service, support person service, housing service, day centre services, care for disabled persons in home, and 24-hour care in welfare institutions.

From 1 April 2005, the payment of the caregiver's allowance to caregivers of adults with severe and profound disabilities via the Social Insurance Board on the basis of the Social Benefits for Disabled Persons Act was terminated and the relevant funds were transferred to local governments¹⁹. The aim of these changes was to guarantee better availability of aid to disabled people and to increase the options of local governments in organising the welfare of disabled people in need of assistance.

From 2006, local governments are required to provide information on the provision of the personal assistant service and the support person and support family services. The personal assistant service is mainly used by young people with visual impairment or physical disability and the goal is to reduce the restrictions caused by disability in studying, entering and staying in employment, as well as in activities related to home, family and recreation. A local government is responsible for appointing a support person if it is needed for a child, a person raising the child, a disabled person, a person released from a penal institution or any other person in need of social assistance. It also includes temporary stay with the family of a child in a substitute home during a study-free period (holidays, national holidays or school holidays).

In addition to the services organised and financed by local governments, the state compensates 50–90% of the cost of prosthetic appliances, orthopaedic and other aids to disabled persons, the elderly and children (the percentages of state contributions by categories of aids are established with a regulation of the Minister of Social Affairs). Upon paying for the aid device, the state's share is paid after the person's has paid his or her own share. A person's own share is the difference in the cost of the aid device and the state's share, but no less than 200 EEK.

¹⁹ From 1 March 2009, local governments are also responsible for organising the payment of caregiver's allowance for disabled children.

Rehabilitation service is also financed from the state budget to ensure independent coping of persons. The service is used by children and adults with a disability or an application for certification of disability, adults with special mental needs, and children with behaviour disorders. Due to the target group of this service, the extent of public financing is variable during a year and can change over time.

In addition, special welfare services for persons with special mental needs are also financed from the state budget.

Special welfare services (24-hour care services and supporting services for adults with special mental needs) are services for adults who have developed, as a result of their mental disorder, an increased need for personal assistance, guidance or supervision and who require professional personal assistance in order to cope.

There have been important developments in special welfare services in recent years. In the late 1990s, persons with special mental needs were only provided the 24-hour care service, but several open care services, such as assisted everyday life, assisted living, living in a community and, lastly in 2001, assisted working, have been added to the range of services. The central purpose of special welfare services is to develop as independent coping ability as possible: the person should make the maximum effort to perform his or her daily activities and he or she is guided and assisted as necessary.

The provision of social services and payment of benefits in the case of emergencies are organised by local governments. Local governments are required to provide shelter to persons who need temporary accommodation for various reasons and should provide night lodging services for the homeless. The most important type of social benefit, payable to families (and single persons) in the case of emergencies, is the subsistence benefit paid from the state budget through rural municipality or city governments. Pursuant to the Social Welfare Act, a person living alone or a family whose monthly disposable income, after the deduction of the fixed expenses connected with permanent dwelling during the current month, is below the subsistence level has the right to receive a subsistence benefit. The Riigikogu establishes the subsistence level for a person living alone and for the first member of a family for each budgetary year by the state budget. In 2008, the subsistence level for a person living alone was 1,000 EEK. The subsistence level of the second and each subsequent member of a family is 80% of the subsistence level of the first member of the family. In addition to the subsistence benefits, families consisting entirely of underage (up to 18) members receiving the subsistence benefit are, from 2005, also paid an additional social benefit of 200 EEK a month.

In the case of a surplus in the funds for subsistence benefits, rural municipality or town governments may pay additional social benefits or provide social services to those in need of assistance on the terms and conditions and according to the procedure established by the local government.

Analytical overview²⁰

The following section on statistics is structured according to different target groups. If a target group is not clearly definable in the case of some services, the service is classified according to its purpose and primary users (e.g., the section of elderly and disabled persons includes day centre services, which offer opportunities for hobby activities and recreation, above all, to persons who are not participating in economic activities). The first part of the section includes data on the institutions that provide welfare services, the users of these services (incl. 24-hour services), the staff that provides the services, and the cost of the services and the sources of funding. As the users of rehabilitation services belong to three different target groups, the data on these services are presented in the beginning of the section in the tables of general indicators.

The total number of institutions that provided social services (excl. providers of rehabilitation services) was 322 at the end of 2008, including 54 institutions that provided two or more services. The number of institutions that provided 24-hour welfare services was 177 (i.e., 55% of service providers), incl. six institutions that provided services to several target groups. 120 institutions provided institutional welfare services for adults (excl. adults with special mental needs), 28 provided welfare services for adults with special mental needs, and 35 institutions provided substitute home services.

The number of staff members of social welfare institutions at the end of 2008 was over 5,700²¹. Nearly 56% of them were educational workers, caregivers and providers of nursing care. This percentage rises to 63% if we include nurses and social workers. The institutions providing 24-hour care service employed 4,500 persons at the end of the same period (79% of total staff providing welfare services).

The total expenditure on welfare services in 2008 amounted to 1,734 million EEK, including 40% (i.e., nearly 680 million EEK) paid by the state. The contribution of local governments was at the level of 38%, while the self-financing of service users was 22%. In comparison to 2003, the total expenditure increased by a times of 2.5. 58%, or 1,006 million EEK, of the funds used for the provision of social welfare services in 2008 were spent on the provision of 24-hour care services. At the same time, the share of 24-hour welfare services in the expenditure has decreased by 7.6 percentage points in 2008 in comparison to 2003. The main reason for this was a major increase in the expenditure

²⁰ The content and organisation of data collection on social welfare changed significantly in 2003, with transition from institution-based reporting to service-based reporting. Therefore, some statistical data are presented from 2003. Full statistical reports are available on the S-web (reports of local governments, based on the social register, from 2001) and H-web (reports from institutions providing welfare services from 2003) at www.sm.ee/sveeb and www.sm.ee/hveeb, respectively. NB! In the statistics on welfare service for adults with special mental needs in 2008, due to the H-web technical reasons, the statistical reports from two institutions are doubled and therefore the data of chapter "Social welfare" in the tables 1, 3 and 18, and in figure 5 differs from the data in the H-web.

²¹ Only employees of institutions that provide welfare services. Does not include social work or child protection officials responsible for the organisation of social welfare, social workers who provide home care services, caregivers of disabled persons, personal assistants, support persons and support families, foster care families, or specialists who provide rehabilitation service for disabled persons and persons with special mental needs.

of the state on the provision of open care services – rehabilitation service and purchases of subsidised technical aids.

The expenditure on the care for adults in social welfare institutions comprised 45% (452 million EEK) of the expenditure on 24-hour welfare services in 2008. In addition, this service was also the largest expenditure item, constituting over one quarter of the total expenditure on social welfare services.

The total number of users of the 24-hour care service was nearly 8,850 at the end of 2008. More than half (59%) of them were users of care services for adults, 26% were users of services for persons with special mental needs, and 15% were users of substitute home services. The aggregate percentage of the users of all three abovementioned services was 0.66% of the total population at the end of 2008. It means that 66 of every 10,000 residents were on 24-hour care in a social welfare institution. In comparison to 2000, the number of service users per 10,000 residents has increased by 11. The users of care services for adults accounted for the main part of the increase, with an increase by 58%.

The number of rehabilitation service users was 16,190 in 2008 and it has increased by almost a third (32.3%) in the last three years. This service was used mainly – 87% of the cases (14,033 persons) – by persons with disabilities or by persons who applied for certification of disability. This category included 4,156 children (aged 0–17 years), 5,392 persons of working age (18–64 years), and 4,485 elderly persons of at least 65 years of age. Every eighth (12.9% of service users, or 2,086 persons) user of rehabilitation services was a person with special mental needs. The number of service users has more than doubled in the group of underaged (up to 18) with behavioural special needs, increasing from 34 in 2006 to 71 in 2008.

Children

The number of new registrations of children left without parental care or children needing assistance increased in 2006 as a result of specification of statistical data, because unlike the previous years, the report now also included children needing assistance in their biological family whose cases have been referred to a social protection or child protection official. 1,732 children left without parental care and children needing assistance were registered for the first time in 2008.

The quality of the assistance provided to the children and families is linked with the number and professional qualifications of the specialists. The Concept of Child Protection approved by the Government of the Republic in 2005 has set a target where the number of children per child protection official would be 1,000. The number of child protection officials has increased to 162 specialists during the period 2003–2008. 80% of these officials have received specialised education. The target established in the Concept for Child protection – one child protection official per 1,000 children – is getting closer with each year: in 2008, there were, on the average, 1,535 children per one child protection official. On the one hand, this figure is influenced by the increased number of child protection officials and, on the other hand, by the decreasing number of children aged 0–17.

The number of children in foster care has decreased by times of 2.7 during the period 2003–2008. Even though an adult could, in principle, also use this service, the majority (98–99%) of the users are children. The number of foster families has decreased in the review period as well, amounting only to 327 families in 2008 in comparison to 869 families in 2003.

The number of adopted children has increased in comparison to 2003, amounting to 181 children in 2008. The number of children adopted by foreign nationals has been variable in different years, ranging from 10% to 15% of all adopted children. The number of children under guardianship has slightly decreased in comparison to 2003, amounting to 250 children in 2008.

The objective in the case of substitute care is to maximise the number of children, needing substitute care, who are raised in families. Unfortunately, a suitable family cannot be found for all children and, therefore, some children are referred to the substitute home service. In 2008, two thirds of children referred to substitute care found new homes in families, which is somewhat less than in 2003, when 73% of children found a family.

Elderly and disabled persons

There have been important developments in services for the elderly and disabled persons in recent years the number of places in 24-hour care institutions has increased, the number of local government units that provide personal assistant or support person services to disabled persons has increased, and the state has made increasing contributions towards purchases of technical aids for the elderly and disabled persons, etc. All these developments have increased the number of service users and the expenditure on the provision of services.

The majority of the users of services for the elderly and disabled persons are persons of at least 65 years of age. The number of service users has increased mainly on account of older service users (75+ or 80+).

The number of users of the 24-hour care service for adults has increased by 1,300 persons (58%) from 2003 to 2008. A total of 5,182 elderly and disabled persons stayed in welfare institutions at the end of 2008, i.e., 47 persons per inhabitant (from 18 years of age). The number of service users has increased by 200–250 persons annually in recent years. Persons of at least 80 years of age account for 70% of the increase in the number of service users; the percentage of such persons among service users has increased from 34% in 2003 to 43% at the end of 2008. 427 persons per 10,000 inhabitants of at least 80 years of age stayed in welfare institutions at the end of 2008 (329 at the end of 2003).

The number of home service users is stable, between 5,500 and 6,500. Home services are mainly used by elderly persons; 80–82% of the users are at least 65 years of age, and 44% have been at least 80 years of age in the last three years. Calculated per 10,000 inhabitants, the home service was used by 49 persons in 2008, and by 551 persons when calculated per 10,000 inhabitants of at least 80 years of age.

The care service for disabled adults was used by slightly more than 21,000 persons at the end of 2008. A quarter of them were aged under 65 years, which indicates that the need for assistance is associated mainly with age-related needs. Accordingly, half of the persons under care at the end of 2008 were at least 75 years of age and the proportion of this age group in service users has increased by 2.5 percentage points in comparison to 2006.

The personal assistant service for disabled persons is still at a stage of development. This service received greater attention from 2006, which is why statistical indicators are characterised by fast fluctuations. The number of users of this service rose to 401 in 2008, representing an increase by 8% in comparison to 2007. The most frequent users of this service belonged to the age group 25–49 or to the group of young people under 17 years of age (38% and 25%, respectively). The main goal in using the personal assistant service depended primarily on the age of the user. While studying was often the main goal for young people, the predominant goals in the age group 25–49 included recreation and social activities, followed by work. The number of service providers, i.e., personal assistants, was 357 in 2008. The annual increase in expenditure, 26%, was over four times faster than the increase in the number of service users, with a total expenditure of 7.4 million EEK in 2008; 4/5 of this money came from local governments. The personal assistant service was offered by 42 local governments in 2008.

Depending on users, the support person service can be divided into three categories: support person for a child; support person for a family with children where parents are unable to create a safe and developmental environment for the child; and support person for an adult. The most frequent users of the support person service for children (215 users in 2008) were disabled children. Every third child who used the support person service in 2008 had a disability. Provision of the support person service to children with addiction problems and behaviour problems became also topical in 2008. While the number of users of the support person service for children nearly doubled from 2006 to 2008 (increase by a factor of 1.92), the number of users of the support person service for families with children grew almost five times, rising from 65 in 2006 to 316 in 2008, which is certainly a reflection of the impact of economic recession. The number of users of the support person service for adults rose from 88 in 2006 to 243 in 2008. Adults with disabilities are the most frequent users of this service, followed by long-term unemployed persons who often also had concurrent addiction problems. 58 local governments used the support person service in their practice in 2008. The number of support persons was 249 and every fourth of them provided the service as a volunteer.

98 children from substitute homes spent some time in a family during study-free periods in 2008 and the number of such support families was 72. It is important to note that, in some instances, the child could temporarily stay with his or her biological family. There were 18 local governments in 2008 where children in substitute homes could spend some time in a family.

The housing service was used, at the end of 2008, by 8,780 persons, with nearly a quarter of them being in retirement age and 13% having special needs. The increase in the number of service users in 2007 was caused by change in the definition of the service, according to which the users of housing service also include persons who lease a dwelling in municipal ownership within the meaning of § 14 of the Social Welfare Act.

The number of receivers of prosthetic, orthopaedic and other aid devices has increased by a factor of 2.5 in comparison to 2000, rising to 50,820 persons in 2008. Nearly 80% of the receivers of aids are in retirement age.

Persons with special mental needs

Provision of welfare services to adults with special mental needs (special welfare services) has continually increased in recent years. While such services were provided to almost 4,500 people in 2003, this figure rose to 5,200 persons by 2008 (increase by 16%). This increase was mainly caused by supporting special welfare services. In 2003 and 2004, more than half (52–53%) of the service users used the 24-hour care service, but this percentage has dropped to 48–49% in recent years.

The most common supporting service is the assisted everyday life service, with a continuous increase in the number of users of this service and in the share in the total users of special welfare services. In 2003, a third of the clients of special welfare services used the assisted everyday life service, and by the year 2008, the proportion of recipients of this service had increased to 40 per cent of all service users. The number of users of the assisted everyday life service increased by 35% in this period.

Persons using social services in the case of emergency

The number of persons using the night shelter services for the homeless is on a decrease. The decrease in the number of users of lodging services for the homeless was largely affected by the elimination of a number of lodging places in Tallinn and creation of social accommodation units. As social accommodation units are registered as shelters, this has influenced the increase in the reported number of shelter service users in the last couple of years.

The economic situation of recent years (general wage increase, introduction of unemployment insurance, increased employment rate, and decreasing number of unemployed persons and unemployed job-seekers) has had a significant impact on the number of recipients of subsistence benefit. The number of recipients of subsistence benefit and the expenditure on the benefit decreased continuously until 2008. In 2008, benefits to secure the subsistence level were paid to 11,391 families (not considering the number of times the benefit was paid), which is 16% of the number of families that received the benefit in 2001. A total of 59,587 applications for subsistence benefit were granted in 2008, which is slightly over 13% in comparison to the number of applications in 2001. The expenditure on the benefit in 2008 was 89 million EEK, which is only a quarter of the corresponding expenditure in 2001.

From the end of 2008, the number of recipients of subsistence benefit started to increase as a result of the rapid increase in the number of unemployed persons. While a total of 31,641 applications for subsistence benefit were granted in the first half of 2008, including 19,669 applications from families with an unemployed member (62% of applications), the number of applications granted in the first half of 2009 was 48,338 (growth factor almost 1.5), including 35,118 applications (73%) from families with an unemployed member.

Tables and figures

General indicators

Table 1. Number of institutions providing and persons using welfare services, 2003–2004 and 2006–2008

Type of service	Institutions providing service (at the end of the year) ¹					Service users in total ¹ (during the year)				
	2003	2004	2006	2007	2008	2003	2004	2006	2007	2008
Substitute home service²										
	37	38	38	39	35	1,835	1,860	1,807	1,759	1,698
Institutional welfare services for adults (excl. persons with special mental needs)										
	108	112	116	118	120	5,404	5,997	6,828	7,068	7,458
Welfare services for adults with special mental needs										
	71	80	87	90	91	4,491	4,693	4,955	5,047	5,201
24-hour care service										
	24	25	27	27	28	2,413	2,443	2,414	2,428	2,583
Rehabilitation service for disabled persons³										
	31	39	48	61	70	6,599	9,543	11,008 ⁴	13,212 ⁴	14,033 ⁴
Rehabilitation service for adults with special mental needs³										
	6	8	41	38	37	669	949	1,198 ⁴	1,592 ⁴	2,086 ⁴
Rehabilitation service for minors with special behavioural needs⁴										
	...	...	5	4	6	...	...	34	45	71
Day centre services⁵										
	86	94	103	99	101	65,069	55,884	65,869	54,211	58,447
Housing service⁶										
	83	85	85	152	159	3,697	3,907	4,655	9,918	9,822
Shelter service⁷										
	28	29	29	32	32	3,243	2,580	2,487	2,850	3,280
Night lodging service for the homeless										
	10	11	11	10	10	1,712	2,062	1,535	1,458	1,055

¹ Number of institutions that provided rehabilitation services during the year.

² Only children in state welfare. Children with severe or profound disability staying in institutions on the basis of their parents' application have not been included.

³ During 2003–2005, the statistical data on rehabilitation service were collected from service providers via web-based system and, therefore, the data on service users during this period are service provider-centred data, not person-centred data. Statistical data of 2006 are based on case-specific approach reflected in the reports by the Social Insurance Board. Due to the abovementioned reason the data are not comparable.

⁴ Analysis is based on decisions, made by medical expertise departments of the Social Insurance Board, on placement to service according to the person's application and payment for services within the limits of the corresponding year. A person may produce several application during the period.

⁵ Every person who used the services during the year is counted once, irrespective of the number of times or the number of services he or she used.

⁶ Number of local governments that provided the housing service in municipal or social dwelling within the meaning of § 14 of the Social Welfare Act. Due to a change in methods, the data from 2007 and 2008 are not comparable to data from previous years (previous data only include provision of housing services in social dwelling, i.e., in social apartments or on social premises).

⁷ Until 2007 (incl.) includes rehabilitation service for persons released from prison.

Source: Ministry of Social Affairs

Table 2. **Personnel in institutions providing welfare services¹ by occupation and sex, 2003–2004 and 2006–2008**
(at the end of the year)

Occupation	2003	2004	2006	2007	2008
Personnel, total	5,416	5,584	5 528 ³	5,658	5,711
male, %	15.1	14.7	13.1	12.9	11.3
female, %	84.9	85.3	86.9	87.1	88.7
Management, senior and mid-level specialists	673	646	648	679	664
male, %	18.9	18.6	17.7	17.2	16.7
female, %	81.1	81.4	82.3	82.8	83.3
Persons involved in teaching and development²	1,388	1,584	1,255	1,537	1,835
male, %	9.5	9.4	7.9	7.9	8.2
female, %	91.5	91.6	92.1	92.1	91.8
Social workers	139	180	150	170	172
male, %	7.9	6.7	14.0	11.8	4.7
female, %	92.1	93.3	86.0	88.2	95.3
Nurses	284	274	207	201	201
male, %	1.8	1.1	1.0	1.5	2.0
female, %	98.2	98.9	99.0	98.5	98.0
Caregivers	1,171	1,163	1,275	1,278	1,375
male, %	3.3	2.8	2.7	3.7	3.3
female, %	96.7	97.2	97.3	96.3	96.7
Psychologists, physiotherapists, speech therapists, doctors, pedagogues	109	157	95	114	98
male, %	14.7	12.1	12.6	12.3	12.2
female, %	85.3	87.9	87.4	87.7	87.8
Other personnel (economic, catering, cleaning and other staff)	1,652	1,580	1,898	1,679	1,366
male, %	30.5	21.6	23.1	24.2	23.2
female, %	69.5	68.4	76.9	75.8	76.8

¹ The table presents the number of employees of institutions specialising in the provision of welfare services. The table does not include the personnel of institutions that do not provide welfare services as their principal activity (e.g. hospitals).

² Minders, assistant minders, activity instructors.

³ From 2006, the number of employees does not include providers of rehabilitation services for disabled adults and adults with special mental needs, because statistical data on these services are no longer collected in the reporting system H-web of the Ministry of Social Affairs.

Source: Ministry of Social Affairs

Table 3. Expenditure and financing of welfare services¹, 2003–2004 and 2006–2008

Type of service/ year	Service users in total (during the year)	Total expenditure (thousand EEK)	Expenditure financed by, %					
			Self-financing of service users	Local government	State	incl.		Other sources
						from state budget for service provision	from gambling tax	
Total								
2003	...	678,273.7	20.4	35.5	42.3	42.3	...	1.8
2004	...	740,753.8	21.8	34.5	42.2	42.2	...	1.5
2006	...	1,137,063.2	22.0	40.1	36.5	36.1	0.4	1.4
2007	...	1,372,361.2	22.2	39.8	36.6	36.1	0.4	1.4
2008	...	1,733,869.1	22.5	37.6	39.2	38.8	0.4	0.7
Care for orphans and children left without parental care in welfare institutions (substitute home service)								
2003	1,767	99,697.8	0.5	4.2	91.7	91.7	...	3.5
2004	1,851	117,000.3	0.4	4.4	93.3	93.3	...	1.9
2006	1,807	160,874.9	0.1	2.5	90.8	90.3	0.5	6.6
2007	1,759	181,236.5	0.2	9.2	84.0	83.9	0.1	6.6
2008	1,698	210,167.7	0.1	8.6	88.7	88.7	...	2.5
Welfare services for children with severe or profound disability, being cared for in a welfare institution on the basis of a parent's application (substitute home service)								
2003	132	7,833.7	9.0	7.4	68.6	68.6	...	15.0
2004	127	8,431.8	11.4	10.7	65.9	65.9	...	12.0
2006	131	11,326.2	11.9	28.5	59.2	59.2	...	0.4
2007	115	9,959.8	10.6	28.3	59.8	59.8	...	1.3
2008	93	10,295.8	9.8	40.2	49.3	49.3	...	0.6
Institutional welfare services for adults (excl. persons with special mental needs)								
2003	5,404	197,210.8	44.0	54.1	1.7	1.7	...	0.1
2004	5,997	219,965.5	47.5	50.6	1.5	1.5	...	0.4
2006	6,828	303,777.6	55.0	43.1	1.7	1.3	0.3	0.2
2007	7,068	360,120.4	58.3	40.6	1.1	1.0	0.1	...
2008	7,458	451,877.5	60.7	38.2	0.8	0.8	...	0.3
Welfare services for adults with special mental needs²								
2003	5,072	140,025.2	23.0	4.1	72.1	72.1	...	0.7
2004	5,290	150,712.1	24.7	4.3	70.0	70.0	...	1.0
2006	5,968	205,878.8	24.7	8.1	66.3	65.4	0.8	1.0
2007	5,725	263,461.8	23.8	9.7	65.5	64.6	0.8	1.1
2008	5,921	333,596.2	22.0	8.9	68.8	68.2	0.6	0.3

continued ►

► continuation

Rehabilitation service for adults with special mental needs³								
2003	669	4,938.8	0.0	0.0	100.0	100.0	-	-
2004	949	5,908.9	0.1	0.0	99.9	99.9	-	-
2006	1,198 ⁴	5,808.0	...	...	100.0	100.0	...	...
2007	1,592 ^{4,8}	9,800.8	...	...	100.0	100.0	...	...
2008	2,086 ⁴	17,296.7	...	...	100.0	100.0	...	...
Rehabilitation service for disabled persons³								
2003	6,599	7,763.1	5.5	31.7	61.0	61.0	-	1.7
2004	9,543	14,518.3	1.8	2.5	94.6	94.6	-	1.1
2006	11,008 ⁴	30,509.9	...	...	100.0	100.0	...	...
2007	13,212 ⁴	43,369.1	...	...	100.0	100.0	...	...
2008	14,033 ⁴	72,390.8	...	...	100.0	100.0	...	...
Rehabilitation service for minors with special behavioural needs								
2006	34	161.6	...	...	100.0	100.0	...	...
2007	45	200.3	...	...	100.0	100.0	...	...
2008	71	603.4	...	...	100.0	100.0	...	...
Prosthetic appliances, orthopaedic and other aids								
2003	25,292	46,147.5	23.1	-	76.9	76.9	-	-
2004	26,369	42,484.8	25.4	-	74.6	74.6	-	-
2006	38,249	72,608.1	27.5	-	72.5	72.5	-	-
2007	42,884	80,997.1	28.6	-	71.4	71.4	-	-
2008	50,820	111,920.9	28.3	-	71.7	71.7	-	-
Shelter service and rehabilitation service for persons released from prisons								
2003	3,243	27,841.5	0.6	83.7	8.9	8.9	...	6.8
2004	2,580	27,965.7	0.4	82.0	8.9	8.9	...	8.7
2006	2,487	28,979.7	1.4	85.8	10.5	9.4	1.1	2.3
2007	2,850	42,721.5	1.8	88.2	7.6	5.8	1.9	2.4
2008	3,280	57,670.2	2.1	91.5	4.3	0.3	4.0	2.0
Housing service								
2003	3,697	30,985.4	10.1	80.8	2.2	2.2	...	6.9
2004	3,907	29,113.4	12.9	84.8	0.4	0.4	...	1.9
2006	4,655	30,163.6	17.9	80.6	1.2	0.4	0.8	0.3
2007	9,918	42,285.5	-	75.6	23.2	21.8	1.4	1.1
2008	9,822	44,373.1	-	97.1	2.9	2.9	...	...
Day centre services								
2003	65,069	38,065.3	7.4	87.7	1.2	1.2	...	3.7
2004	55,976	44,484.3	7.4	88.6	1.0	1.0	...	3.1
2006	65,869	56,825.1	8.2	86.8	2.1	0.7	1.4	2.9
2007	54,211	68,413.2	7.9	86.1	3.1	0.9	2.3	2.8
2008	58,447	89,867.4	7.1	86.3	4.1	0.9	3.3	2.4
Home services								
2003	6,171	33,740.8	2.2	97.4	0.4	0.4	...	...
2004	5,539	36,944.0	1.1	98.8	0.1	0.1	...	...

continued ►

▶ continuation

2006	6,082	49,518.3	1.4	98.0	0.6	0.6	...	...
2007	6,428	63,144.6	1.7	97.6	0.6	0.6	...	0.1
2008	6,530	75,473.4	1.7	97.7	0.5	0.5	...	...
Night lodging service for the homeless								
2003	1,712	6,432.1	0.5	84.8	–	–	–	14.7
2004	2,062	7,049.5	0.1	91.6	–	–	–	8.2
2006	1,535	7,106.4	...	100.0	–	–	–	...
2007	1,458	8,079.1	0.6	99.4	–	–	–	...
2008	1,055	8,164.9	0.9	99.1	–	–	–	...
Foster care								
2003	1,538	11,974.7	1.2	6.3	92.1	92.1	–	0.4
2004	1,470	14,576.2	1.0	9.7	86.6	86.6	–	2.7
2006	915	9,436.1	0.5	14.1	81.7	81.7	–	3.7
2007	668	11,328.6	0.3	11.4	85.3	85.3	–	3.0
2008	612	18,829.9	0.1	5.5	93.2	93.2	–	1.2
Guardianship								
2003	2,076	25,617.0	–	–	100.0	100.0	–	–
2004	1,991	21,599.0	–	–	100.0	100.0	–	–
2006	1,814	18,599.0	–	–	100.0	100.0	–	–
2007	1,835	29,348.0	–	–	100.0	100.0	–	–
2008	1,794	57,896.6	–	–	100.0	100.0	–	–
Welfare for disabled adults								
2006	22,600 ⁵	142,839.6	–	100.0	–	–	–	–
2007	22,289 ⁵	148,455.0	–	100.0	–	–	–	–
2008	21,079 ⁵	159,841.6	–	100.0	–	–	–	–
Appointed caregiver's service								
2006 ⁶	126	1,338.0	7.5	78.6	13.9	13.9	–	–
2007	370	5,905.7	3.7	77.4	18.9	17.8	1.1	–
2008	401	7,442.5	2.7	80.9	16.4	16.4	–	–
Support person and support family service⁷								
2006	320	1,540.0	0.3	85.8	10.8	10.3	0.5	3.0
2007	601	3,534.2	0.2	74.4	7.6	7.0	...	17.8
2008	872	6,160.5	...	88.9	8.5	8.5	...	2.6

¹ Expenses and financing directly associated with service provision.

² Number of service users reflects the total added number of users of different type of welfare services (24-hour and supporting services), not the number of single service users.

³ State budget expenditure on rehabilitation services are included in the first line "Other benefits and payments" of Table 1 in the chapter on "Social Protection".

⁴ Decisions, made by medical expertise departments of the Social Insurance Board, on placement to service according to the person's application and payment for services within the limits of the corresponding year. A person may produce several application during the period.

⁵ At the end of year.

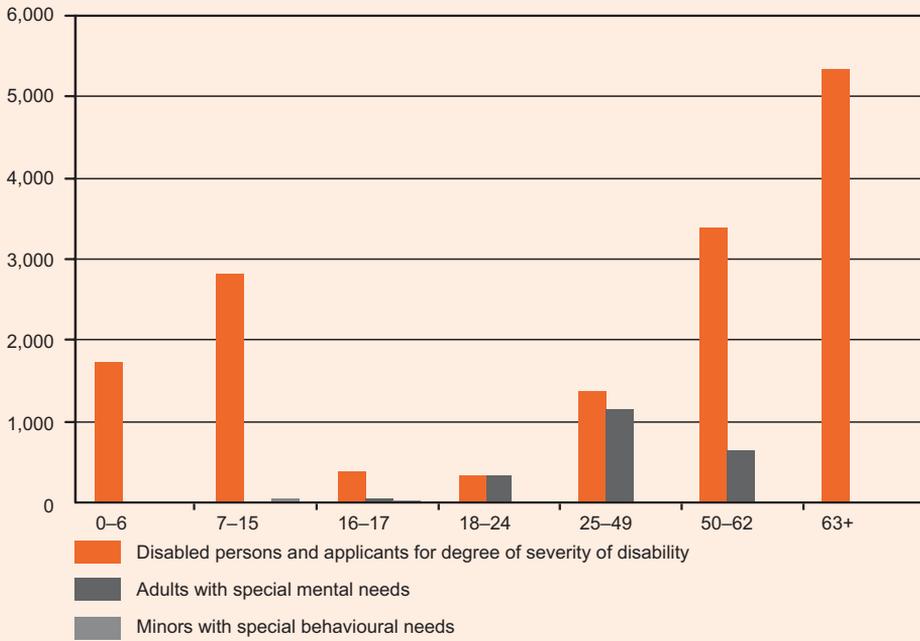
⁶ Data without Tallinn.

⁷ The number of persons who used the service (during the year) includes individuals and families, depending on the target group of the service.

⁸ The figure also includes eight users, who were younger than 16 years but received this service in 2007.

Source: Ministry of Social Affairs

Figure 1. **Users of rehabilitation service by target group and age, 2008**
(during the year)



Source: Social Insurance Board

Table 4. **Users of 24-hour institutional welfare service, 2000, 2004 and 2006-2008**
(at the end of the year)

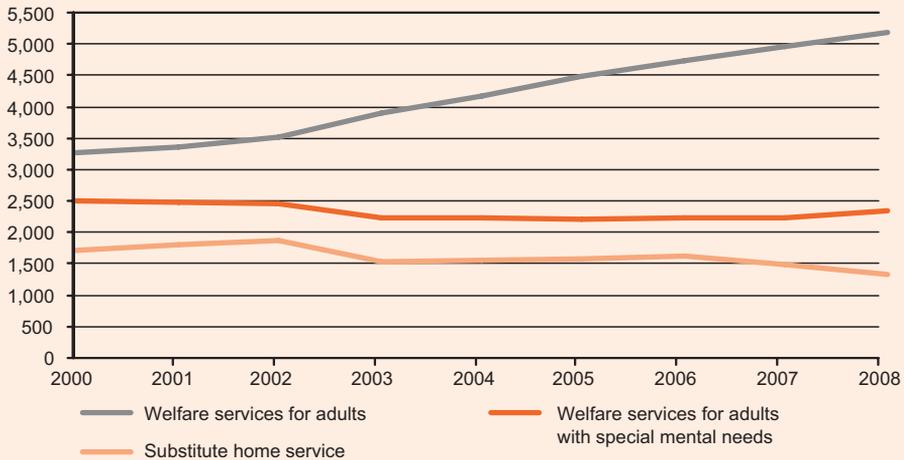
	2000	2004	2006	2007	2008
Service users, total	7,500	7,951	8,584	8,697	8,850
Service users per 10,000 inhabitants	55	59	64	65	66
By type of service					
Substitute home service (in child welfare institutions ¹)	1,715	1,549 ²	1,621	1,493	1,322
Institutional welfare services for adults (in general care homes ¹)	3,276	4,175	4,737	4,970	5,182
Welfare services for adults with special mental needs (special care homes ¹)	2,509	2,227	2,226	2,234	2,346

¹ Until 2002 (incl.) the terminology provided in brackets was used.

² In 2004, children with severe or profound disability staying in institutions on the basis of their parents' application have been excluded due to specific data collecting methodology. Concerning other years, they are included.

Source: Ministry of Social Affairs

Figure 2. **Users of 24-hour institutional welfare service, 2000–2008**
(at the end of the year)



Source: Ministry of Social Affairs

Child protection and welfare

Table 5. **First-time registrations of children left without parental care and children needing assistance¹, 2003–2004 and 2006–2008**
(during the year)

	2003	2004	2006 ¹	2007	2008
Registered children, total	1,276	1,092	1,680	1,529	1,732
boys, %	53.7	55.1	54.3	52.3	53.2
girls, %	46.3	44.9	45.7	47.7	46.8
Registered children per 10,000 children aged 0–17	45	39	64	61	70

¹ From 2006, as a result of specification of statistical data, children needing assistance were also recorded. Therefore, the number of new registrations of children has increased compared to previous years. The number of children staying in their biological families after registration was also specified, which means that the social worker solved the case by providing the family with supportive measures.

Source: Ministry of Social Affairs

Table 6. Child protection specialists in county governments and local governments and the number of children per one child protection specialist, 2003–2004 and 2006–2008
(at the end of the year)

	2003	2004	2006	2007	2008
Child protection specialists, total	147	148	162	155	162
with special professional qualifications	108	107	126	119	129
Children aged 0–17 per one child protection specialist	1,908	1,847	1,596	1,630	1,535

Source: Ministry of Social Affairs

Table 7. Number of persons in foster care and foster families, 2003–2004 and 2006–2008
(at the end of the year)

	2003	2004	2006	2007	2008
Persons in foster care, total	1,113	997	559	459	408
children (0–17) ¹	1,081	971	551	455	401
adults (18+)	32	26	8	4	7
Children using the service per 10,000 children aged 0–17¹	39	36	21	18	16
Foster families total	869	778	444	371	327
caring for children	838	753	436	369	322
caring for adults	31	25	8	2	5

¹ The age group of 0–17 also includes children aged up to 19 attending basic school, secondary school or vocational school until the end of academic year.

Source: Ministry of Social Affairs

Table 8. Children adopted and placed into guardianship, 2003–2004 and 2006–2008
(during the year)

	2003	2004	2006	2007	2008
Adopted children, total	130	165	158	142	181
children adopted by foreign citizens	15	28	20	31	28
Percentage of adopted children					
boys, %	54.6	52.1	51.9	52.8	48.6
girls, %	45.4	47.9	48.1	47.2	51.4
Children placed into guardianship	257	203	242	259	250
boys, %	44.7	55.7	46.3	44.4	44.0
girls, %	55.3	44.3	53.7	55.6	56.0

Source: Ministry of Social Affairs

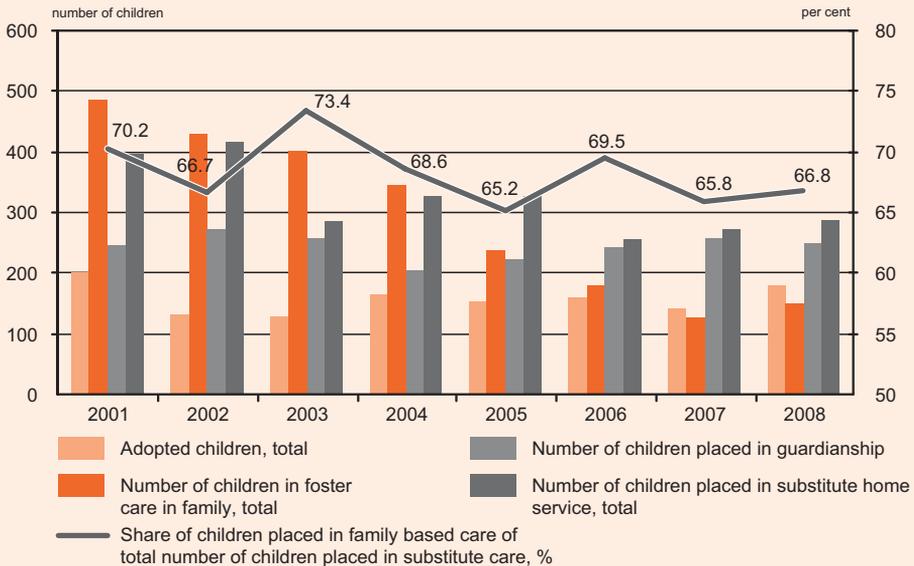
Table 9. Substitute home service users by sex and age, 2000, 2004 and 2006–2008
(at the end of the year)

	2000	2004	2006	2007	2008
Service users, total	1,715	1,549 ¹	1,621	1,493	1,322
boys, %	59.7	60.2	58.7	58.5	57.7
girls, %	40.3	39.8	41.3	41.5	42.3
Service users per 10,000 inhabitants of 0–24 years of age	38	37	40	37	33
Age groups of service users, %					
0–2	6.5	5.2	5.4	5.6	5.1
3–6	8.5	10.0	11.6	10.5	11.1
7–14	48.4	39.3	35.9	36.7	39.6
15–17	22.4	31.8	31.0	29.9	27.5
18–24	12.1	13.6	15.8	17.3	16.7
25+	2.1	0.1	0.3	–	–

¹ In 2004, children with severe or profound disability staying in institutions on the basis of their parents' application have been excluded due to specific data collecting methodology. Concerning other years, they are included.

Source: Ministry of Social Affairs

Figure 3. Children placed in substitute care, 2001–2008
(during the year)



Source: Ministry of Social Affairs

Elderly and disabled persons

Table 10. **Provision of home care services, 2000, 2004 and 2006–2008**

	2000	2004	2006	2007	2008
Service users, total¹, during the year	5,638	5,539	6,082	6,428	6,530
male, %	24.5	25.5	24.3	24.3	24.0
female, %	75.5	74.5	75.7	75.7	76.0
Percentage of persons with special needs, %	39.5	51.1	57.1	61.6	63.1
Service users per 10,000 inhabitants	41	41	45	48	49
Age groups of service users, %					
under 18	2.6	2.2	2.0	2.0	1.0
18–24	0.8	1.1	0.5	0.7	1.0
25–49	5.4	5.4	4.3	5.0	6.3
50–64	11.3	10.3	10.9	10.3	11.0
65–79	42.0	37.9	38.2	38.0	36.7
80+	37.9	43.1	44.1	44.0	44.0
Home care service providers, at the end of the year	747	697	667	697	705

¹ The actual number of people receiving home care is somewhat higher, as home care services are also provided by day centres and this is not reflected in the table.

Source: Ministry of Social Affairs

Table 11. **Persons using the personal assistant service by sex and age, 2006–2008**
(during the year)

	2006 ¹	2007	2008
Service users, total	126	370	401
male, %	46.8	51.6	51.9
female, %	53.2	48.4	48.1
Service users per 10,000 inhabitants	...	3.0	3.0
Age groups of service users, %			
under 18	26.2	26.5	24.7
18–24	4.7	8.6	9.7
25–49	26.2	34.9	37.9
50–64	27.8	16.8	15.7
65+	15.1	13.2	12.0

¹ Data without Tallinn.

Source: Ministry of Social Affairs

Table 12. **Number of users of the support person service by target groups, 2006–2008**
(during the year)

Type of support person service	2006			2007			2008		
	Support person for a child	Support person for families with children (no. of families)	Support person for an adult	Support person for a child	Support person for families with children (no. of families)	Support person for an adult	Support person for a child	Support person for families with children (no. of families)	Support person for an adult
Service users, total	112	65	88	132	154	228	215	316	243
Distribution of service users between target groups, %									
persons with subsistence problems parents	..	100.0	..	..	97.4	..	..	99.1	..
children referred to the juvenile committee	10.7	..	..	6.8	..	..	19.5	..	..
disabled children	35.7	..	..	33.3	..	..	33.5	..	..
children with addiction problems	..	..	..	..	..	..	5.1	..	..
children with behaviour disorders	49.1	..	..	5.3	..	..	14.0	..	..
disabled adults	..	..	86.4	..	..	40.4	..	..	56.4
other	4.5	..	13.6	54.6	2.6	59.6	27.9	0.9	43.6

Source: Ministry of Social Affairs

Table 13. **Housing service¹, 2000, 2004 and 2006–2008**
(at the end of the year)

	2000	2004	2006	2007	2008
Number of places, total²	1,577	2,727	2,987	6,393	6,392
places adapted for persons with special needs	115	125	142	302	293
Service users, total	1,682	3,439	4,020	8,957	8,780
living alone	1,119	2,065	2,435	...	...
living as a family	563	1,374	1,585	...	...
Of service users					
with special needs	340	953	1,070	1,364	1,160
in pensionable age	1,057	1,467	1,630	2,501	2,072
Service users per 10,000 inhabitants	12	26	30	67	66

¹ A service provided to persons requiring the social service in municipal or social dwellings within the meaning of § 14 of the Social Welfare Act. Due to a change in methods, the data from 2007 and 2008 are not comparable to data from previous years (previous data only include provision of housing services in social dwelling, in social apartments or on social premises).

² The number of social or municipal apartments and the number of individual rooms.

Source: Ministry of Social Affairs

Table 14. **Day centre services, 2000, 2004 and 2006–2008**

	2000	2004	2006	2007	2008
Service users, total¹, during the year	30,740	55,919	65,869	54,211	58,447
returning clients	...	18,673	20,614	20,679	17,415
Service users per 10,000 inhabitants²	224	414	490	404	436
Employees providing services, at the end of the year	432	441	350 ³	382	425
Volunteer workers, during the year	...	244	215	362	384

¹ Approximate number of service users. From 2003, returning clients are counted as well. Returning clients are members or persons registered in day centres, who visit the day centre at least once a week.

² Of service users during the year.

³ From 2006, the contractual employees (mainly hobby instructors) working with the clients of a day care centre are reported separately. In 2008, there were 222 contractual employees in addition to employees providing the service.

Source: Ministry of Social Affairs

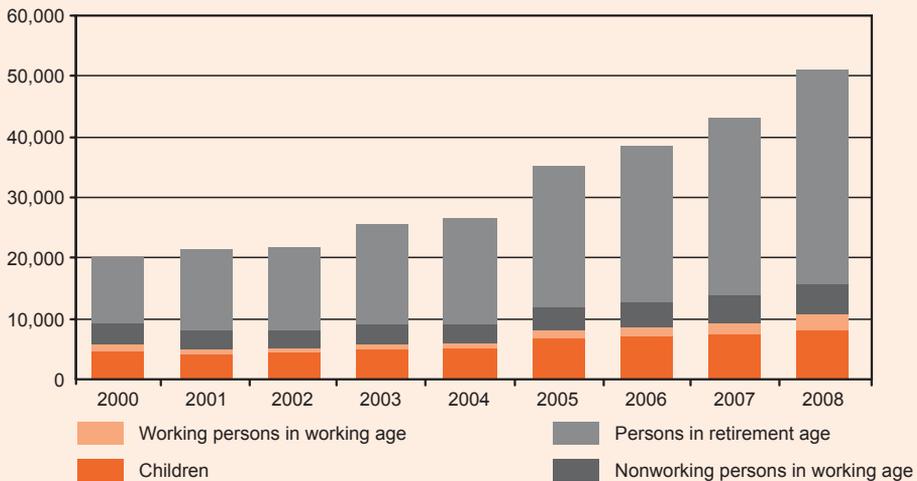
Table 15. **Receivers of prosthetic, orthopaedic and other devices, 2000, 2004 and 2006–2008** (during the year)

	2000	2004	2006	2007	2008
Receivers of devices, total¹	19,995	26,369	38,249	42,884	50,820
children aged up to 18 years	4,723	5,097	7,175	7,284	8,166
disabled, %	7.0	34.3	29.3	35.4	34.6
persons in working age	4,460	3,818	5,435	6,597	7,601
employed, %	22.9	23.2	26.4	29.3	30.9
persons in retirement age	10,812	17,454	25,639	29,003	35,053

¹ Every person is counted only once, regardless of the number of times devices are provided.

Source: Ministry of Social Affairs

Figure 4. **Receivers of prosthetic, orthopaedic and other devices, 2000–2008** (during the year)



Source: Ministry of Social Affairs

Table 16. **Adults with disability who have been assigned a caregiver, by sex and age, 2005–2008** (at the end of the year)

	2005	2006	2007	2008
Total	22,831	22,600	22,289	21,079
male, %	38.9	39.0	38.8	38.8
female, %	61.1	61.0	61.2	61.2
Age groups of service users, %				
18–29	...	3.4	3.3	3.3
30–49	...	8.6	8.5	8.5
50–64	...	14.7	14.2	13.9
65–74	...	25.6	24.7	24.2
75+	...	47.7	49.3	50.2

Source: Ministry of Social Affairs

Table 17. **Adults¹ using 24-hour institutional welfare services by sex and age, 2000, 2004 and 2006–2008** (at the end of the year)

	2000	2004	2006	2007	2008
Service users, total	3,276	4,175	4,737	4,970	5,182
male, %	35.9	37.4	38.1	38.3	37.7
female, %	64.1	62.6	61.9	61.7	62.3
Service users per 10,000 inhabitants of at least 18 years of age	31	39	44	46	47
Age groups of service users, %					
18–29	1.4	1.0	0.6	1.4	0.7
30–49	5.4	4.8	4.5	4.2	3.9
50–64	15.0	15.5	15.8	15.5	14.9
65–74	21.9	22.3	22.6	22.6	22.2
75 +	56.3	56.4	56.5	57.2	58.3

¹ Excl. persons with special mental needs.

Source: Ministry of Social Affairs

Persons with special mental needs

Table 18. **Users of welfare services for adults with special mental needs by sex, age and type of service¹, 2003–2004 and 2006–2008**
(during the year)

	2003	2004	2006	2007	2008
Service users, total	4,491	4,693	4,955	5,047	5,201
male, %	52.6	53.1	53.3	53.6	54.0
female, %	47.4	46.9	46.7	46.4	46.0
Service users per 10,000 inhabitants of at least 16 years of age	40	42	44	45	46
Age groups of service users, %					
16–29	21.3	22.3	22.2	21.9	21.8
30–49	39.8	39.9	40.7	41.2	40.7
50–64	24.4	24.6	23.8	25.0	25.4
65+	14.5	13.2	13.3	11.9	12.1
Users of 24-hour care service	2,413	2,443	2,414	2,428	2,583
Users of 24-hour care service by age groups², %					
16–29	...	...	12.9	12.3	12.7
30–49	...	...	34.2	35.2	35.4
50–64	...	...	29.5	31.3	29.9
65+	...	...	23.4	21.2	22.0
Users of supporting services	2,078	2,250	2,541	2,619	2,618
Users of supporting services by age groups², %					
16–29	...	...	31.2	30.4	32.0
30–49	...	...	46.7	47.9	46.2
50–64	...	...	19.3	19.6	19.5
65+	...	...	2.8	2.1	2.3
Users of supporting services by types of services³					
assisted in everyday life	1,525	1,668	2,015	2,055	2,071
assisted living	565	562	678	687	707
living in a community	28	32	43	45	49
assisted working	516	548	548	510	511

¹ The target group of the service generally includes persons of at least 18 years of age, but in reality, the service is also used by some persons aged with special mental needs, aged 16–17.

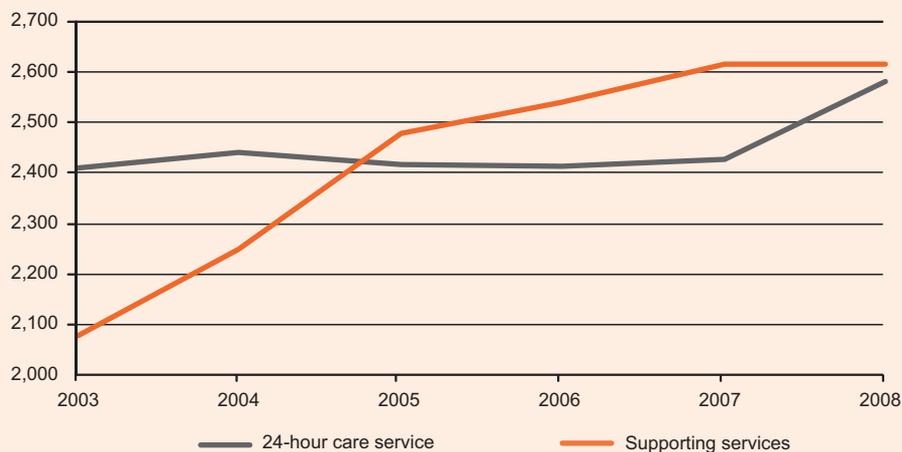
² Age distribution by services as at the end of year.

³ One person may simultaneously receive several supporting services.

Source: Ministry of Social Affairs

Figure 5. **Users of welfare services for adults with special mental needs, 2003–2008**

(during the year)



Source: Ministry of Social Affairs

Persons using social services in the case of emergency

Table 19. **Users of shelter service¹, 2003–2004 and 2006–2008**
(during the year)

	2003	2004	2006	2007	2008
Total	3,243	2,580	2,487	2,850	3,280
male, %	62.8	67.1	61.2	59.5	57.8
female, %	37.2	32.9	38.8	40.5	42.2
Percentage of children among service users, %	55.4	52.5	46.5	43.4	40.6
Users of service due to domestic violence	326	254	265	374	488
male, %	29.1	37.8	22.6	19.5	19.3
female, %	70.9	62.2	77.4	80.5	80.7
Percentage of children among service users, %	55.2	68.5	48.7	49.7	49.4

¹ Until 2007 includes rehabilitation service for persons released from prison.

Source: Ministry of Social Affairs

Table 20. **Persons using the night lodging services for the homeless by sex and age, 2003–2004 and 2006–2008**
(during the year)

	2003	2004	2006	2007	2008
Service users, total	1,712	2,062	1,535	1,458	1,055
homeless ¹	1,582	1,700	1,250	1,346	957
other persons using the night lodging ²	130	362	285	112	98
Homeless persons by sex					
male, %	82.9	82.5	82.7	83.4	83.9
female, %	17.1	17.5	17.3	16.6	16.1
Homeless persons by age, %					
under 18	–	0.5	–	0.2	0.1
18–24	5.3	2.6	5.6	4.5	5.6
25–49	59.4	50.3	45.4	53.5	53.6
50–64	30.7	41.8	42.0	35.9	35.0
65+	4.6	4.7	7.0	5.9	5.6

¹ Homeless person – a person, who has no legal relationship (ownership, lease agreement, permanent accommodation agreement) to any buildings, rooms or parts thereof that would qualify as housing and who has no source of income necessary for acquiring a place to live and no social skills to change his or her status in the given circumstances.

² Persons needing temporary night accommodation for some other reason (family conflicts, domestic violence etc.).

Source: Ministry of Social Affairs

Subsistence benefit

Table 21. **The use of subsistence benefit funds, the number of families receiving benefit, the number of satisfied applications and the average amount of benefit, 2001, 2004 and 2006–2008**

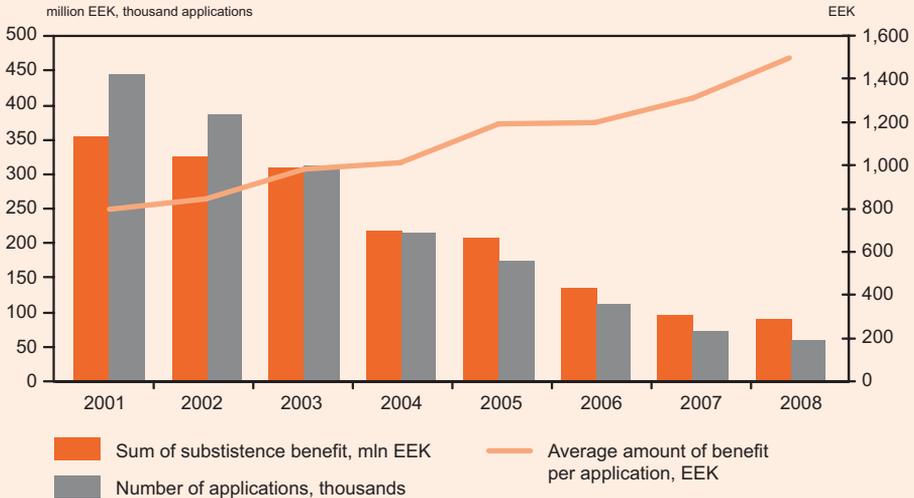
	2001	2004	2006	2007	2008
Subsistence benefit (to maintain subsistence level)					
Number of produced applications, during the year	453,474	218,585	114,668	74,001	60,661
Number of granted applications, during the year	443,265	214,593	112,990	72,541	59,587
Average number of granted applications, monthly	36,939	17,883	9,416	6,045	4,966
Number of families receiving benefit, during the year	70,417	33,232	19,229	12,972	11,391
Percentage of families receiving benefit among all households ¹ , %	12.4	5.9	3.4	2.2	...
Average estimated number of times the benefit was received by one family, during the year	6.4	6.6	6.0	5.7	5.3
Average amount of benefit per application, EEK	797	1,010	1,199	1,312	1,498
The use of funds, during the year, thousand EEK	353,308	216,842	135,450	95,207	89,241
Supplementary benefit, from the subsistence benefit funds²					
Number of granted applications, during the year	3,817	33,477	118,425	66,247	50,111
Average number of granted applications, monthly	318	2,790	9,869	5,521	4,176
Average amount of benefit per application, EEK	279	545	446	630	637
The use of funds, during the year, thousand EEK	1,065	18,230	57,308	41,745	31,944

¹ The calculation is based on the adjusted number of households from the Household Budget Survey of Statistics Estonia.

² From 2005, includes supplementary social allowance in the amount of 200 EEK pursuant to § 22⁴ of the Social Welfare Act, and, from 2006, the calculated compensation to home consumers for the increase of prices of distance heating. The data on the receivers in 2006–2007 are incomplete because all receivers of compensation for the increase of prices for distance heating have not been included.

Source: Ministry of Social Affairs

Figure 6. **Funds used for subsistence benefit, satisfied applications and average amount of benefit per application, 2001–2008**
(during the year)



Source: Ministry of Social Affairs

Table 22. **Structure of families receiving subsistence benefit, by satisfied applications, 2001, 2004 and 2006–2008**
(during the year)

	2001	2004	2006	2007	2008
Number of applications, total	443,265	214,593	112,990	72,541	59,587
Percentage of all applications, %					
Families with an unemployed person	59.1	72.4	66.3	62.4	65.4
recipient of unemployment benefit ¹	31.5	27.8	23.7	23.2	28.2
long-term unemployed, non-working job-seeker	27.6	44.6	42.6	39.2	37.2
Pensioner's families	7.7	6.7	10.9	14.5	13.1
Student's families	16.7	1.9	1.8	1.5	1.2
Other families	16.5	19.0	21.0	21.6	20.3
Percentage of all applications, %					
Families with children	38.3	43.4	36.4	32.0	29.4
Families with a disabled person	5.8	6.4	8.7	10.0	9.5
Families with children receiving subsistence benefit, %					
Families with a single parent	25.7	27.0	59.5	63.4	63.4
1 child	56.7	52.7	54.7	54.4	53.4
2 children	29.0	28.3	27.2	27.1	29.3
3 or more children	14.3	19.0	18.1	18.5	17.3

¹ Until 2004 (incl.) receiver of unemployment subsidy.

Source: Ministry of Social Affairs

Social protection

The purpose of social protection is to provide the residents with safeguards against certain risks and situations associated with loss or reduction of income and increase of expenses, as well as the social support and services for persons needing this assistance to ensure social coping.

This chapter examines public expenditure on social insurance and social welfare. The chapter concludes with aggregated data on all social protection expenditures, calculated according to the ESSPROS²² method.

Expenditures on social insurance include pensions and pension supplements, state family benefits and parental benefits, social benefits for disabled persons and other benefits and allowances payable to families (compensation of victims of crime, funeral benefit, writing off study loans) financed from the social taxes and the state budget.

Expenditures on social welfare include funds used for the payment of support, provision of services, investment and development of the field.

Expenditures on social protection, according to the ESSPROS method, include cash benefits to recipients and benefits-in-kind in the form of services and goods. Administrative and capital expenditures are included in the expenditure on social protection if they are directly related to payment of support or provision of services. A person's own share in the payment for services is not included in the expenditure on social protection.

State budget expenditure on social insurance in 2008 amounted to 23 billion EEK, with the state pension insurance accounting for 78% of this amount. The percentage of child and family benefits (incl. the parental benefit) was 15% while the portion of social support for disabled persons was 3%.

In comparison to 2001²³, the state social insurance expenditure in 2008 were higher by a times of 2.69. The expenditure on pensions and family benefits and parental benefit increased at a faster rate in the same period – by times of 2.72 in both cases. The increase in pension expenditure was mainly influenced by the pensions increase in 2008, which resulted in a growth of the nominal average monthly pension by slightly more than 700 EEK and in an upsurge of 3.4 billion EEK in the total volume of pension expenditure in comparison to 2007. The increase of family benefits and parental benefit in the period 2001–2008 was influenced by the introduction of the parental benefit in 2004 and, by the year 2008, the share of this

²² European System of Integrated Social Protection Statistics (ESSPROS).

²³ 2001 was chosen as the reference year, because the social benefits legislation entered into force in the full extent by that year.

type of benefit had grown to over half of the total expenditure on family benefits from the level of 1/5 in 2004. The social benefits for disabled persons have increased by a times of 1.5 in comparison to 2001. The reason for such modest growth was the transfer of the responsibility for the caregiver's benefits for adult disabled persons and the corresponding state budget allocations to the local governments in April 2005. As a result, the social insurance expenditure on the social support for disabled persons decreased in 2005 and a new social welfare expenditure item, care/social welfare services for adult disabled persons, was created. In 2006, however, the corresponding allocations were included in the local governments budget equalisation fund.

The percentage of social insurance expenditure in GDP has increased over the period 2001–2008. While in 2001 the expenditure on state social insurance constituted 7.9% of the GDP, this level increased by 1.3 percentage points, to 9.2%, in 2008. While the percentage of this expenditure category has increased in GDP, the share of social insurance expenditure in the state budget has decreased in the same period by 3.4 percentage points, to 25.7%, in 2008. The reason is simple: the growth of the state budget from 2001 to 2008 significantly exceeded the growth of funds allocated for social insurance, with the state budget increasing slightly more than three times.

However, state budget expenditure on social welfare increased during the period from 2001 to 2008 only by a times of 1.24. This modest growth was caused by decreasing expenditure on the payment of subsistence benefits. The expenditure on subsistence benefits in 2008 was only a quarter of the corresponding expenditure in 2001 (dropping from 353 million EEK in 2001 to 89 million EEK in 2008).

Even though the expenditure on social welfare services has increased by a times of 2.26 during the period 2000–2008, the relative importance of these expenditure in GDP and the state budget has decreased, standing at 0.32% and 0.91%, respectively, in 2008.

The total sum of social protection expenditure in 2006, calculated according to the ESSPROS method, amounted to 25.4 billion EEK, of which 44.4% was expenditure related to old age. The second highest category included expenditure associated with medical services and healthcare (31.2%), followed by families and children (12.1%) and, finally, disabilities and incapacity for work (9.5%).

In comparison to 2000, the expenditure in 2006 increased by a times of 1.9. The percentage of social protection expenditure in GDP in 2006 was 12.3%, which was the lowest level since 2000.

Table 1. **State budget expenditure on social insurance and welfare, 2001, 2004 and 2006–2008**
(during the year, million EEK)

	2001	2004	2006	2007	2008
Social insurance¹	8,632.2	12,227.1	16,018.4	18,584.8	23,184.4
state pension insurance	6,621.1	9,199.3	12,477.8	14,611.8	18,013.2
social benefits for disabled persons ²	441.2	630.1	580.3	598.5	662.2
family benefits	1,317.2	2,106.0	2,541.6	2,790.6	3,577.2
parental benefit	–	441.3	898.0	1,113.1	1,866.9
other benefits and payments ³	79.6	112.5	160.1	198.1	332.4
social tax paid from the state budget in special cases ⁴	122.2	141.8	226.8	352.9	557.3
payment expenses on pensions and benefits	50.9	37.4	31.8	32.9	42.1
Percentage of social insurance expenditure, %					
in GDP ⁵	7.91	8.07	7.74	7.60	9.22
in the state budget ⁶	29.06	23.19	24.79	24.44	25.73
Administration expenses of the Social Insurance Board	76.7	90.8	110.4	116.7	131.4
Social welfare	656.2	563.5	693.4	694.3	816.7
social benefits	354.2	235.0	214.3	176.6	158.4
benefits from the subsistence benefit funds	354.4	235.0	192.7	136.9	121.2
subsistence benefit	353.3	216.8	135.4	95.2	89.2
supplementary benefit	1.0	18.2	57.3	41.7	32.0
other expenses from the subsistence benefit funds	–	–	21.6	39.7	37.2
social services	246.6	283.6	360.1	432.3	558.3
state welfare for persons with special mental needs ⁷	89.7	105.5	134.0	171.0	219.5
institutional welfare services for adults ⁸	4.3	3.4	3.4	3.3	3.4
state welfare for children ⁹	102.2	121.4	147.1	175.4	227.3
operating expenses of vocational training centre for disabled people	11.1	15.9	17.7	21.7	25.3
partial compensation of the cost of prosthetic and other devices	25.2	31.9	52.9	57.9	80.5
national welfare programmes	10.0	1.8	1.5	0.4	1.1
other services	4.1	3.7	3.5	2.9	1.2

continued ►

► continuation

other expenditure related to welfare	55.2	44.9	119.0	85.4	100.0
investments of welfare institutions from the state budget and gambling tax ¹⁰	44.2	23.1	82.8	41.3	37.7
welfare projects financed from gambling tax	11.0	21.8	36.2	44.1	62.3
Percentage of social welfare expenditure, %					
in GDP ⁵	0.60	0.37	0.33	0.28	0.32
in the state budget ⁶	2.21	1.07	1.07	0.91	0.91

¹ Does not include health insurance and unemployment insurance (covered in chapters "Health Protection" and "Labour Market").

² From 1 April 2005, the funds of caregiver's allowance for disabled adults (i.e., social tax payable for caregivers) were transferred to local governments.

³ The preparation of rehabilitation plans and rehabilitation services for people with special needs, compensations related to occupational accidents and diseases, payment for days of caring for children, disabled persons and child-care leave, additional days off for parents of disabled children, paid breaks for feeding children, additional pay for paternity leave (in 2008), social benefit for Estonian citizens who have settled in Estonia from a foreign country or persons of Estonian nationality, compensations to repressed persons, compensations to victims of crime, funeral benefit, and deletion of study loans.

⁴ Social tax is paid from the state budget for persons who receive child care allowance and parental benefit, for persons who raise three or more children, for persons receiving the allowance for families raising seven or more children, for non-working caregivers of disabled persons, and for working persons who receive pension for incapacity for work (§ 6 (1) p 5 of the Social Tax Act).

⁵ Indicators are based on corrected data of Statistics Estonia on the period 2000–2008 as at 8.09.2009.

⁶ Implementation of the state budget by expenditures; macro indicators can be found at the end of the chapter.

⁷ Expenses of welfare institutions and open care services.

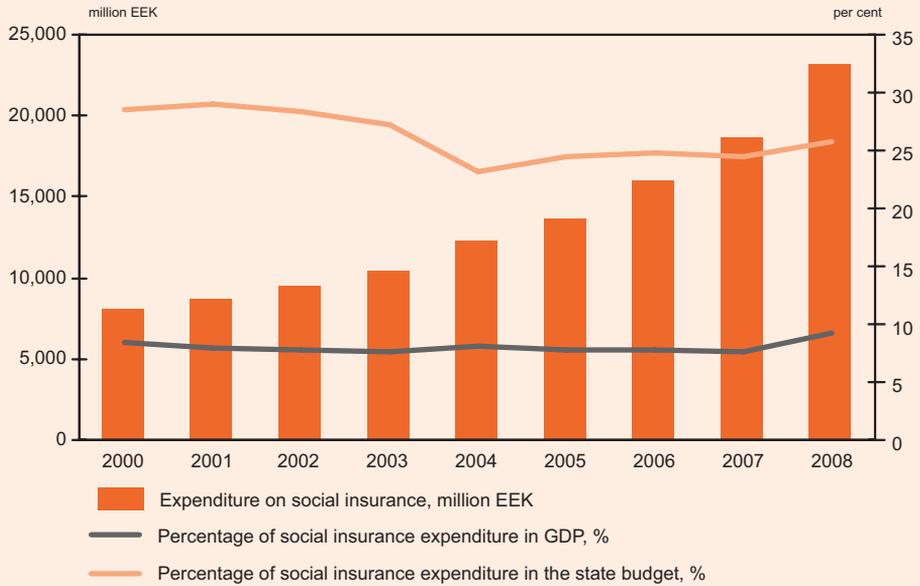
⁸ The expenses of adults placed in general care homes before 1 January 1993 are covered from the state budget.

⁹ For providing sustenance and rehabilitation to orphans and children left without parental care in foster care and welfare institutions.

¹⁰ From 2003, only investments from the state budget.

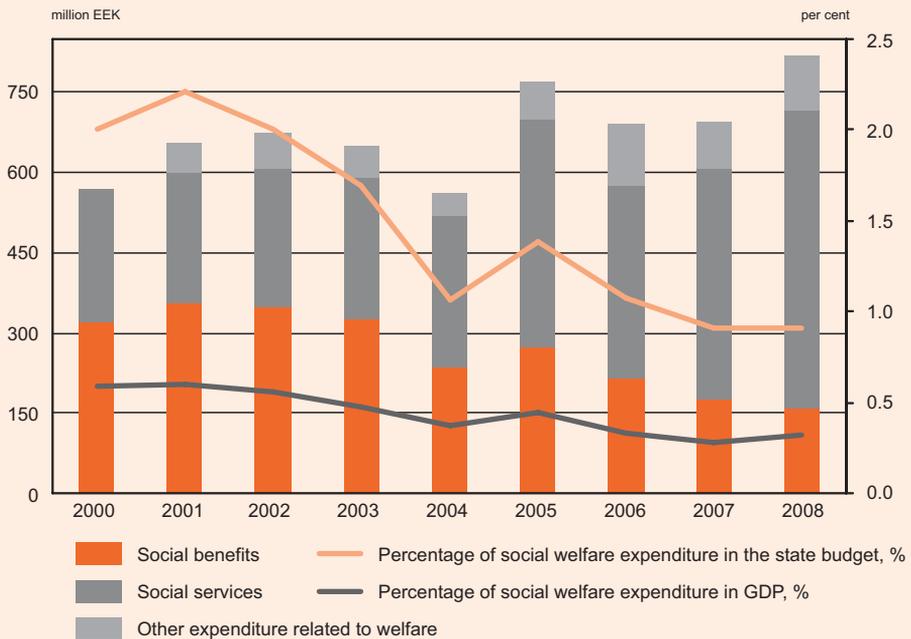
Source: Social Insurance Board, Ministry of Social Affairs

Figure 1. Expenditure on social insurance, percentage in GDP and in the state budget, 2000–2008



Source: Social Insurance Board, Ministry of Social Affairs

Figure 2. Expenditure on social welfare, percentage in GDP and in the state budget, 2000–2008



Source: Ministry of Social Affairs

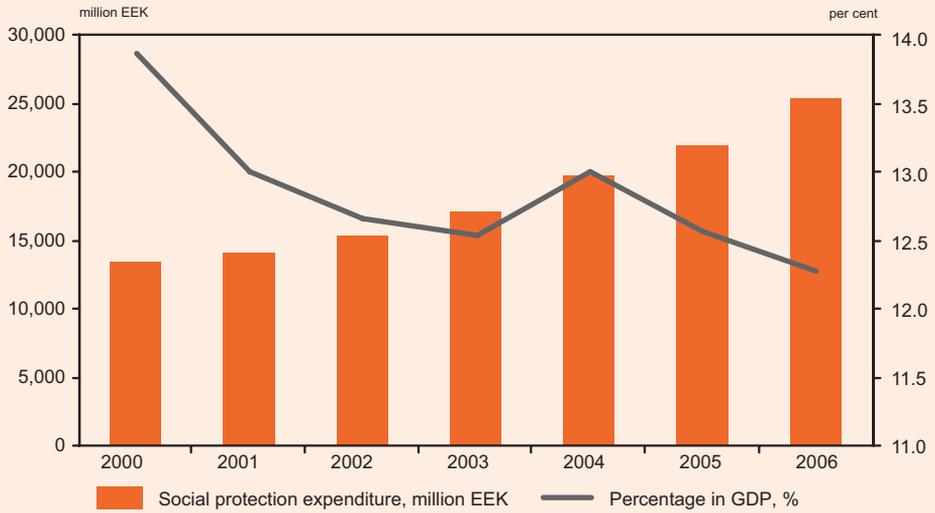
Table 2. **Social protection expenditure, 2000, 2004–2006**
(based on ESSPROS methodology)

	2000	2004	2005	2006
Total expenditure , million EEK	13,358.3	19,693.4	21,967.4	25,407.0
expenditure on social protection in total ¹	13,148.9	19,414.6	21,645.7	25,062.0
sickness, health care	4,221.4	6,106.4	6,913.8	7,831.3
disability, incapacity for work	869.3	1,774.0	2,031.5	2,378.2
old age	5,704.5	8,320.9	9,337.5	11,118.5
loss of provider	258.1	157.3	185.2	214.3
family and children	1,568.4	2,464.0	2,630.1	3,044.4
unemployment	167.8	309.9	286.1	226.1
housing	93.3	70.3	50.3	83.0
social exclusion	266.1	211.9	211.2	166.2
administration expenses	209.4	278.8	321.7	345.0
Structure of expenditures¹ , % of expenditure on social protection				
Total	100.0	100.0	100.0	100.0
sickness, health care	32.1	31.5	31.9	31.2
disability, incapacity for work	6.6	9.1	9.4	9.5
old age	43.4	42.9	43.1	44.4
loss of provider	2.0	0.8	0.9	0.9
family and children	11.9	12.7	12.2	12.1
unemployment	1.3	1.6	1.3	0.9
housing	0.7	0.4	0.2	0.3
social exclusion	2.0	1.1	1.0	0.7
Percentage of expenditure in GDP , per cent ²				
Total	13.9	13.0	12.6	12.3
sickness, health care	4.4	4.0	4.0	3.8
disability, incapacity for work	0.9	1.2	1.2	1.1
old age	5.9	5.5	5.3	5.4
loss of provider	0.3	0.1	0.1	0.1
family and children	1.6	1.6	1.5	1.5
unemployment	0.2	0.2	0.2	0.1
housing	0.1	0.0	0.0	0.0
social exclusion	0.3	0.1	0.1	0.1
administration expenses	0.2	0.2	0.2	0.2

¹ Without administrative expenses.

² In 2009, Statistics Estonia adjusted the GDP indicators. Therefore, the percentages in GDP have changed slightly in comparison to the figures presented in previous proceedings of the Ministry of Social Affairs.

Figure 3. **Social protection expenditure (incl. administration expenses) and percentage in GDP, 2000–2006**



Source: Statistics Estonia

Macro indicators used in calculations, 2000–2008

Year	GDP in current prices, million EEK	Implementation of the state budget (by expenditures), million EEK
2000	96,380.5	28,346.9
2001	109,070.4	29,706.5
2002	121,672.7	33,638.9
2003	136,421.1	38,337.3
2004	151,541.6	52,736.0
2005	174,956.2	55,508.1
2006	206,995.9	64,624.7
2007	244,503.7	76,036.7
2008	251,492.8	90,102.6

Source: Statistics Estonia, Ministry of Finance

