

HEALTH, LABOUR AND SOCIAL SECTOR IN 2007



Ministry of Social Affairs

Health, Labour and Social Sector in 2007



Tallinn 2008

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

Compiled by: Social Policy Information and Analysis Department, Labour Policy Information and Analysis and Health Information and Analysis Departments

Translation: OÜ Triangular
Layout: Tiia Ilus, Tartu Ülikooli Kirjastus
Print: OÜ Greif

ISSN 1736-7239

Publisher:
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Dear reader,

We present you with a statistical overview of health, labour and social domains of the previous years. On the one hand, these figures exemplify the fields of life in Estonia; however, at the same time they have a significant meaning for the future. Figures help us to look ahead and create knowledge-based foundation in order to make wise decisions for tomorrow.

Statistical data provides a better understanding of what is happening in the society. By basing on figures, we shape politics of different domains, assess the performance of the decisions made, and know to pay attention to problems that need solving. Awareness of with which illnesses and for how long people are at hospital, how many people visit dentists or register themselves as unemployed persons, which is the average paid amount of parental benefits, or how many children live in children's welfare institutions, helps to decide what can be done in order to change life better in Estonia.

The collection "Health, labour and social life 2007" contains main statistical data on social security, health and labour domains in Estonia. Various statistical data from several sources have been used for compiling this collection, the majority of which have been gathered by the Ministry of Social Affairs and its subordinate boards and inspectorates. Statistical survey data produced by the Statistics Estonia and other relevant institutions have also been used. Estonia has experienced a rapid development in recent years; such changes are also reflected in statistical data. Therefore, in the collection, we have presented comparison data for the period 2004–2006. Depending on availability, also statistical information about 2007 has been provided. The introduction to each section includes a description of the legal acts governing the domain and of changes therein.

This collection is foremost directed at policy designers, aiming to assist them in initiating, elaborating and evaluating policies. However, the information can be a useful and interesting source of data for anyone interested in changes occurring in Estonian society.

Maret Maripuu,

Minister of Social Affairs

Contents

GENERAL DATA	11
POPULATION	12
Table 1. Population by age and sex	13
Figure 1. Population by age	13
Table 2. Number and membership of households	14
Figure 2. Proportion of married couples among households with two adults	14
Table 3. Main demographic indicators	15
Table 4. Average age of birthgiver	15
Table 5. Live births, by birth order and marital births	16
Table 6. Live births by mother's age	16
Figure 3. Live births by mothers age	16
Table 7. Abortions and induced abortions and women having abortion by age	17
LIVING STANDARD AND POVERTY	18
Table 1. Changes in the consumer price index, compared to the previous year	20
Table 2. Average disposable income, gross wages and old-age pension per household member	21
Figure 1. Average gross wages, old-age pension and disposable income per household member	21
Figure 2. Change in average gross wages, old-age pension, disposable income per household member and consumer price index	22
Table 3. Difference of received average disposable income per different type of household members compared to Estonian general average	22
Table 4. Average monthly disposable income of household member in income deciles, average disposable income, median of disposable income and proportion of X and I income deciles	23
Table 5. Estimated subsistence minimum (absolute poverty line) and minimum food basket	23
Table 6. Distribution of households, household members, children and the elderly by absolute poverty layers	24
Figure 3. Distribution of households, household members and children by absolute poverty lines	24
Table 7. Relative poverty line	24
Table 8. Relative poverty line by age and sex	25
Table 9. Inequality in the distribution of income	25

LABOUR MARKET	26
Table 1. Working-age population by employment status	29
Figure 1. Labour force participation rate in the European Union and Estonia	29
Table 2. Labour force participation rate	29
Figure 2. Employment rate in the European Union and Estonia	30
Figure 3. Employment rate of men and women in the European Union and Estonia	30
Figure 4. Employment rate of older people in the European Union and Estonia	31
Table 3. Employment rate by sex and age	31
Table 4. Employment rate by sex and nationality	31
Figure 5. Unemployment rate dynamics in the European Union and Estonia	32
Table 5. Unemployment rate by sex and age	32
Table 6. Long-term unemployment rate	32
Figure 6. Unemployment rate of young people and long-term unemployment rate in the European Union and Estonia	33
Figure 7. Unemployment rate by sex and nationality	33
Figure 8. Unemployment rate by regions	34
Table 7. Proportion of employed people by sex and economic sectors	34
Figure 9. Proportion of part-time workers of the employed people in the European Union and Estonia	35
Table 8. Proportion of part-time workers of the employed people	35
Table 9. Proportions of workers who usually work over 48 hours per week in their main job	35
Table 10. Proportion of employees by sex and type of employment relation	36
Figure 10. Average monthly gross wages, minimum wages and proportion of receivers of minimum wages of the employed people	36
Table 11. Proportion of employees belonging to trade unions	36
Figure 11. Registered unemployment	37
Table 12. Number of registered unemployed people by sex and age	37
Table 13. Number of new registered unemployed people, vacancies and placements	37
Table 14. Number of participants in active labour market measures	38
Table 15. Receivers of unemployment benefit and unemployment insurance benefit	38
Table 16. Amount of unemployment benefit and average unemployment insurance benefit per month	38
Table 17. Expenditures on labour market policy	39
WORKING ENVIRONMENT	40
Figure 1. Occupational accidents per 100,000 workers	42
Table 1. Number and proportion of occupational accidents by sex	42
Figure 2. Occupational accidents per 100,000 workers by most dangerous fields of activity	42
Figure 3. Number of occupational accidents by days of incapacity for work	43
Figure 4. Number of fatal occupational accidents per 100,000 workers	43
Table 2. Number of fatal occupational accidents	43
Figure 5. Distribution of 27 fatal occupational accidents in 2006 by field of activity	44

Table 3.	Number of fatal occupational accidents per 100,000 workers by fields of activity	44
Figure 6.	Number of occupational diseases per 100,000 workers in the European Union and Estonia	44
Table 4.	Number of persons diagnosed with occupational disease for the first time	45

GENDER EQUALITY 46

Table 1.	Candidates for Riigikogu and elected parliamentaries by sex	48
Figure 1.	Employed by field of activity and sex	48
Figure 2.	Employed by occupation and sex	49
Figure 3.	Wage gap: difference in average hourly gross wages for men and women in Estonia and in the member states of the European Union	49
Figure 4.	Employment impact of parenthood: employment rate of men and women aged 20–50 with and without small children (aged 0–6)	50
Figure 5.	Gendered distribution of housework in families with two parents and at least one child aged under 18	50
Table 2.	School drop-out: Persons leaving school on the basic education level (1–9 grade) by gender	51
Table 3.	Graduates on higher education level, academic year 2006/ 2007	51
Table 4.	Gender segregation of higher education: Proportion of female students by broad group of studies	51

HEALTH CARE 52

Table 1.	Providers of health care service	56
Table 2.	Practising health care professionals	57
Figure 1.	Health care personnel by age	57
Table 3.	Average total monthly wages of health care professionals, by type of service provider	58
Table 4.	Average number of health care professionals per year reduced to full working time, by type of service provider	59
Table 5.	Outpatient medical care	60
Table 6.	Nursing care	60
Table 7.	Emergency aid	61
Table 8.	Dental care	61
Table 9.	Treatment at hospitals and in day-care (incl. day surgery) departments	62
Figure 2.	Distribution of hospital beds by specialty	62
Figure 3.	Changes in number of hospital beds compared to year 2000	63
Table 10.	Registered new cases of active tuberculosis	63
Table 11.	Registered new cases of selected infectious and mainly sexually transmitted diseases	64
Table 12.	Malignant neoplasms	64
Table 13.	Mortality by main causes,	65
Figure 4.	Number of deaths of persons aged 15–64 per 1,000 population by sex	65
Table 14.	Average life expectancy and healthy life years	66
Figure 5.	Self-perceived health status of population	66

Figure 6.	Assessment of the quality of medical care	66
Figure 7.	Assessment of the availability of medical care	67
Figure 8.	Proportion of users of health care services in population during a year	67
Figure 9.	Users' assessments of health service providers	68
Table 15.	Health insurance coverage	68
Table 16.	Number of days covered by the benefit for temporary incapacity for work	69
Figure 10.	Average benefit for temporary incapacity for work per one day of temporary incapacity for work, by type of benefit	69
Table 17.	Health insurance expenditure	70
Figure 11.	Distribution of health insurance expenditure	70
Table 18.	Health care financing from the state budget	71
Table 19.	Total health expenditure	71
<u>FAMILY BENEFITS AND PARENTAL BENEFIT</u>		72
Table 1.	Amounts of state family benefits	74
Table 2.	Receivers of state family benefits	75
Table 3.	Receivers of parental benefit, by benefit type, sex and average amount of benefit	76
Table 4.	Expenditure on state family benefits and parental benefits	77
Figure 1.	Expenditure on state family benefits and parental benefit and percentage of GDP	77
<u>PENSIONS</u>		78
Table 1.	Receivers of state pension, by type of pension	80
Table 2.	Average amounts of pensions	81
Figure 1.	Average amount of pensions	81
Table 3.	Expenditure on state pension insurance	82
Figure 2.	Pension expenditure and percentage of GDP	82
<u>BENEFITS FOR DISABLED PERSONS</u>		83
Table 1.	People declared as permanently incapacitated for work, by sex, age and percentage of loss of capacity for work	84
Table 2.	Persons with a determined degree of severity of disability, by sex and age	84
Table 3.	Persons with a determined degree of severity of disability by dominating type of disability, by sex and age	85
Table 4.	Receivers of social benefits for disabled persons	85
Table 5.	Amounts of social benefits for disabled persons	86
Figure 1.	Percentage of expenditure on social benefits for disabled persons of GDP and the state budget	87
<u>SOCIAL WELFARE</u>		88
Table 1.	Number of institutions providing and persons using welfare services	92
Table 2.	Personnel in institutions providing welfare services, by position and sex	93

Table 3.	Personnel in institutions providing welfare services by age	93
Table 4.	Users of 24-hour institutional welfare service	94
Table 5.	Users of substitute home service by sex	94
Table 6.	Adults using institutional welfare services by sex and age	94
Table 7.	Persons using welfare services for adults with special mental needs by sex and age	95
Table 8.	Home care services	95
Table 9.	Day centre services	96
Table 10.	Housing service in the form of social housing and premises, in support homes	96
Table 11.	Persons using welfare services for adults with special mental needs by service type	96
Table 12.	First-time registration of children left without parental care and children needing assistance	97
Table 13.	Child protection specialists in county governments and local governments	97
Table 14.	Number of persons in foster care and foster families	97
Table 15.	Children adopted and placed into guardianship	98
Table 16.	Receivers of prosthetic, orthopaedic and other devices	98
Table 17.	Shelter services and rehabilitation services to ex-convicts	99
Table 18.	Persons using the night shelter services for the homeless, by sex and age	100
Table 19.	The use of subsistence benefit funds, the number of families receiving benefit, the number of satisfied applications and the average amount of benefit	101
Figure 1.	The use of subsistence benefit funds, satisfied applications and average amount of benefit per application	101
Table 20.	Structure of families receiving subsistence benefit, by satisfied applications	102
Figure 2.	Members of families receiving subsistence benefit, by social status	102

SOCIAL PROTECTION 103

Table 1.	Number of service users, expenditure and financing of welfare services	105
Figure 1.	Expenditure on 24-hour care services and open care services	107
Table 2.	Expenditure on social insurance and welfare from the state budget	108
Figure 2.	Expenditure on social insurance, percentage of GDP and of the state budget	109
Figure 3.	Expenditure on social welfare, percentage of GDP and of the state budget	110
Figure 4.	Social protection expenditure (incl. administration expenses) and percentage of GDP	110
Table 3.	Social protection expenditure	111

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 2008	1 340 935	
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 1990's, continues, and second the population is ageing.

By the beginning of year 2007, the population of Estonia had decreased to 1.34 million, which is approximately 30,000 people less than in year 2000. Above all, the number of children and young people up to 18 years of age, and at the same time, proportion of people aged 65 and older in the population has increased. In 2006, age dependency rate or in other words proportion of people aged 65 or older to working-age people (aged 15–64) is 25.4% and the corresponding figure has continuously increased starting 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, in the forthcoming decade, estimably more people leave the labour market than enter it (it means that labour market reprisal index is less than 1).

In 2006, almost 15,000 children were born in Estonia. Although the number of births has continuously increased, the average number of births per woman during her lifetime, or total fertility rate, is still under two children. The population recovery limit is considered to be approximately two children per woman during her lifetime (total fertility rate is 2.1).

Also birth rate in Estonia is still negative. In 2006, approximately 2,500 more people died than were born. At the same time, negative birth rate of the period 2000–2006 has decreased significantly; in other words, gap between deaths and births has decreased significantly year by year. This change is conditioned both by decrease of deaths and increase of births.

Death rate has decreased, for the average life expectancy has increased both for men and women. Still, the life expectancy of women at birth is over 10 years higher than the life expectancy of men. While in 2006, the life expectancy of Estonian women at birth was 78.5 years, for men it was only 67.4 years. Also, the death rate of men aged below 65 is almost three times of larger than the death rate of women.

Increase of births that started in 2000 is being influenced by postponement of births in the 1990's. In 2006, the average age of women delivering births was 28.4 and the average age of women delivering birth for the first time 25.4 years, whereas both figures have increased in comparison to 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 mother aged under 25 years, then in 2006, the corresponding figure was 31.4%, in other words less than third of children. At the same time, in case of life births, the proportion of mothers aged 30–39 has increased from 26.4% in 2000 to 32.2% in 2006. Most children are still being born to women aged 25–29 – in 2006, 32.3% of all children. Although in 2006, 63 abortions were made per 100 live births per year, the number of abortions in the period 2000–2006 has significantly decreased.

Another trend characterising birth rate and household formation is that continuously less children are born to married parents: while in 2000, 45.6% of children were born to parents in registered co-habitation, then in 2006, it was 41.8% of children. At the same time, in 2006, most children, both firstborns and second-borns were born to parents in unregistered co-habitation – only 30.6% of firstborns and 49.2% of second-borns were born to married parents.

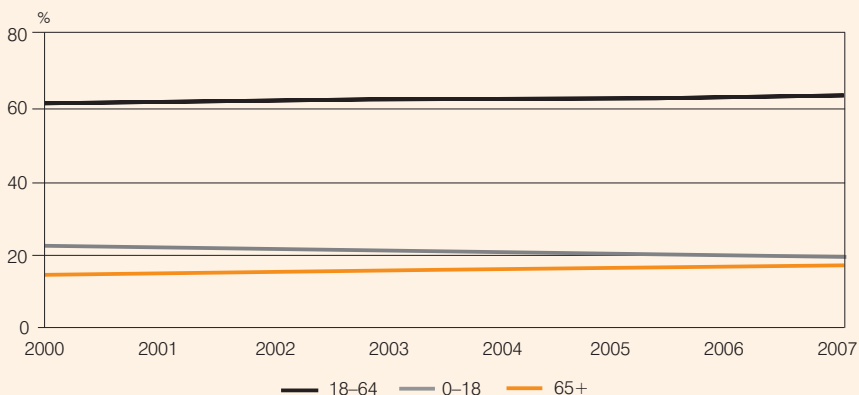
Although the total number and average size of households have been relatively stable, the structure and membership of households have changed. First and foremost, the number of households with children has decreased and on that account, the number of households composed of two childless grown-ups has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

Table 1. Population by age and sex in 2000, 2002, 2004 and 2006–2007 (1 January)

Age group, sex	2000	2002	2004	2006	2007
Total	1 372 071	1 361 242	1 351 069	1 344 684	1 342 409
Males, %	46,1	46,1	46,1	46,1	46,1
Females, %	53,9	53,9	53,9	53,9	53,9
0–14	250 503	233 829	215 718	202 429	199 744
Males, %	51,3	51,4	51,4	51,4	51,4
Females, %	48,7	48,6	48,6	48,6	48,6
15–17	63 499	63 445	64 815	63 247	58 771
Males, %	50,8	50,9	51,2	51,3	51,4
Females, %	49,2	49,1	48,8	48,7	48,6
18–64	852 439	852 828	851 501	853 686	854 525
Males, %	47,5	47,5	47,7	47,8	47,9
Females, %	52,5	52,5	52,3	52,2	52,1
65+	205 189	210 699	218 658	225 066	229 158
Males, %	32,6	32,9	33,1	33,2	33,2
Females, %	67,4	67,1	66,9	66,8	66,8

Source: Statistics Estonia

Figure 1. Population by age, 2000–2007



Source: Statistics Estonia

14 Population

Table 2. Number and membership of households in 2000, 2002 and 2004–2006
(annual average)

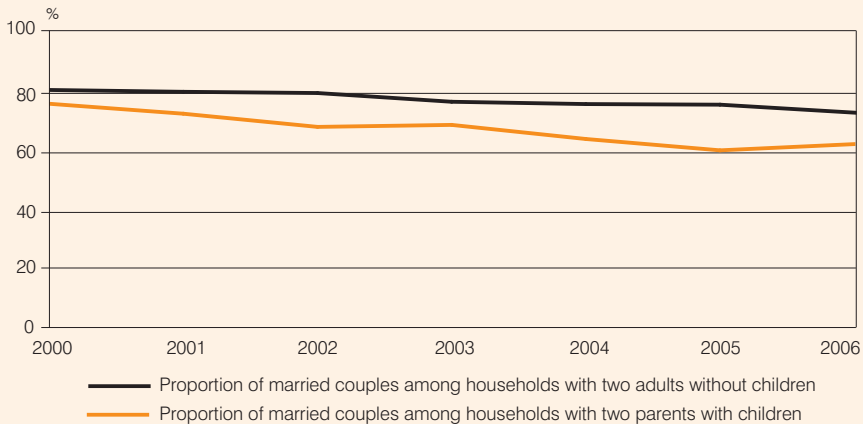
Type of households	2000	2002	2004	2005	2006
Total	575 300	566 700	564 700	566 800	573 400
Single-member households	179 600	175 900	178 700	180 200	180 300
Households with two and more members	395 700	390 800	386 000	386 600	393 100
2 adults ¹	111 400	108 500	113 700	116 300	124 300
1 parent with child (children) ²	26 200	21 900	19 200	16 800	19 100
2 parents ¹ with children ²	90 500	87 200	79 600	75 500	72 300
with 1 child	44 500	42 100	40 100	39 900	39 100
with 2 children	35 800	37 100	32 100	26 400	26 100
with 3 and more children	10 200	8 000	7 400	9 200	7 100
Other households	167 500	173 300	173 400	178 800	177 300
Average size of households (members)	2,37	2,38	2,37	2,36	2,33

1 Both common-law and married couples.

2 Child/children aged 0–15.

Source: Statistics Estonia, Household budget survey

Figure 2. Proportion of married couples among households with two adults, 2000–2006



Source: Statistics Estonia, Household budget survey, (estimated figure, calculated on the basis of census data and population registration data)

Table 3. Main demographic indicators, 2000, 2002 and 2004–2006

Indicator	2000	2002	2004	2005	2006
Number of live births	13 067	13 001	13 992	14 350	14 877
Marital births, %	45,6	43,7	42,0	41,5	41,8
Live births per 1,000 women aged 15–49	38,1	38,0	40,8	41,9	43,7
Crude birth rate (per 1,000 inhabitants)	9,5	9,6	10,4	10,7	11,1
Total fertility rate ¹	1,4	1,4	1,5	1,5	1,6
Number of deaths	18 403	18 355	17 685	17 316	17 316
Crude death rate (per 1,000 inhabitants)	13,4	13,5	13,1	12,9	12,9
Infant mortality rate ²	8,4	5,7	6,4	5,4	4,4
Mortality rate of 0–64-year-olds (per 1,000 inhabitants)	5,2	5,2	4,8	4,5	4,5
Males	7,6	7,8	7,2	6,7	6,7
Females	3,0	2,8	2,5	2,5	2,5
Mortality rate of 65-year-olds and older (per 1,000 inhabitants)	58,7	57,8	55,4	54,4	54,3
Males	71,0	70,8	69,3	69,1	69,5
Females	52,8	51,4	48,5	47,2	46,7
Natural increase	-5 336	-5 354	-3 693	-2 966	-2 439
Rate of natural increase (per 1,000 inhabitants)	-3,9	-3,9	-2,7	-2,2	-1,8
Life expectancy at birth	70,6	71,0	72,0	72,8	73,0
Males	65,1	65,1	66,3	67,3	67,4
Females	76,0	77,0	77,8	78,1	78,5
Dependency ratio³ (beginning of year)	49,8	48,5	47,4	47,0	46,6
Labour market reprisal index⁴ (beginning of year)	1,2	1,1	1,0	1,0	0,9
Age dependency ratio⁵ (beginning of year)	22,4	23,0	23,9	24,3	24,5

1 The average number of live-born children 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 1 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 (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 15–64 compared to those aged 65 and older.

Source: Statistics Estonia

Table 4. Average age of birthgiver, 2000, 2002 and 2004–2006 (years)

	2000	2002	2004	2005	2006
Average age of woman at delivery	27,0	27,5	27,9	28,2	28,4
Average age of woman at first delivery	24,0	24,6	25,0	25,2	25,4

Source: Statistics Estonia

16 Population

Table 5. Live births, by birth order and marital births, 2000, 2002 and 2004–2006

	2000	2002	2004	2005	2006
Number of live births¹	13 067	13 001	13 992	14 350	14 877
As 1 st child, %	48,4	48,2	49,3	48,4	48,2
marital births ² , %	34,7	33,1	31,0	30,6	30,6
As 2 nd child, %	32,1	33,1	32,3	33,6	34,4
marital births ² , %	55,1	51,7	50,5	49,9	49,2
As 3 rd child, %	12,1	12,1	12,3	12,1	12,1
marital births ² , %	58,0	58,3	57,4	55,7	59,8
As 4 th and subsequent child, %	7,4	6,7	6,1	5,9	5,3
marital births ² , %	55,2	54,5	55,3	54,0	53,4

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

2 Proportion of live births of the corresponding birth order.

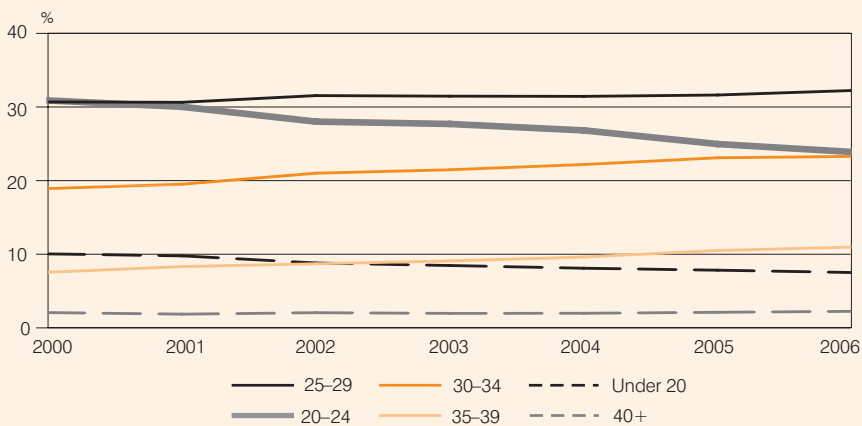
Source: Statistics Estonia

Table 6. Live births by mother's age, 2000, 2002 and 2004–2006 (%)

Age group	2000	2002	2004	2005	2006
Under 20	10,0	8,8	8,0	7,8	7,5
20–24	30,9	28,0	26,8	25,0	23,9
25–29	30,7	31,6	31,5	31,7	32,3
30–34	18,9	21,0	22,2	23,1	23,3
35–39	7,5	8,7	9,6	10,5	10,9
40+	2,0	2,0	1,9	2,0	2,2

Source: Statistics Estonia

Figure 3. Live births by mother's age, 2000–2006



Source: Statistics Estonia

Table 7. Abortions and induced abortions and women having abortion by age, 2000, 2002 and 2004–2006

Indicator	2000	2002	2004	2005	2006
Total number of abortions	15 331	13 149	12 625	11 835	11 625
per 1,000 women aged 15–49	44,7	38,4	36,8	34,6	34,1
per 100 live births	117,3	101,2	90,2	82,5	78,1
Total number of legitimately induced abortions¹	12 743	10 834	10 074	9 610	9 378
per 1,000 women aged 15–49	37,2	31,6	29,4	28,1	27,5
per 100 live births	97,5	83,3	72,0	67,0	63,0
Women having abortions, by age², %					
Under 20	13,0	13,2	14,4	14,1	14,1
20–24	24,1	24,5	24,4	24,7	24,6
25–29	23,1	22,2	22,2	20,4	21,7
30–34	19,2	19,0	19,1	19,7	18,1
35–39	13,6	14,1	13,8	14,2	15,3
40+	6,9	7,0	6,1	6,9	6,2

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

2 Proportion of all legitimately induced abortions.

Source: Statistics Estonia

Living standard and poverty

Rapid growth of Estonian economy is also reflected in the improvement of life of Estonian inhabitants, that is, in increase of living standards. According to household budget survey, in 2006 the average net income of a household member was 4,343 EEK and expenses 3,712 EEK per month. In the period 2000–2006, net income of a household member has doubled and expenses increased by two thirds. Fast increase of income has provided opportunity for many households to save (investments and repayment of loan are also considered to be saving); therefore, the increase of average expenses has been somewhat slower.

Most important income sources in Estonia are paid employment and old-age pension (2/3 and 1/6 of household member's income, respectively), forming almost 85% of average net income of a household member. In 2006, the average gross wages for normal working hours of full-time work was calculatedly 9,407 EEK per month per a salary receiver, and the average old-age pension was 3,027 EEK. In comparison to the year 2000, by 2006, gross wages had increased 1.92 times and average old-age pension 1.98 times. Therefore, the increase of main income sources has been noticeably faster than the increase of consumer prices (increase 1.24 times).

Estonia has managed to adhere to minimum standard of 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 2005, average pension of a pensioner with 30 years of pensionable service formed 43% of average gross wages of an unskilled male production worker.

Average income of a household member and therefore also consuming opportunities are largely dependent on the household type, for proportion of dependants and 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 2000–2006 has been change in income of households comprising of two parents and children in comparison of average income in Estonia. While in 2000, in households comprising of two parents and children was a little under the Estonian average (98%), then in 2006, it was 5% higher than the Estonian average, reaching up to 4,546 EEK per month on the average. A significant part of income increase of households comprising of two parents and children was formed by increase of net income per household member of parents with three and more children. In this category, the difference was the smallest in comparison to general average indicator – 15 percentage points. Therefore, politics directed at alleviation of poverty has improved the economic situation of namely households with many children in Estonia.

At the same time, in households where children are raised by one parent, the average net income per household member still remains lower in comparison to the average in Estonia, forming only 72% of the latter in 2006.

On the same level, that is 72% of the general average in 2006, is the average net income per household member also in these households where the main income earner (that is head of household) is a pensioner.

To assess the economic situation of inhabitants with lower income, indicators of absolute and relative poverty are used. Whereas first of these explains which income enables to cope in a specific environment, the second shows the unevenness of income distribution among people with the lowest income.

Absolute poverty is absence of resources for minimum living standard or covering basic needs. Absolute poverty line¹ or subsistence minimum in Estonia is calculated on the basis of expenses and the absolute poverty line expresses the proportion of households with income per member per month with consumption scales of 1:0.7:0.5 remains under absolute poverty line that means under the level of expenses which is under absolute poverty line. In 2004, absolute poverty line in Estonia was almost 15%, that is, almost 15% of all households were living under absolute poverty line. 16% of all household members were living in these households, and every fifth child was living in these households. By 2006, proportion of poor households had decreased by half, that is, every twelfth household (7.6% of all households) was living under absolute poverty line. In absolute figures, in Estonia in 2006, estimably 44,000 households were living under absolute poverty line, with estimably 111,000 people living in them, 24,000 of whom where children.

Relative poverty shows the percentage of inhabitants whose income remains below a certain percentage of the median income of inhabitants. 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 consumption scales 1:0.5:0.3. The relative poverty indicators do not allow for a direct evaluation of an improvement or deterioration in people's subsistence, as relative poverty reflects the distribution of incomes in the society – this means that when people's incomes increase while the distribution of incomes remains the same, then the level of relative poverty remains the same.

Despite the fact that relative poverty line almost doubled in the period 2000–2005, general relative poverty line in Estonia did not change. Both in 2000 and in 2005, the relative poverty line in Estonia was 18.3%. The difference between relative poverty line of men and women, however, increased in the period 2000–2005. While among men, relative poverty rate dropped from 17.3% in 2000 to 16.3% in 2005, among women, during the same period, relative poverty line rose from 19.1% to 20.0%. Therefore, in 2005, each sixth Estonian man and each fifth Estonian woman belonged among the relatively poor by income.

Although in the period 2000–2005, relative poverty line decreased both among children (aged 0–15) and inhabitants in working age (aged 16–64), the situation of seniors (aged

1 Upon calculating the subsistence minimum, or the absolute poverty line, three cost components are used: the cost of food, the cost of dwelling and individual expenditure not related to food. Calculation of food cost is based on minimum food basket.

65+) deteriorated. Relative poverty line in the age group of 65 and older increased 1.56 times during the observed period and in 2005, every fourth senior belong to the relatively poor (that means, the relative poverty line of senior inhabitants was 25.1%).²

In comparison to other European Union member states, relative poverty line in Estonia according to data of 2005 was near the average of European Union member states (16%) (excluding Bulgaria and Romania), but, for instance, 1.5 to 2 times higher than in Northern countries and Czech Republic. A higher risk for people to fall into poverty than in Estonia is for instance for inhabitants of Poland, Lithuania, Spain, Ireland, Greece, but also of Latvia, United Kingdom, Portugal and Italy.

Consumer prices

Table 1. Changes in the consumer price index, compared to the previous year, 2000, 2002 and 2004–2007 (%)

Indicator	2000	2002	2004	2005	2006	2007
Total	4,0	3,6	3,0	4,1	4,4	6,6
Goods	3,3	1,9	2,9	4,0	3,7	4,8
food	2,6	2,7	3,7	3,7	4,6	8,0
manufactured goods	4,2	1,1	2,2	4,3	3,0	2,3
Services	5,4	6,8	3,3	4,2	5,7	10,0
dwelling	2,7	8,2	4,1	7,0	10,4	14,6
health care	5,5	8,3	4,7	2,2	2,5	7,9
transport	16,1	-2,3	5,4	9,3	4,4	2,7
communications	6,1	1,6	-1,6	-4,1	-5,3	-1,2
education and children's institutions	8,1	4,7	2,8	3,4	3,5	5,4

Source: Statistics Estonia

² At the same time, in interpreting data, it needs to be considered that starting 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 needs to be taken into account that changes of 2004 in comparison to 2002 might be conditioned by changes in methodology, not significant changes of processes in society.

Incomes

Table 2. Average disposable income, gross wages and old-age pension per household member, 2000, 2002 and 2004–2006

Indicator	2000	2002	2004	2005	2006
Average disposable income of household member (EEK per month)	2 183	2 500	3 029	3 476	4 343
Average gross wages (EEK per month)	4 907	6 144	7 287	8 073	9 407
Average old-age pension (EEK per month)	1 532	1 758	2 244	2 558	3 027
Average old age pension as percentage of average net wages ¹ , %	39,9	36,9	39,5	39,8	...
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	53,8	52,3	55,7	...
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	41,6	40,5	43,4	...
Change compared to the previous year, %					
Average disposable income of a household member	8,3	9,2	8,6	14,8	24,9
Average gross wages	10,5	11,5	8,4	10,8	16,5
Average old-age pension	-0,8	11,1	13,0	14,0	18,3
Change in real income compared to the previous year, %					
Average disposable income of a household member	4,1	5,4	5,4	10,2	19,7
Average gross wages	6,3	7,6	5,2	6,4	11,6
Average old-age pension	-4,7	7,2	9,8	9,5	13,4

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 Since 1 January 2002, 1% of unemployment insurance (from 2006, it is 0.6%) and since 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 average calculated net wages.

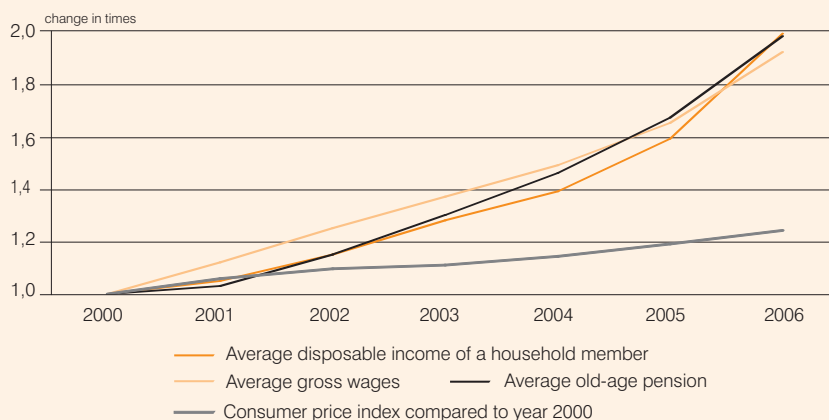
Source: Social Insurance Board, Statistics Estonia

Figure 1. Average gross wages, old-age pension and disposable income per household member, 2000–2006



Source: Social Insurance Board, Statistics Estonia

Figure 2. Change in average gross wages, old-age pension, disposable income per household member and consumer price index, 2000–2006



Source: Social Insurance Board, Statistics Estonia

Table 3. Difference of received average disposable income per different type of household members compared to Estonian general average, 2000, 2002 and 2004–2006

Indicator	2000	2002	2004	2005	2006
Average disposable income of households per member (EEK per month)	2 183	2 500	3 029	3 476	4 343
Difference of disposable income from the general average in different types of households, %					
Single adult	115,4	113,2	106,8	114,4	107,9
2 adults	125,7	119,0	120,5	122,0	120,9
2 adults with children	98,2	101,6	105,4	95,5	104,7
1 child	115,0	109,3	119,0	112,3	120,2
2 children	91,9	101,0	98,4	89,0	92,7
3 and more children	71,3	80,8	84,7	69,5	86,3
Single adult with a child (children)	76,0	84,2	76,0	73,8	72,0
Household with pensioner as head of household ¹	75,1	73,9	77,6	72,9	71,8
Urban household ²	106,6	106,7	106,2	104,9	106,0
Rural household ³	85,5	84,8	88,4	90,1	88,8
Household with the head of household with no professional training	88,7	84,8	83,7	87,6	88,1
Household with the head of household with higher education	147,7	145,6	144,3	142,4	142,0

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 of household member in income deciles, average disposable income, median of disposable income and proportion of X and I income deciles, 2000, 2002 and 2004–2006¹ (EEK per household member per month)

Income deciles ²	2000	2002	2004	2005	2006
I	505	652	805	975	1 319
II	1 030	1 193	1 530	1 758	2 229
III	1 320	1 515	1 946	2 207	2 738
IV	1 503	1 717	2 168	2 495	3 061
V	1 657	1 898	2 390	2 760	3 373
VI	1 874	2 128	2 649	3 098	3 832
VII	2 229	2 493	3 043	3 572	4 457
VIII	2 741	3 064	3 739	4 344	5 385
IX	3 549	4 105	4 847	5 504	6 800
X	6 704	7 295	8 158	9 520	12 017
Estonian average	2 183	2 500	3 029	3 476	4 343
Median ³	1 750	1 994	2 468	2 827	3 488
Proportion between X and I income decile	13,3	11,2	10,1	9,8	9,1

1 Equivalence scales 1:1:1 are used.

2 The income deciles are derived by dividing all households according to the size of the average 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 size of average 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 minimum¹ (absolute poverty line) and minimum food basket, 2004–2006 (EEK per single adult household per month)

Indicator	2004	2005	2006
Subsistence minimum (absolute poverty line)	1 836	1 938	2 081
incl. minimum food basket ²	762	816	888
Proportion of minimum food basket of estimated subsistence minimum, %	41,5	42,1	42,7

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 calculated minimum food basket, exemplifying food basket prepared by nutritional researchers, which should ensure the "average" person's need of energy of 2,400 kcal and average prices of household budget study's I-V cost deciles' purchase prices were proceeded from.

Source: Statistics Estonia

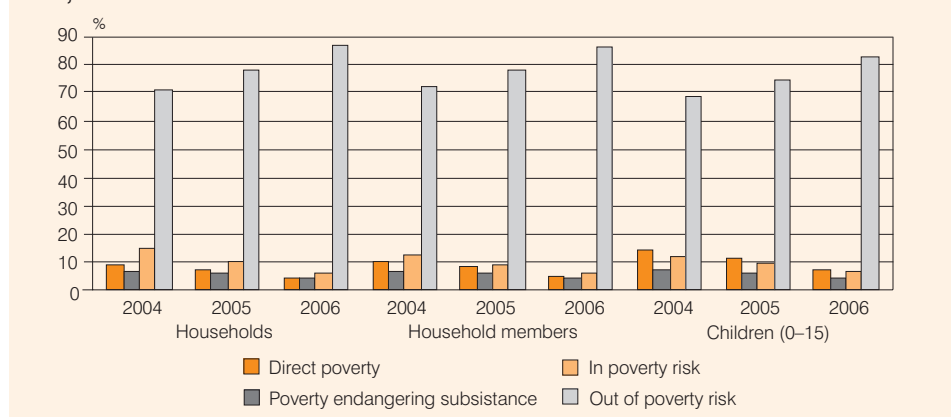
Table 6. Distribution of households, household members, children and the elderly by absolute poverty layers¹, 2004–2006 (%)

Poverty layers	Households			Household members			Children (aged 0–15)			Elderly (65+)		
	2004	2005	2006	2004	2005	2006	2004	2005	2006	2004	2005	2006
Under absolute poverty line (APL)	14,8	12,4	7,6	16,1	13,2	8,2	20,3	16,8	10,7	8,9	6,8	3,4
in direct poverty	8,5	6,9	3,9	9,9	7,7	4,4	13,6	11,0	6,6	3,6	2,2	1,0
in poverty engaging subsistence	6,3	5,5	3,7	6,2	5,5	3,8	6,7	5,8	4,1	5,3	4,6	2,4
In poverty risk	14,6	9,9	5,8	11,9	8,8	5,8	11,2	9,0	6,4	21,5	13,1	6,0
Out of poverty risk	70,6	77,7	86,6	72,0	78,0	86,0	68,5	74,2	82,9	69,6	80,2	90,5

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

Source: Statistics Estonia

Figure 3. Distribution of households, household members and children by absolute poverty lines, 2004–2006



Source: Statistics Estonia

Relative poverty

Table 7. Relative poverty line¹, 2000, 2002 and 2004–2005 (EEK per consumption unit per year)

Household type	2000	2002	2004	2005
1-member household	17 880	20 768	27 981	34 153
2 adults + 2 dependent children	37 548	43 613	58 760	71 720

¹ Starting 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 needs to be taken into account that changes of 2004 in comparison to 2002 might be conditioned by changes in methodology, not significant changes of processes in society.

Source: Statistics Estonia

Table 8. Relative poverty line¹ by age and sex, 2000, 2002 and 2004–2005 (%)

	2000	2002	2004	2005
Total	18,3	17,9	18,3	18,3
Males	17,3	17,0	17,4	16,3
Females	19,1	18,7	19,2	20,0
0–15, total	21,3	17,9	21,5	19,8
16–64, total	17,9	18,5	17,1	16,2
Males	17,8	18,3	17,3	15,6
Females	17,9	18,6	16,9	16,8
65+, total	16,0	15,8	20,3	25,1
Males	7,5	6,6	9,6	13,7
Females	20,6	20,8	25,5	30,8

1 Starting 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 needs to be taken into account that changes of 2004 in comparison to 2002 might be conditioned by changes in methodology, not significant changes of processes in society.

Source: Statistics Estonia

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

Indicator	2000	2002	2004	2005
Gini coefficients ² according to income (consumption scales 1.0: 0.5 and 0.3) ⁴	0,362	0,352	0,341	0,331
Coefficient of income quintiles ³ (consumption scales 1.0: 0.5 and 0.3) ⁴	6,3	6,1	5,9	5,5

1 Starting from 2003, in calculating income-based relative poverty indicators, the Estonian Social Survey Data is used instead of the Household Budget Survey data. Therefore, in drawing conclusions, it needs to be taken into account that changes of 2004 in comparison to 2002 might be conditioned by changes in methodology, not significant changes of processes in society.

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

3 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.

4 The modified OECD scale, where the first household member is calculated with the coefficient of 1.0, the following member over 14 years of age with 0.5 and children up to 13 years of age with 0.3. This indicator is comparable with indicators of other EU member states).

Source: Statistics Estonia

Labour market

When becoming unemployed and looking for a new job, people are entitled to turn to Labour Market Board for assistance. Registration of unemployed persons and persons seeking work, providing labour market services for them and paying unemployment benefit for them is regulated by Labour Market Services and Benefits Act that came into force on 1 January 2006. The Act brought along considerable changes in the principles of providing labour market services to the registered persons¹. The most important of them is the implementation of the principle of a case-management approach in providing the services.

Compared to the Employment Service Act previously in force, the new law contains considerably more different types of labour market services, including 4 services for disabled persons. These labour market services are provided to the unemployed persons on the basis of an individual job seeking plan. According to the new Act, there are three types of labour market benefits: the unemployment benefit², grant, and transport and accommodation benefit.

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 benefit have the right to receive unemployment benefit.

Unemployment benefit is paid for up to 270 days. Since 1 January 2007, the daily rate of unemployment benefit was increased, in the result of which, the average paid benefit increased from 400 EEK per month to 1,000 EEK. Starting from the same date all registered unemployed persons also were provided with 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 a grant. Participants in labour market training and work practice have the right to apply for transport and accommodation benefit.

The Unemployment Insurance Act enforced in 2002 introduced unemployment insurance in Estonia, which is a type of compulsory insurance based on the principle of solidarity and administered by the Unemployment Insurance Fund. The collection of unemployment insurance contributions started in 2002, and the first benefits were paid out in the beginning of 2003.

The Unemployment Insurance Act regulates conditions and procedure of paying benefits in case of becoming unemployed, collective termination of employment contracts and employer's insolvency, and also the procedure of unemployment insurance. The Act provides the following types of benefits: unemployment insurance benefit, benefit for collective termination of employment contracts, benefit for employer's insolvency.

1 An unemployed person is a person (from 16 to pensionable age) who is not working, has been registered as unemployed in a regional departments of the Labour Market Board and is looking for a job.

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

Unemployment insurance is financed from unemployment insurance contributions. For the insured, or the employee, the unemployment insurance contribution rate may be 0.5 to 2.0 percent and for the employer 0.25 to 1 percent of the wages paid to the employee. In 2006–2007, the unemployment insurance contribution rate was 0.6 percent for employees and 0.3 percent for employers.

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 (until 2006, during 24 months) 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 salary. The amount is 50% of the previous salary on the first 100 days of the benefit period and 40% of the previous salary 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 people in Estonia per calendar day in the previous calendar year.

The insured person has the right to receive unemployment insurance benefit during the whole period of registration, but not for longer than:

- 180 calendar days for insured person, whose insurance period is less than 56 months;
- 270 calendar days for insured person, whose insurance period is 56–110 months;
- 360 calendar days for insured person whose insurance period is 111 months or more.

Unemployment Insurance Fund shall pay a benefit for collective termination of employment contracts in the extent of 50% of the benefit prescribed for the employee, but not more than the employee's two months' average wages. In case of insolvency of the employer the Unemployment Insurance Fund shall cover the unreceived wages, holiday pay and other benefits up to the total of three months of average wages for the employee, but not exceeding the Estonian average for three months of wages.

Lisbon strategy has three main goals in employment: by 2010 increase the average employment rate³ to 70%, women's employment rate to 60% and employment rate of older people (aged 55–64) to 50%. In comparison to other member states of the European Union (EU), Estonia has been relatively successful. Estonia has already achieved the objectives related to the employment rate of women and elderly people, and 70% of average employment rate is also reached very soon.

In 2006 and 2007, positive trends continued in Estonian economic life and proceeding from this, also in the labour market. Resulting from rapid economic growth (11.1%), the number of employed persons increased by 6.4% in 2006. In 2007, the employment increase continued, but at a much slower pace.

According to the labour force survey of the Statistics Estonia, in 2007, 655,300 people aged 15–74 were employed, 32,000 unemployed and 359,000 in-active in Estonia.

³ Employment rate – proportion of employed of working-age population aged 15–64 years.

Activity rate⁴ increased to 72.5% and employment rate to 69.1%. Number of employed people increased the most in the fields of construction, financial intermediation, renting, real estate and business activity.

The average employment rate of women reached up to 65.7% in 2007. 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. The latter is also the reason for an increase in the employment rate of older people (aged 55–64), which exceeded the Lisbon objective in Estonia already in 2002 and reached 59.5% in 2007.

As expected, also unemployment rate⁵ dropped, from 5.9% in 2006 to 4.7% in 2007. The unemployment rate was last this low before 1993. Both men's and women's unemployment decreased, as did unemployment of non-Estonians. For the first time, the unemployment rate in Estonia is lower than the European Union average, and in several regions of Estonia we can already talk about a shortage of labour.

Increase of demand for workforce has also improved the situation of risk groups in the labour market. In 2006 and 2007, the unemployment of young people decreased considerably, the unemployment rate of people aged 15–24 dropped to 10%. It is positive that the number of long-term unemployed people also dropped, for their integration to the labour market usually takes more time and effort. Half of the unemployed (15,900) are long-term unemployed, which means that they have looked for work for 12 months or longer. Both the unemployment rate of young people and long-time unemployed has dropped below the European Union average.

The unemployment of registered unemployed persons has also shown a decreasing trend, however, at the end of 2007, the number of new unemployed persons somewhat increased due to redundancies. The total number of unemployed people registered in employment offices in 2007 was 40,247, 70% of them new people registered as unemployed.

The most popular labour market measures offered to the unemployed people were career counselling (20.6% of the unemployed people) and labour market training (13.7%). Among other services, the number of participants in work exercise increased the most.

The expenditure on active labour market measures has increased, thanks to the implementation of the European Social Fund. At the same time, also expenditure on passive measures increased, thanks to the 2.5 times increase of the unemployment benefit level. In 2007, the total expenditure on labour market policy amounted to 309.3 million EEK. Of this, 27% was spent on passive measures and 73% on active measures.

Decrease of unemployment has also resulted in the dropping number of people receiving unemployment benefit (allowance). In 2007, unemployment benefit was paid in total to 17,769 unemployed people. In the same period, the Unemployment Insurance Fund appointed unemployment insurance benefit to 8,011 people, which is 11% less than in 2006. The average amount of paid unemployment insurance benefit was 2,857 EEK.

The number of receivers of the benefit for collective termination of employment contracts grew by 54% in comparison to 2006 and the number of people receiving the benefit for the insolvency of the employer decreased to 6.6%.

4 Activity rate – proportion of workforce of working-age population aged 15–64 years.

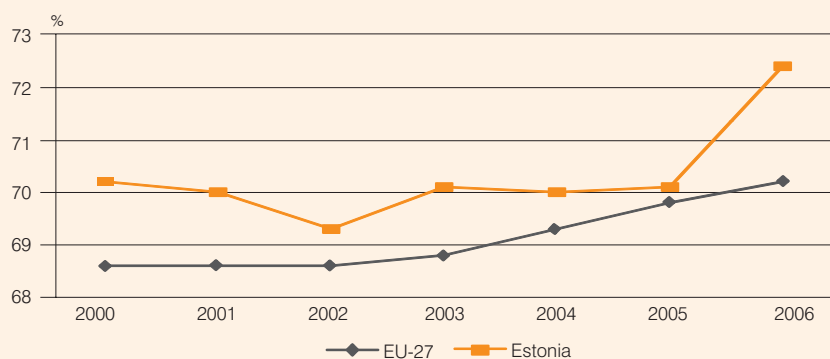
5 Unemployment rate – proportion of unemployed people of working force, aged 15–74.

Table 1. Working-age population by employment status, 2000, 2002 and 2004–2007 (aged 15–74, thousand)

		2000	2002	2004	2005	2006	2007
Total	Total	1 046,5	1 047,2	1 047,8	1 048,6	1 049,1	1 046,4
	Employed	572,5	585,5	595,5	607,4	646,3	655,3
	Unemployed	89,9	67,2	63,6	52,2	40,5	32,0
	Non-active	384,1	394,4	388,7	389,0	362,3	359,0
Males	Total	485,2	487,0	487,7	488,5	490,0	489,1
	Employed	291,1	297,5	299,1	300,5	322,9	330,0
	Unemployed	49,5	36,1	34,7	28,9	21,3	18,9
	Non-active	144,7	153,4	153,8	159,2	145,7	140,3
Females	Total	561,3	560,2	560,1	560,0	559,1	557,2
	Employed	281,4	288,1	296,4	306,9	323,3	325,4
	Unemployed	40,5	31,0	28,9	23,3	19,2	13,1
	Non-active	239,4	241,0	234,9	229,8	216,5	218,7

Source: Statistics Estonia, Labour Force Survey

Figure 1. Labour force participation rate in the European Union and Estonia, 2000–2006



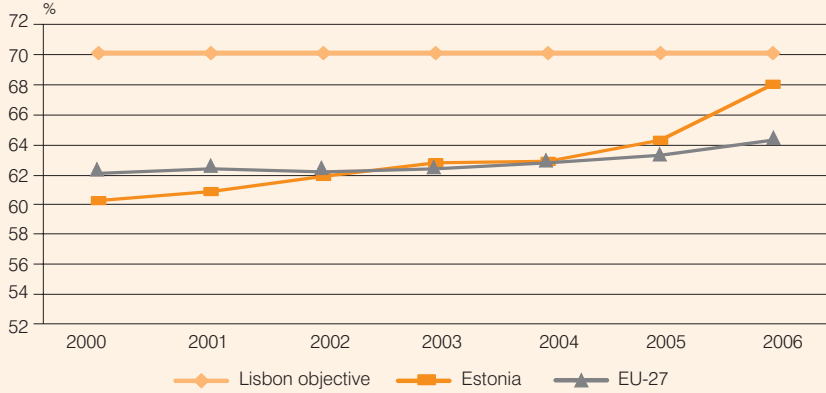
Source: Eurostat

Table 2. Labour force participation rate, 2000, 2002 and 2004–2007 (%)

		2000	2002	2004	2005	2006	2007
Total	Total	70,4	69,0	69,5	69,6	72,1	72,5
	Males	76,1	74,1	73,5	72,8	75,3	76,9
	Females	65,3	64,3	65,8	66,7	69,1	68,5

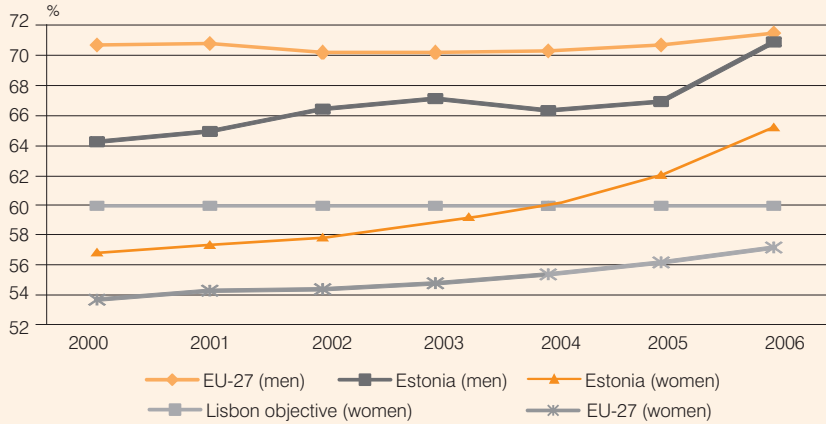
Source: Statistics Estonia, Labour Force Survey

Figure 2. Employment rate in the European Union and Estonia, 2000–2006



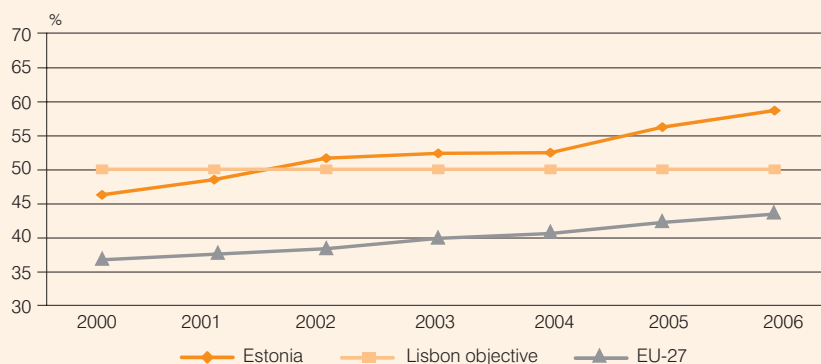
Source: Eurostat

Figure 3. Employment rate of men and women in the European Union and Estonia, 2000–2006



Source: Eurostat

Figure 4. Employment rate of older people in the European Union and Estonia, 2000–2006 (aged 55–64)



Source: Eurostat

Table 3. Employment rate by sex and age, 2000, 2002 and 2004–2007 (%)

		2000	2002	2004	2005	2006	2007
15–24	Total	31,5	27,8	26,8	28,6	31,3	34,2
	Males	35,8	33,9	31,8	32,2	36,2	38,2
	Females	27,0	21,6	21,5	25,0	26,1	30,0
25–54	Total	75,7	76,7	78,5	79,3	84,0	84,5
	Males	78,2	80,2	81,0	81,4	87,4	89,4
	Females	73,4	73,5	76,1	77,3	80,9	80,0
55–64	Total	44,0	51,4	52,1	55,7	58,2	59,5
	Males	54,7	58,1	56,1	58,6	57,2	58,6
	Females	36,0	46,4	49,1	53,4	59,0	60,3
15–64	Total	60,7	61,7	62,6	64,0	67,7	69,1
	Males	64,8	66,0	65,7	66,2	70,5	72,6
	Females	57,0	57,8	59,8	61,9	65,1	65,7

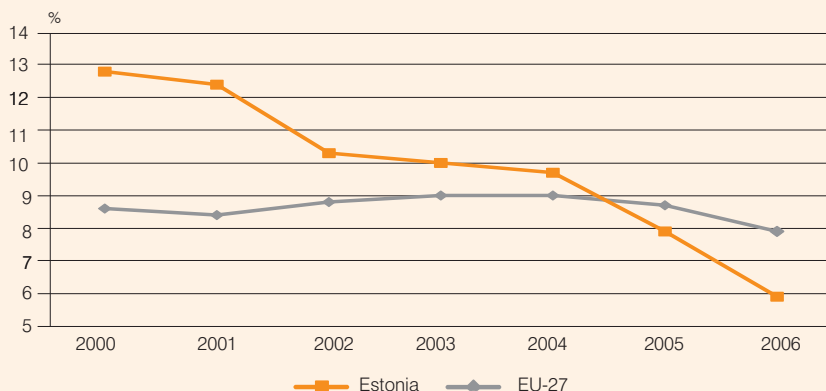
Source: Statistics Estonia, Labour Force Survey

Table 4. Employment rate by sex and nationality, 2000, 2002 and 2004–2007 (%)

		2000	2002	2004	2005	2006	2007
Estonians	Total	61,9	62,6	64,2	64,5	68,5	69,1
	Males	64,7	66,3	66,8	65,7	70,0	71,9
	Females	59,4	59,2	61,7	63,3	67,1	66,4
Non-Estonians	Total	58,5	60,0	59,6	63,0	66,1	69,0
	Males	65,0	65,4	63,3	67,4	71,7	74,2
	Females	52,8	55,1	56,5	59,2	61,1	64,4

Source: Statistics Estonia, Labour Force Survey

Figure 5. Unemployment rate dynamics in the European Union and Estonia, 2000–2006



Source: Eurostat

Table 5. Unemployment rate by sex and age, 2000, 2002 and 2004–2007 (%)

		2000	2002	2004	2005	2006	2007
15–24	Total	23,8	17,6	21,7	15,9	12,0	10,0
	Males	23,9	14,3	21,2	16,6	10,0	12,1
	Females	23,7	22,5	22,4	14,9	14,7	7,1
25–54	Total	12,8	10,0	8,9	7,5	5,5	4,2
	Males	13,6	10,8	9,4	8,2	5,6	4,2
	Females	12,1	9,2	8,3	6,9	5,4	4,3
55–64	Total	9,6	7,5	6,0	5,0	4,1	3,5
	Males	12,1	8,3	7,2	5,9	6,7	6,8
	Females	6,5	6,6	4,9	4,3	...	...
15–74	Total	13,6	10,3	9,7	7,9	5,9	4,7
	Males	14,5	10,8	10,4	8,8	6,2	5,4
	Females	12,6	9,7	8,9	7,1	5,6	3,9

Source: Statistics Estonia, Labour Force Survey

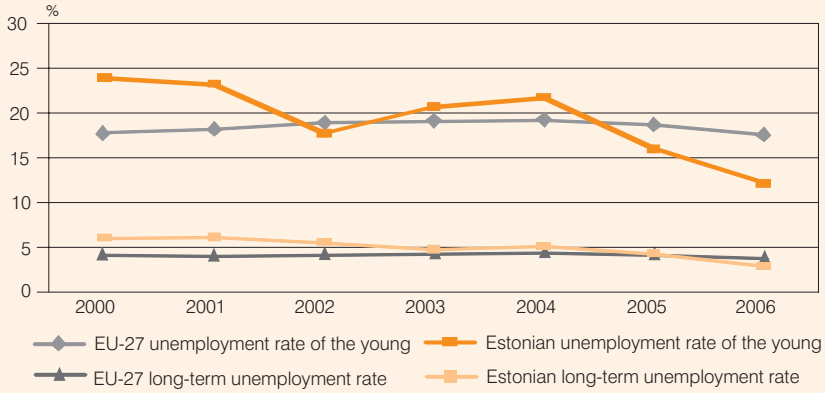
Table 6. Long-term unemployment rate¹, 2000, 2002 and 2004–2007 (%)

		2000	2002	2004	2005	2006	2007
Total		6,2	5,4	5,0	4,2	2,8	2,3
	Males	6,9	6,4	5,6	4,2	3,1	2,9
	Females	5,4	4,5	4,4	4,2	2,6	1,7

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

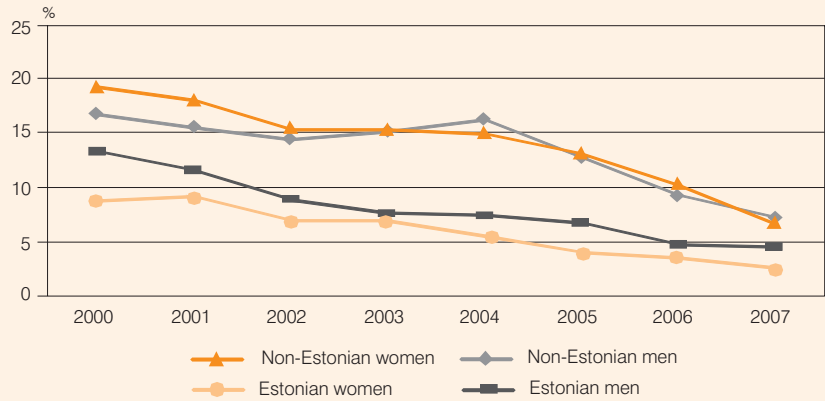
Source: Statistics Estonia, Labour Force Survey

Figure 6. Unemployment rate of young people and long-term unemployment rate in the European Union and Estonia, 2000–2006



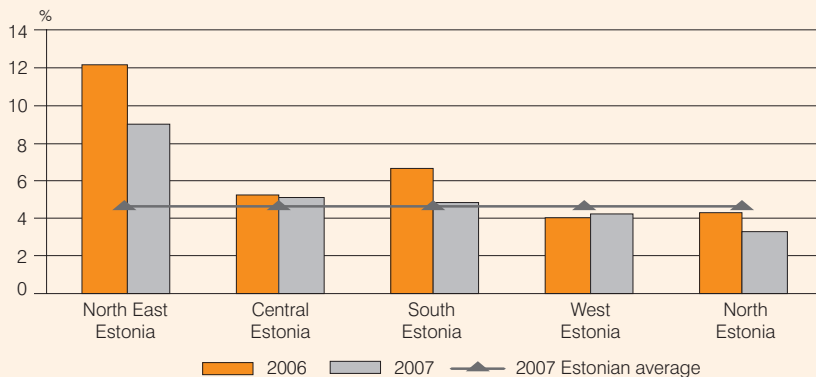
Source: Eurostat

Figure 7. Unemployment rate by sex and nationality, 2000–2007



Source: Statistics Estonia, Labour Force Survey

Figure 8. Unemployment rate by regions¹, 2006–2007



¹ North Estonia: Harjumaa; West Estonia: Läänemaa, Pärnumaa, Hiiumaa, Saaremaa;
 Central Estonia: Raplamaa, Järvamaa, Lääne-Virumaa; North East Estonia: Ida-Virumaa;
 South Estonia: Tartumaa, Jõgevamaa, Viljandimaa, Põlvamaa, Võrumaa, Valgamaa

Source: Statistics Estonia, Labour Force Survey

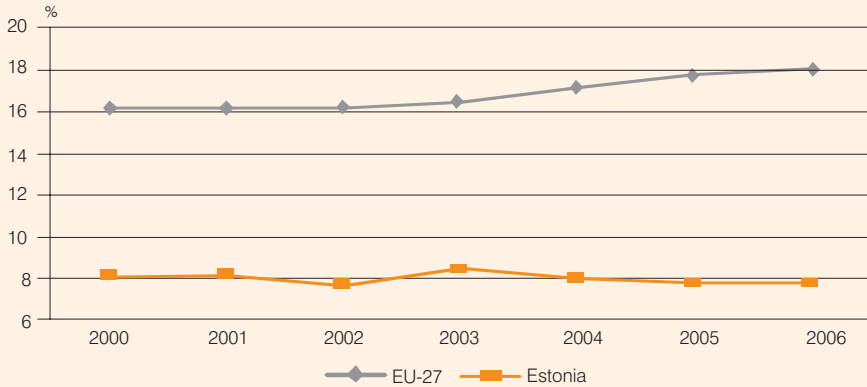
Table 7. Proportion of employed people by sex and economic sectors¹ 2000, 2002 and 2004–2007 (%)

		2000	2002	2004	2005	2006	2007
Total	Total	100,0	100,0	100,0	100,0	100,0	100,0
	Primary sector	7,2	6,9	5,9	5,3	5,0	4,7
	Secondary sector	33,3	31,3	34,9	34,0	33,5	35,2
	Tertiary sector	59,5	61,7	59,3	60,7	61,5	60,1
Males	Total	100,0	100,0	100,0	100,0	100,0	100,0
	Primary sector	9,7	9,6	8,1	7,1	6,7	6,4
	Secondary sector	42,4	40,8	44,2	44,0	45,6	48,2
	Tertiary sector	47,9	49,6	47,7	48,8	47,7	45,4
Females	Total	100,0	100,0	100,0	100,0	100,0	100,0
	Primary sector	4,6	4,2	3,6	3,5	3,2	3,0
	Secondary sector	23,9	21,5	25,5	24,2	21,5	22,0
	Tertiary sector	71,5	74,3	70,9	72,3	75,2	75,0

¹ Primary sector: agriculture, hunting and forest management, fishery.
 Secondary sector: mining industry, manufacturing, energy, gas and water supply, construction.
 Tertiary sector: service sector

Source: Statistics Estonia, Labour Force Survey

Figure 9. Proportion of part-time workers of the employed people in the European Union and Estonia, 2000–2006



Source: Eurostat

Table 8. Proportion of part-time workers¹ of the employed people, 2000, 2002 and 2004–2007 (%)

	2000	2002	2004	2005	2006	2007
Total	9,3	7,7	8,0	7,8	7,8	8,2
Males	6,0	4,8	5,4	4,9	4,3	4,3
Females	12,8	10,7	10,6	10,6	11,3	12,1

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, Labour Force Survey

Table 9. Proportions of workers who usually work over 48 hours per week in their main job, 2002 and 2004–2006 (%)

	2002	2004	2005	2006
Total	7,9	7,3	6,8	6,8
Males	10,8	11,6	10,7	10,1
Females	4,8	3,0	2,9	3,6

Source: Statistics Estonia, Labour Force Survey

Table 10. Proportion of employees by sex and type of employment relation¹, 2000, 2002 and 2004–2007 (%)

		2000	2002	2004	2005	2006	2007
Total	Total	100,0	100,0	100,0	100,0	100,0	100,0
	Contract of employment, contract of service (incl. public service)	94,7	96,2	95,7	96,6	97,6	97,8
	Contract of agreement	1,5	1,2	1,6	1,1	0,5	0,5
	Verbal agreement	3,8	2,6	2,7	2,3	1,9	1,7
Males	Total	100,0	100,0	100,0	100,0	100,0	100,0
	Contract of employment, contract of service (incl. public service)	92,5	94,3	93,9	95,3	96,5	96,8
	Contract of agreement	2,1	1,5	1,8	1,2	0,5	0,4
	Verbal agreement	5,5	4,2	4,2	3,5	3,0	2,8
Females	Total	100,0	100,0	100,0	100,0	100,0	100,0
	Contract of employment, contract of service (incl. public service)	96,9	98,0	97,4	97,7	98,6	98,8
	Contract of agreement	1,0	0,9	1,4	1,1	0,5	0,6
	Verbal agreement	2,1	1,0	1,2	1,2	0,9	0,6

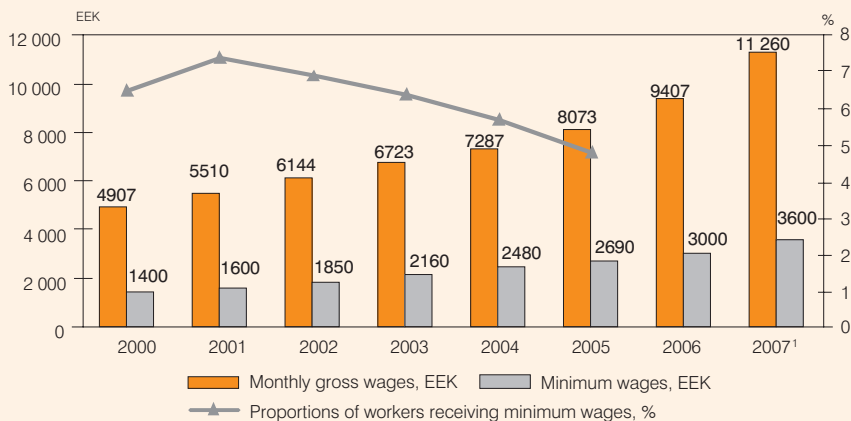
1 Contract of employment – agreement between employee and employer, according to which, employee undertakes to work for the employer by submission to employer's guidance and control, employer undertakes to pay to the employee for work and ensure stipulated working conditions.

Public service – working in public departments or local authorities.

Contract of agreement – written agreement to perform a certain job in a certain time period.

Verbal agreement – contract of employment concluded for less than two weeks or so-called "black" work that is unregistered.

Source: Statistics Estonia, Labour Force Survey

Figure 10. Average monthly gross wages¹, minimum wages and proportion of receivers of minimum wages of the employed people, 2000–2007

1 Initial gross wages, calculated as the average of four quarters.

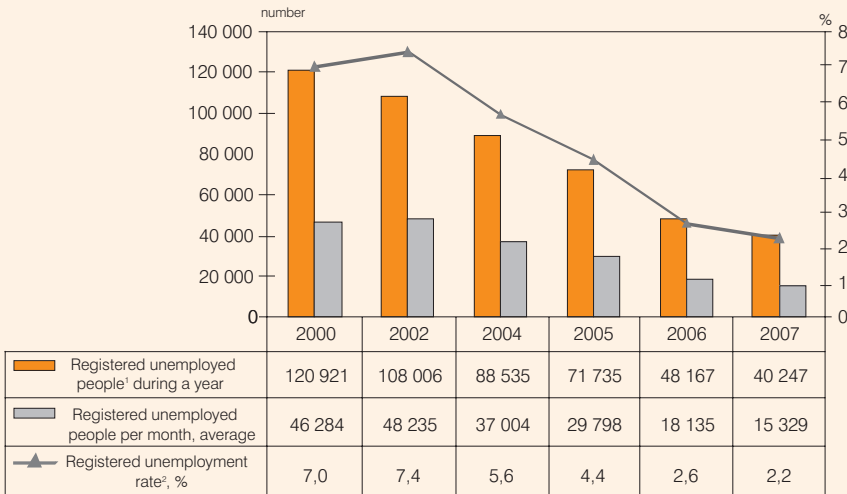
Source: Statistics Estonia, Eurostat

Table 11. Proportion of employees belonging to trade unions, 2000, 2002 and 2004–2006

	2000	2002	2004	2005	2006
Total of employees workers, thousand	520,7	538,2	538,0	558,2	594,7
Proportion of trade union members of employees, %	14,3	12,9	9,3	8,5	8,4

Source: Statistics Estonia, Labour Force Survey

Figure 11. Registered unemployment, 2000, 2002 and 2004–2007



1 Number of registered unemployed people also includes repeated registration during the year.

2 Registered unemployment rate – proportion of registered unemployed people of labour force.

Source: Labour Market Board

Table 12. Number of registered unemployed people by sex and age, 2005–2007

	Age	2005	2006	2007
Total	Total	71 573	48 167	40 247
	16–24	11 159	6 556	5 567
	25–49	41 729	27 418	22 719
	50+	18 685	14 193	11 961
Males	Total	31 880	20 150	16 809
	16–24	5 581	2 986	2 493
	25–49	17 519	10 741	8 904
	50+	8 780	6 423	5 412
Females	Total	39 693	28 017	23 438
	16–24	5 578	3 570	3 074
	25–49	24 210	16 677	13 815
	50+	9 905	7 770	6 549

Source: Labour Market Board

Table 13. Number of new registered unemployed people, vacancies and placements, 2000, 2002 and 2004–2007

	2000	2002	2004	2005	2006	2007
New unemployed people registered during a year	81 482	64 537	51 361	42 618	26 329	28 312
Number of new vacancies during a year	14 946	16 071	20 722	29 159	30 263	22 806
Number of placements per year	21 753	23 376	22 367	19 280	16 324	14 064

Source: Labour Market Board

Table 14. Number of participants in active labour market measures, 2000, 2002 and 2004–2007

	2000	2002	2004	2005	2006	2007
Labour market training	8 156	10 021	6 968	9 852	7 073	5 503
Community placement	3 954	453	353	188	–	–
Business start up subsidy	441	375	296	320	289	141
Wage subsidy to employer to employ a less competitive unemployed person	189	230	441	727	238	127
Career counselling	2 055	8 130	7 877	9 494	8 356	8 272
Public work	–	–	–	–	170	231
Work exercise	–	–	–	–	446	1 208
Work practice	–	–	–	–	676	792
Total measures for disabled people:	–	–	–	–	109	60
employed with working place adjustment	–	–	–	–	1	2
special aids and equipments	–	–	–	–	5	3
working with support person	–	–	–	–	60	30
communication support at interviews	–	–	–	–	43	25

Source: Labour Market Board

Table 15. Receivers of unemployment benefit and unemployment insurance benefit, 2000, 2002 and 2004–2007

	2000	2002	2004	2005	2006	2007
Number of receivers of unemployment benefit during the year	67 412	56 895	39 338	31 347	20 086	17 769
Number of receivers of unemployment benefit, average per month	26 564	23 544	14 417	11 594	6 188	5 934
Number of receivers of unemployment insurance benefit during the year	–	–	14 888	12 238	8 990	8 011
Males	–	–	6 040	4 719	3 164	2 858
Females	–	–	8 848	7 519	5 826	5 153
Number of receivers of unemployment insurance benefit, average per month	–	–	5 356	4 270	3 022	3 053
Receivers of a benefit for collective termination of employment contracts	–	–	3 999	2 462	1 593	2 448
Receivers of benefit for the employer's insolvency	–	–	2 844	2 203	1 256	1 173

Source: Labour Market Board, Unemployment Insurance Fund

Table 16. Amount of unemployment benefit and average unemployment insurance benefit per month, 2000 and 2003–2007 (EEK)

	2000	2003	2004	2005	2006	2007
Unemployment benefit	400	400	400	400	400	1 000
Unemployment insurance benefit	–	1 837	1 998	2 116	2 416	2 857
Males	–	2 153	2 329	2 533	3 009	3 585
Females	–	1 641	1 768	1 851	2 081	2 455

Source: Labour Market Board, Unemployment Insurance Fund

Table 17. Expenditures on labour market policy, 2000, 2002 and 2004–2007 (millions of EEK)

	2000	2002	2004	2005		2006		2007	
				Total	incl. foreign aid	Total	incl. foreign aid	Total	incl. foreign aid
Total of expenditures on passive labour market policy	220,5	129,3	64,5	52,7	–	38,8	–	83,6	–
Unemployment benefit	119,8	104,1	55,0	42,5	–	24,7	–	52,3	–
Social tax for the unemployed paid from state budget	100,7	25,2	9,5	10,2	–	14,1	–	31,3	–
Total of expenditures on active labour market policy	65,8	88,4	102,2	207,2	92,5	233,8	114,9	225,7	83,9
Active labour market measures	47,9	61,9	64,7	96,1	37,7	108,6	47,0	77,7	3,4
Labour market services	37,5	50,6	51,1	76,9	32,3	87,0	42,0	62,0	3,2
incl. labour market training	32,2	47,5	41,7	62,7	28,7	71,0	34,9	43,9	3,1
employer subsidy	2,1	3,1	9,4	14,2	3,6	7,5	3,6	1,8	0,1
work practice	–	–	–	–	–	5,2	2,7	5,6	0,1
work exercise	–	–	–	–	–	2,4	0,2	9,8	0,0
community placement	3,2	–	–	–	–	–	–	–	–
workplace adjustment and technical aid	–	–	–	–	–	–	–	0,1	–
free use of technical aid	–	–	–	–	–	–	–	0,2	–
assistance at a work interview	–	–	–	–	–	–	–	0,0	–
working with support person	–	–	–	–	–	0,9	0,6	0,7	–
Support to unemployed person	10,4	11,3	13,6	19,2	5,4	21,6	5,0	15,7	0,2
incl. grants	6,1	7,1	7,8	10,3	2,3	9,8	2,8	7,5	0,1
transport and accommodation benefit	–	–	–	–	–	5,3	1,1	5,5	0,1
subsidy for starting a business	4,3	4,2	5,8	8,9	3,1	6,5	1,1	2,7	–
Equal projects	–	–	–	8,9	6,7	27,5	22,0	22,6	16,9
ESF measure 1.3 projects (partners)	–	–	–	23,9	23,9	33,0	30,2	57,7	57,7
Administrative expenses	17,9	26,4	37,5	78,3	24,2	64,7	15,7	67,7	5,9
Total expenditure of labour market policy	286,3	217,7	166,7	259,9	92,5	272,6	114,9	309,3	83,9
incl. active labour market policy, %	23,0	40,6	61,3	79,7	..	85,8	..	73,0	..
Proportion of labour market policy expenditures of GDP	0,31	0,15	0,11	0,15	..	0,13	..	0,13	..

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 accidents¹ or occupational diseases² 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 situation of working environment, Estonian data is compared to the average data of the former member states of the European Union (hereafter EU-15) by all mentioned indicators. Sources used are Eurostat database and Labour Inspectorate's reports.

While number of occupational accidents in EU-15 shows a continuous trend of decrease, then in Estonia, the number of registered occupational accidents is quite stable. It has to be considered in the comparison that the methodology of gathering data is different, while in Estonia, registration of occupational accidents takes place on the basis of employers' reports, then the statistics of EU-15 occupational accidents is based on insurance data in case of 10 countries and weighted average of employers' reports in case of 5 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 the number of unreported occupational accidents in Estonia and change the number of occupational accidents in Estonia more comparable to the other European Union countries.

Since 2004, the absolute number of registered occupational accidents has shown a constant increasing trend. In 2007, 3,707 occupational accidents were registered, which is 2% more than in 2006. Throughout years, the number of occupational accidents happening to men has been about twice as large than the number of occupational accidents happening to women. By field of activities, in Estonia there are more than

¹ Occupational accident is health damage or death which occurred while performing work task given by employer or any other work performed on the authorization of employer, during the break included in the working time or other time when performing for the benefit of employer.

² Occupational disease is a disease which has been caused by working hazard or type of work listed in the list of occupational diseases.

average occupational accidents per 100,000 workers in the fields of agriculture, processing industry and construction.

In international statistics, comparison between countries is based on days of incapacity for work. These occupational accidents which result in more than 30 days of incapacity for work are considered to be severe. Distribution of occupational accidents in Estonia by days of incapacity for work shows approximately 10% increasing trend of severe occupational accidents in the recent years.

When comparing Estonian working environment situation to other European countries, it is reasonable to use statistics of fatal occupational accidents, for there is no problem occurring with unreported instances. In comparison to the European average, the number of fatal occupational accidents in Estonia per 100,000 workers has been considerably higher. While the number of deaths in EU-15 has been in the range (2.7–2.3) in the 5 recent year, in Estonia, the corresponding figures are (5.2–3.2).

Considering the smallness of Estonia, there are generally few deaths, and the dependence of statistics of a single occupational accident is therefore larger. On the basis of fatal accidents, processing industry and construction are the most dangerous fields. As in drawing conclusions, proportions per 100,000 workers should be used instead of absolute figures, then the first place in the statistics of fatal occupational accidents is taken up by public administration (see table 3). This does not definitely mean that public administration would be the most dangerous field of activity, but that all four fatal accidents that happened in public administration were connected to a group traffic accident.

Occupational disease is health damage which is directly 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 casualty is entitled to compensation of damages by the employer. In comparison to EU-15 occupational disease trends, a clear underregistration of occupational diseases occurs in Estonia.

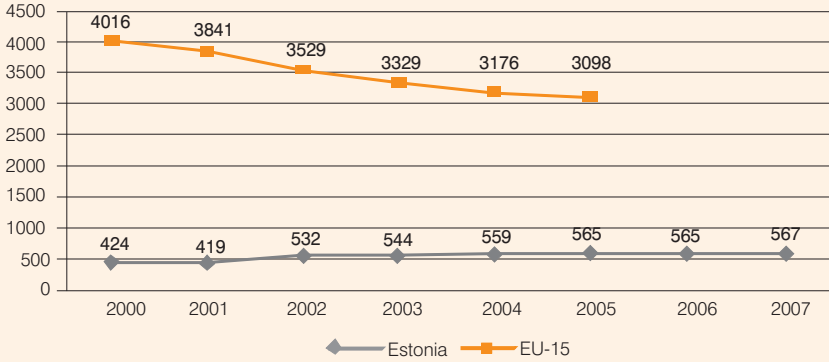
Pursuant to Occupational Health and Safety Act, occupational disease is diagnosed by occupational health doctor, who, in order to do this, collects data about worker's present and previous working conditions and type of work.

The reasons for underregistration of occupational diseases are related to:

- lack of occupational health doctors;
- financing problems of diagnosis of occupational diseases, due to which the diagnosis has been centred in to larger hospitals;
- occupational health services provided by occupational health doctor are not listed in the list of health care services of Health Insurance Fund;
- employers' general attitude towards activities related to diagnosis of occupational diseases, difficulties in relating worker's disease with working environment hazards and type of work, for factual evidence is often deficient or lacking.

In 2007, 74 first diagnoses of occupational diseases were registered in Labour Inspectorate, which 43 less than in 2006. Number of occupational diseases was somewhat larger among women. By professions, most occupational diseases were diagnosed on skilled agricultural workers and drivers of powered mechanisms. By fields of activity, considering statistics of occupational diseases, the most dangerous ones are agriculture and construction; and from the processing industry, food production, furniture and timber industry.

Figure 1. Occupational accidents per 100,000 workers, 2000–2007



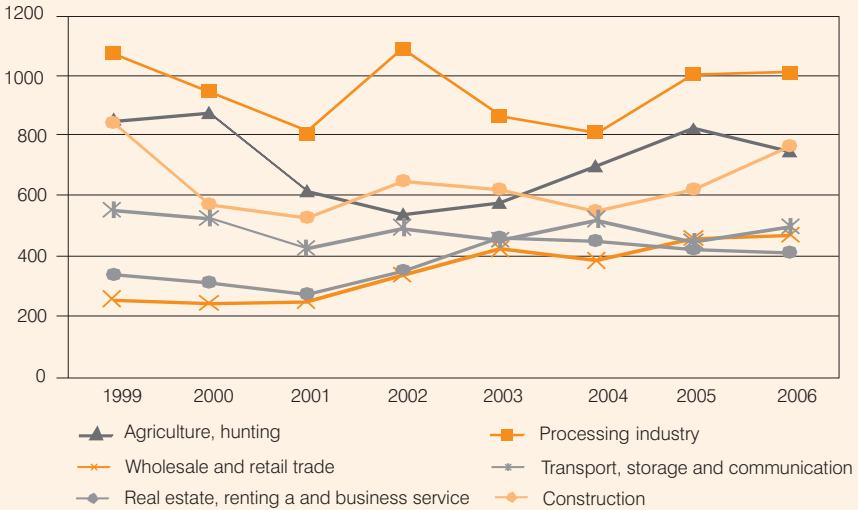
Source: Labour Inspectorate; Eurostat

Table 1. Number and proportion of occupational accidents by sex, 2000, 2002 and 2004–2007

	2000	2002	2004	2005	2006	2007
Total	2 965	4 033	3 331	3 431	3 653	3 707
Males, %	67,0	62,0	70,0	68,0	69,1	68,0
Females, %	33,0	38,0	30,0	32,0	30,9	32,0

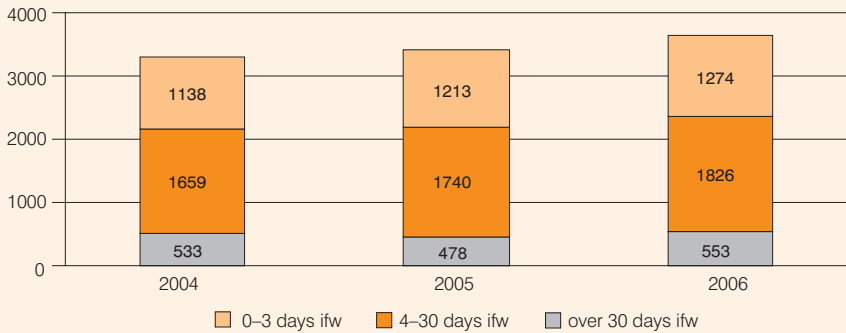
Source: Labour Inspectorate

Figure 2. Occupational accidents per 100,000 workers by most dangerous fields of activity, 1999–2006



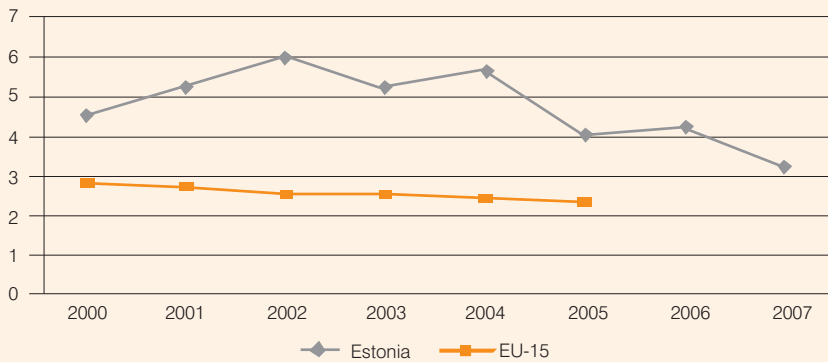
Source: Labour Inspectorate

Figure 3. Number of occupational accidents by days of incapacity for work, 2004–2006



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

Figure 4. Number of fatal occupational accidents per 100,000 workers, 2000–2007



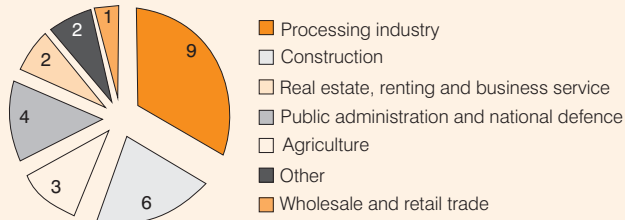
Source: Labour Inspectorate; Eurostat

Table 2. Number of fatal occupational accidents, 2000, 2002 and 2004–2007

	2000	2002	2004	2005	2006	2007
Total	27	39	34	24	27	21
Males, %	92,6	89,7	70,6	83,3	81,5	100
Females, %	7,4	10,3	29,4	16,7	18,5	–

Source: Labour Inspectorate

Figure 5. Distribution of 27 fatal occupational accidents in 2006 by field of activity



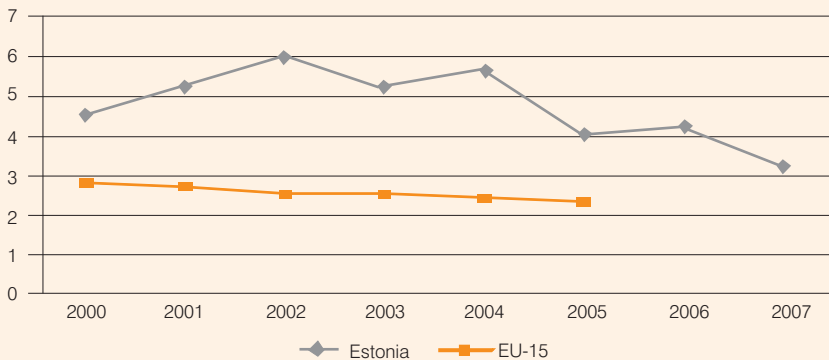
Source: Labour Inspectorate

Table 3. Number of fatal occupational accidents per 100,000 workers by fields of activity, 2000, 2002 and 2004–2006

	2000	2002	2004	2005	2006
Agriculture, hunting, fishing	8	8	6	3	7
Processing industry	7	6	4	4	6
Energy, gas and water supply	20	–	17	8	–
Construction	8	23	11	2	9
Wholesale and retail trade	3	6	3	5	1
Hotels and restaurants	–	–	12	–	–
Transport, storage, communication	9	9	14	11	–
Financial intermediation	–	–	–	29	–
Real estate, renting and business service	–	5	11	2	6
Public administration and national defence	–	6	8	–	10
Education	–	–	2	–	–
Healthcare and social work	–	–	–	3	–
Other	4	3	4	7	5

Source: Labour Inspectorate

Figure 6. Number of occupational diseases per 100,000 workers in the European Union and Estonia, 2000–2007



Source: Labour Inspectorate, Eurostat

Table 4. Number of persons diagnosed with occupational disease for the first time, 2000, 2002 and 2004–2007

	2000	2002	2004	2005	2006	2007
Total	296	117	132	94	117	74
Males, %	...	62,4	55,3	54,3	45,6	41,9
Females, %	...	37,6	44,7	45,7	54,4	58,1

Source: Labour Inspectorate

Gender equality

Gender equality means equal rights, obligations 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 gender mainstreaming principle. That is, as many possible indicators in different chapters would be distinguished by gender as possible and therefore would enable to compare 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 working 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. However, this indicator has increased by each election. In 2007, the proportion of women among the members of 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. Riigikogu elections in 2007 demonstrated a positive trend in the representation of women: in comparison to previous parliament elections in 2003, the proportion of women among candidates increased from 21% to 27%. Despite the fact that the proportion of female candidates in election lists has increased, their "value" as vote collectors for parties is continuously smaller in comparison to male candidates. While in Riigikogu election in 2007, a female candidate collected 456 votes on the average, then male candidate collected 605 votes, which means on the average 149 votes more¹.

Similarly to other developed countries, men and women in Estonia are also employed in different fields of activities and professions. Women are traditionally dominant in the fields of activity and professions which are not very highly valued in society (for instance in education field as kindergarten teachers, teachers; or in welfare services, 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 in managerial positions is also considerably smaller compared to men. Although among midlevel specialists and professionals (including for instance also all teachers with higher education), there are approximately 75% of women, men are still dominating among managers, senior officials and legislators. According to EUROSTAT, gender segregation of labour market (i.e segregation of profession and field of activity by gender in Estonia in 2006) was the highest in the European Union.

Gender segregation of labour market has in turn considerable effect on wage gap. During the whole period of re-independence, the average hourly gross wages of women

1 National Electoral Committee

has been almost 25% smaller than that of men. Difference between average hourly gross wages in Estonia is considerably larger than the European Union average and according to data of 2006, wage difference of men and women in Estonia was the largest in comparison to other European Union member states.

From the gender equality perspective, reconciliation of work and family life is also very important – both distribution of housework and parents' employment are hereby vivid examples. 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). When employment rate of women without small children in 2006 was 80.5% then employment rate of women with small children at the same time was only 54.5%. This figure indicates that mothers of children aged 0–6 often choose not to participate in employment at all. At the same time, in case of men, small children are rather a factor contributing to employment – employment rate of fathers of small children was somewhat higher (in 2006, 93%) than employment rate of childless men (in 2006, 81.7%). 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 Estonia is traditional. According to population survey conducted in 2005, in families with two parents with children aged under 18 years, women mainly do the daily, routine and time-consuming housework. In families women are mostly responsible for maintenance of clothes, cooking, shopping, cleaning rooms 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.

Education is also an important resource that is accessed differently by gender. Although basic education is compulsory in Estonia, the school drop-out rate is relatively high in Estonia (in the academic year, 0.8% of students acquiring basic education quit their education). It has to be noted, however, that those, who leave formal education before passing the minimum school-leaving age form a recognisable minority. The average age of boys when discontinuing their school life in 2006/2007 was 17.17 years and the corresponding age of girls was 16.02 years. However, majority of drop-outs are boys, who might, but may not continue their education anymore and whose future in the labour market and coping in further life are therefore problematic. Girls cope better at school and are in strong majority, first and foremost among students on the higher level of education.

Educational system reflects the gender stereotypes valid in the society also in specialty choices of young men and women. Gender division of broad groups of study is also apparent in the fact that male and female students study so-to-say developed male and female specialties, which is also reflected in the latter gender division of labour market. By broad groups of study, for instance in 2006/2007, most female students studied in the field of education (92%) and health and welfare (90%), the smallest proportion of female students was in the field of technology, production and construction (26%).

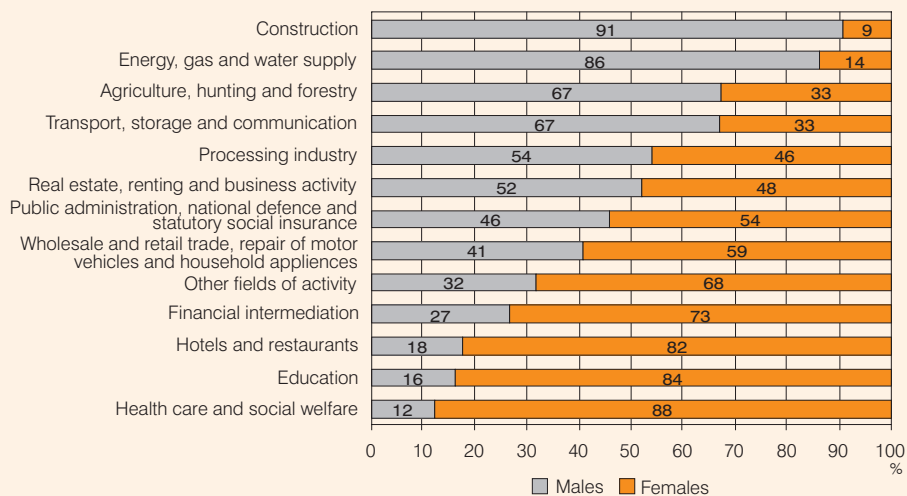
Employment

Table 1. Candidates for Riigikogu and elected parliamentaries by sex, 1992, 1995, 1999, 2003 and 2007

	1992	1995	1999	2003	2007
Candidates for Riigikogu, total	629	1 256	1 884	963	975
Males, %	86	82	73	79	73
Females, %	14	18	27	21	27
Elected, total	101	101	101	101	101
Males, %	87	88	82	81	76
Females, %	13	12	18	19	24

Source: National Electoral Committee

Figure 1. Employed by field of activity and sex, 2007 (%)



Source: Statistis Estonia

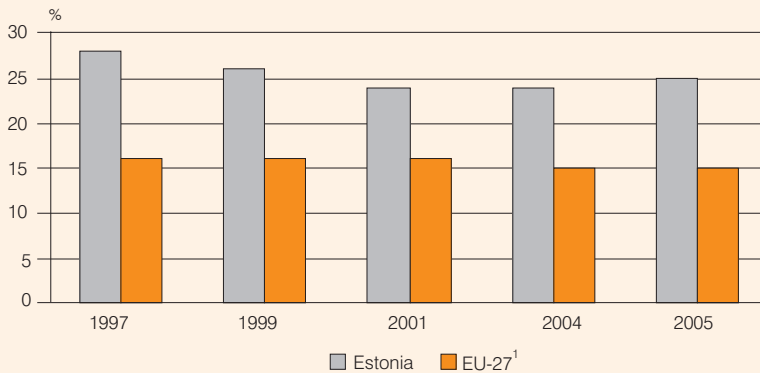
Figure 2. Employed by occupation and sex, 2007 (%)



¹ Professionals include all education workers with higher education (incl. e.g. kindergarten teachers).

Source: Statistics Estonia

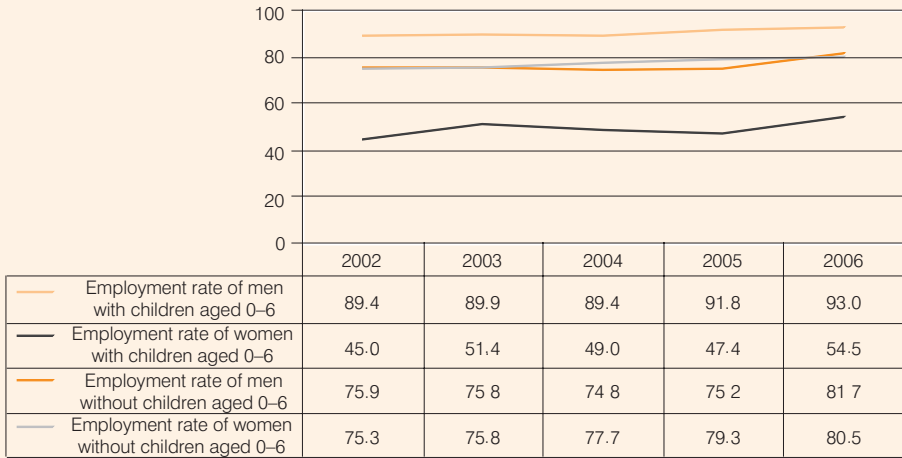
Figure 3. Wage gap: difference in average hourly gross wages for men and women in Estonia and in the member states of the European Union on the average, 1997, 1999, 2001, 2004–2005



¹ In the observed year, member states include all 27 countries that have joined with the European Union by 2007.

Source: Eurostat

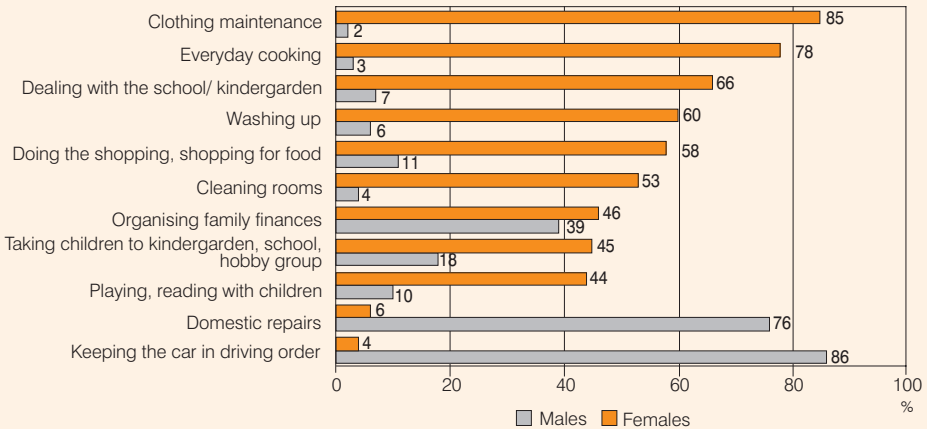
Figure 4. **Employment impact on parenthood: employment rate of men and women aged 20–50 with and without small children (aged 0–6), 2002–2006**



Source: Statistics Estonia

Attitudes

Figure 5. **Gendered distribution of housework in families with two parents and at least one child aged under 18, 2005** Question: „Who in your family is responsible for the following housework?” Options: “Mostly I”. Proportion of families where the corresponding housework exists. (%)



Source: Ministry of Social Affairs, Gender equality monitoring survey 2005

Education

Table 2. School drop-out: Persons leaving school on the basic education level (1–9 grade) by gender, 1999–2007

Academic year	1999/2000	2000/2001	2001/2002	2002/2003	2005/2006	2006/2007
Total	998	1 025	907	1 145	946	963
Boys, %	72	74	74	74	71	71
Girls, %	28	26	26	26	29	29

Source: Estonian Education Information System

Table 3. Graduates on higher education level, academic year 2006/2007

Education level	Total	Males, %	Females, %
Professional higher education	3 943	29	71
Diploma study	554	38	62
Bachelor's study	5 462	34	66
Integrated bachelor's and master's study (3+2)	358	20	80
Master's study	2 129	29	71
Doctoral study	153	48	52
Total of education level	12 599	33	67

Source: Statistics Estonia

Table 4. Gender segregation of higher education: Proportion of female students by broad group of studies, 2000–2007 (%)

Group of study and academic year	2000/2001	2002/2003	2004/2005	2005/2006	2006/2007
Education	88	88	89	90	92
Health and welfare	86	87	89	89	90
Humanities and art	75	75	76	75	74
Social studies, business and law	61	63	65	65	66
Agriculture	46	50	52	53	52
Services	44	49	50	51	52
Science	39	39	39	39	38
Technology, production and construction	29	28	27	27	26

Source: Statistics Estonia

Health care

There are quite numerous important legislative acts organizing activities in the field of health.

The aim of Public Health Act is to protect people's health, prevent diseases and promote health. This is achieved by obligations of state, local governments, legal persons governed by public and private law and natural persons, and with the measurement systems of state and local governments. Communicable Diseases Prevention and Control Act governs organisation of control of communicable diseases and procedure of providing health care service for infected persons, and provides obligations to prevent and control communicable diseases. 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 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.

Health care is financed from funds designated for health insurance in the state budget via the Health Insurance Fund, as well as with direct allocations from the state budget, municipal and city budgets, by patients 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 principle of providing services according to needs of insured people, equal regional access to health care and intended use of contributions to health insurance. Employers are obligated to pay social tax for employees, 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

state¹ or by themselves, as well as equivalent persons under the Health Insurance Act for whom social tax is not paid:

- 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 established and operating under legal acts 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 the 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 and nursing care 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 Estonian Health Insurance Fund's list of health services and are provided by health service providers with whom the Health Insurance Fund has concluded an agreement for financing treatment. For adults, the Health Insurance Fund retrospectively generally compensates 300 EEK of the cost of dental care a year, starting from 2007.

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. Since 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 80% in case of illness, 100% in case of childbirth, occupational injury and caring for a sick child under 12 years of age at home. Benefits are paid for various periods – 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, and generally for up to 182 days in case of illness and occupational accident. In case of certificates for sick leave, benefits are paid starting from the second day of the leave and in case of certificates for maternity leave and care leave, starting from the first day.

¹ The state pays social tax for the following persons: recipient of parental benefit; recipients of child care allowance; recipients of benefit for parents of families with seven and more children; persons who are paid caregiver's allowance pursuant to the Social Benefits for Disabled Persons Act until the persons attain pensionable age; employees with loss of capacity for work of 40% or more in certain cases; non-working accompanying spouses of diplomats and public servants serving in foreign missions of Estonia, until attaining pensionable age; conscripts in compulsory military service in the Defence Forces; non-working persons who have participated in the elimination of the effects of a nuclear disaster, nuclear test, or an accident at a nuclear power station, until attaining pensionable age; recipients of unemployment benefit; Estonian citizens or persons of Estonian nationality who have settled in Estonia from a foreign country and receive social benefits under the Social Welfare Act, and their spouses, children and parents. The Unemployment Insurance Fund pays the social tax for persons receiving unemployment insurance benefit.

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

The provision of ambulance services and the provision of emergency care to uninsured persons, as well as the formation, preservation and renewal of national security reserves of medicines 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 and the preparedness to provide health care services in emergency situations is financed from the state budget via the Ministry of Social Affairs. 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 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 Ministry of Social Affairs² and data from the Health Protection Inspectorate, the Tuberculosis Registry, the Cancer Registry and the Estonian Health Insurance Fund. The data of text mostly compares summaries of 2006 to data from 2000.

At the end of 2006, 1,304 legal persons (i.e. institutions) provided health services in Estonia, whereas the proportion of private section 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. Whereas only third of hospitals belong to private sector, in case of providers of family doctor service, the percentage is almost 100% and of dental care institutions, 99%.

The number of doctors and nurses per 10,000 inhabitants has slightly increased in 2006 in comparison to 2000. There were 31.0 doctors per 10,000 inhabitants in 2000 and 32.7 in 2006; the corresponding figures for nurses are 62.3 and 65.6. Number of nursing specialists per one doctor in the observed time period has been around 2. It appears from the age distribution of health care professionals that characteristic features are large proportion of older doctors and few young doctors and nurses.

Number of dentists has increased during the past six years by 15%. In 2006, there were 8.9 dentists per 10,000 inhabitants (7.6 in 2000).

There is an increasing trend in using outpatient health care services; this is evident by the increasing number of outpatient visits and day-care cases. 8.5 million doctor's outpatient consultations in 2006 results in average 6.3 consultations per person per year. Number of day-care cases has increased two times by 2006 in comparison to 2000.

² The annual statistical data on health care services is made available on the Ministry's website (at www.sm.ee under "Public health"). If no other reference to source materials has been provided, the data is collected and processed by the Ministry of Social Affairs.

Larger changes can be seen in the development of nursing care. Number of independent consultations made by nursing specialists per 100 persons increased to 31 in 2006. Wider spread of home nursing and care services has increased the number of home visits by nursing specialists. In comparison to 2004, the number of home visits has doubled, reaching to 196,000 in 2006. Number of home visits of nursing specialists per 100 persons has increased from 1 in 2000 to 15 in 2006.

Based on the data of interview surveys, not only the number of outpatient visits has increased, but also the proportion of population using health care services. In 2006, 66% of adults visited a family doctor, 45% a specialist doctor and 48% a dentist. After dental care of adults was made chargeable in 2001, the number of people visiting dentists showed a decreasing trend, reaching the minimum in 2003. In years 2001–2003, the proportion of adults using dental care from the population dropped from 42% to 32%. In the following years, with the improved economic situation, the possibilities for people to take care of their dental health have improved also.

Decrease of hospital beds has taken place, accompanied by shortening of average length of stay and increase of bed turnover. Although the number of hospital beds has decreased by 23% by the end of 2006 in comparison to the end of 2000, the number of hospitalized persons per 1,000 inhabitants has decreased slightly under 10%.

While in 2000, 204 persons per 1,000 inhabitants received hospital care and additionally 15 persons received day care (219 in total), then in 2006, 188 persons received hospital care and 34 persons day care per 1,000 inhabitants (222 in total).

The number of active care (or short-term care) beds has decreased by almost 30% in six years. In 2006, there were 39 active care beds per 10,000 inhabitants, in 2000, the corresponding number was 56.

Among long-term care beds, in comparison to 2000, there has been decrease in the numbers of psychiatry beds (35%) and tuberculosis beds (15%). The number of nursing care beds per 10,000 inhabitants aged 65 and older has on the other hand increased in the observed period from 40 to 56, which still does not meet all the needs (aim set for the year 2015 is 100). The change is also visible in the structure of hospital beds: while in 2000, nursing care beds formed 8% of the total number of beds, then in 2006, the corresponding proportion was 17%.

Number of new cases of tuberculosis in the observed period has continuously decreased, which characterises the efficient work of national tuberculosis programs (1998–2003, 2004–2007). Resulting from this, the number of new cases has decreased to half of the level of 1997–1998, that means 30 incident cases per 100,000 inhabitants.

While several infectious diseases show a decreasing trend, the number of new notified HIV cases does not fall. After having peaked in 2001 (when 1,474 new cases were registered), the annual number of new cases in years 2005–2007 has been on the level of 50 per 100,000 inhabitants. In 2007 633 new notified HIV cases were registered. On 1 December 2005, the government confirmed national strategy of HIV and AIDS for years 2006–2009. The general aim of the strategy is to achieve a stable decreasing trend in the spread of HIV virus and to prevent a widespread epidemic in the general population by implementation of measures.

Number of new cancer cases has fluctuated around 6,000 in recent years. As at 31 December 2003, there were estimably 35,384 people (12,066 men and 23,318 women)

diagnosed with some kind of malignant tumour. In 2007, national cancer strategy for the years 2007–2015 was confirmed.

Rapid economic growth in recent years which has increased employment rate has also increased the proportion of employed persons among insured persons to 51% at the end of 2006. Still, 5% of the population is uninsured. These are mostly people who do not work or receive unofficial wages, and also people who earn their income abroad.

Compared to 2000, of the health insurance expenditure, reimbursement of medicinal products have increased the most, and of monetary benefits, maternity benefits and nursing benefits have also increased. Structural change of benefits is exemplified for instance by increase of proportion of medicinal products in 2002, which has fell afterwards, and increase of proportion of monetary benefits from 17.6% in 2002 to 19.9%, this is mostly due to sickness and maternity benefits.

The total health expenditure formed 5% of GDP in 2005 and 2006. The proportion of national health insurance was 62.5% in 2006 and health expenditure of national budget formed 9.4% of total health expenditure. Local governments expended 1.8% and the contribution of households (that means people) was 23.8%. Thereat, the proportion of households in total health expenditure is increasing.

Medical Care

Table 1. Providers of health care service, 2000, 2002 and 2004–2006 (at the end of the year)

Type of institution ¹	2000	2002	2004	2005	2006
Total hospitals	68	51	51	54	55
regional hospital ²	..	3	3	3	3
central hospital ³	..	4	4	4	4
specialised hospital	11	5	6	6	7
general hospital	39	24	12	12	12
local hospital	..	..	5	6	6
rehabilitation hospital	..	2	4	3	3
nursing care hospital	12	13	17	20	20
other	6	–	–	–	–
Outpatient medical care institutions	540	625	715	732	732
general medical care praxises	367	439	482	498	486
incl. family doctor praxises	292	435	473	486	473
specialised medical care praxises	173	186	233	234	246
Dental care institutions	364	384	443	451	453
Emergency care institutions⁴	7	7	7	5	5
Nursing care institutions⁵	..	..	8	14	12

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

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 care institutions, emergency units also exist as subunits of other health care institutions (generally hospitals). At the end of 2006, there were 19 such emergency units and a total of 24 emergency care service providers.

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

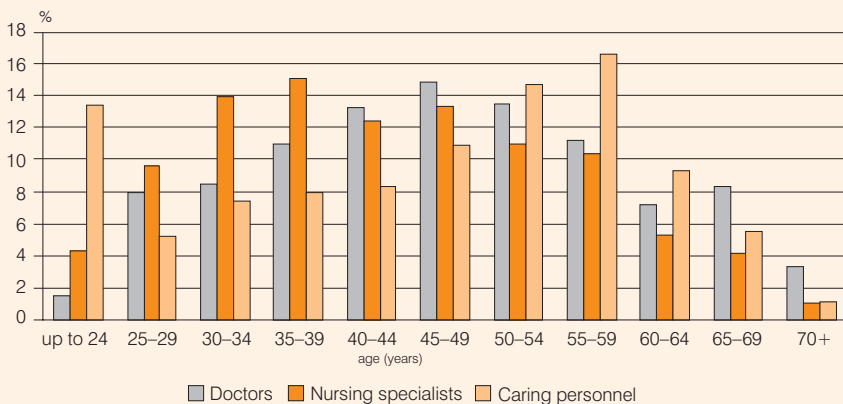
Table 2. Practising health care professionals¹, 2000, 2002 and 2004–2006 (at the end of the year)

	2000	2002	2004	2005	2006
Doctors²	4 233	4 268	4 312	4 294	4 393
incl. family doctors	448	701	818	845	853
Dentists²	1 041	1 078	1 166	1 202	1 196
Pharmacists	815	754	845	851	869
Nursing specialists and other graduates of medical school	9 916	10 028	10 608	10 699	10 833
nursing specialists	8 517	8 725	8 676	8 845	8 803
nurses	8 010	8 303	8 270	8 421	8 359
midwives	507	422	406	424	444
other health care professionals ³	1 399	1 303	1 932	1 854	2 030
dispensing chemists	...	...	587	593	582
Health care professionals per 10 000 inhabitants					
doctors	31,0	31,5	32,0	31,9	32,7
incl. family doctors	3,3	5,2	6,1	6,3	6,4
dentists	7,6	7,9	8,7	8,9	8,9
pharmacists	6,0	5,6	6,3	6,3	6,5
nursing specialists and other graduates of medical school	72,5	74,0	78,7	79,6	80,7
nursing specialists	62,3	64,3	64,4	65,8	65,6
nurses	58,6	61,2	61,4	62,6	62,3
midwives	3,7	3,1	3,0	3,2	3,3
other health care professionals ³	10,2	9,6	14,3	13,8	15,1
dispensing chemists	...	...	4,4	4,4	4,3

1 Doctor, dentist, nurse and midwife when they are working in their specialty and are registered in Health Care Board. Health care professionals can provide health care services in 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 with residents and interns.

3 Other mid-level health care and care professionals with professional education; from these, dispensing chemists have been presented separately for in years 2003–2006.

Figure 1. Health care personnel by age¹, March 2007

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

Table 3. Average total monthly wages of health care professionals¹, by type of service provider, 2004–2006

		Total	Hospital	Outpatient medical care		Dental care	Other ²
				general	specialised		
Total	2004	7 854	7 980	7 759	8 665	8 244	5 756
	2005	9 680	9 776	10 047	10 149	9 670	8 017
	2006	11 152	11 245	11 493	12 165	11 061	8 919
doctors incl. managers	2004	15 397	17 411	11 775	12 290	12 166	11 335
	2005	18 607	20 409	14 815	15 260	...	15 932
	2006	21 671	23 715	16 773	18 566	...	19 314
doctors	2004	14 839	16 585	11 481	11 931	...	11 453
	2005	17 971	19 202	15 116	15 568	...	19 557
	2006	20 891	22 449	16 533	18 736	...	19 659
dentists incl. managers	2004	12 154	16 939	9 543	13 818	11 382	–
	2005	13 519	18 032	...	15 322	12 732	6 209
	2006	16 204	22 206	...	23 227	14 891	19 977
dentists	2004	12 123	16 746	9 421	13 820	11 291	–
	2005	13 885	17 490	...	15 322	13 180	7 399
	2006	17 081	21 548	...	23 153	15 853	19 977
nurses incl. managers	2004	6 845	7 186	5 146	7 164	6 179	6 590
	2005	8 653	9 291	7 043	7 295	7 035	6 767
	2006	9 797	10 417	8 259	9 109	8 317	7 591
nurses	2004	6 756	7 083	5 145	7 036	6 100	6 528
	2005	8 498	9 112	7 021	7 174	6 955	6 603
	2006	9 588	10 195	8 236	8 809	8 187	7 309
midwives	2004	7 654	7 788	6 066	6 545	–	–
	2005	9 850	10 052	8 427	7 740	–	–
	2006	10 736	10 854	7 234	9 675	–	–
carers and other assistant personnel	2004	4 199	4 334	3 900	4 533	4 578	2 957
	2005	5 203	5 146	3 957	5 392	5 273	6 059
	2006	6 105	6 048	6 577	6 263	5 953	7 125

1 On the basis of economic activity reports. Regular and irregular additional remuneration for the non-working time, remuneration in kind (expenses that the employer compensates to the employees) and self-employed person's annual income calculated per one month have been added to the wages for worked time. Sickness benefit paid by the employer is included in the total wages of 2004. 2005–2006 have been excluded. In calculating monthly wages for 2005, the full working time is taken to be 169.25 hours, for anaesthesiologists, intensive care and anaesthesia-intensive care nurses, operation nurses, pathologists 148.75 hours and radiologist (incl. residents), radiology nurses and radiology technicians 127.5 hours. In 2006, accordingly 168.85, 148.2 and 127 hours.

2 Emergency aid, rehabilitation care and diagnostics institutions and blood centres.

Table 4. Average number of health care professionals per year¹, reduced to full working time, by type of service provider, 2004–2006

		Total	Hospital	Outpatient medical care		Dental care	Other ²
				general	specialised		
Total	2004	24 094	17 230	2 196	1 361	2 057	1 250
	2005	24 557	17 403	2 162	1 374	2 053	1 565
	2006	22 658	15 739	2 209	1 322	2 036	1 352
doctors incl. managers	2004	4 157	2 669	956	366	4	162
	2005	4 114	2 729	836	362	1	186
	2006	3 825	2 449	869	344	1	162
doctors	2004	3 610	2 417	730	315	2	146
	2005	3 566	2 418	677	310	1	160
	2006	3 321	2 190	703	284	1	142
dentists incl. managers	2004	1 141	168	6	51	916	–
	2005	1 108	158	2	58	886	3
	2006	1 063	124	2	56	878	3
dentists	2004	959	165	5	49	741	–
	2005	970	150	2	57	758	3
	2006	871	117	2	54	695	3
nurses incl. managers	2004	7 881	5 760	890	359	464	408
	2005	7 799	5 509	947	365	493	485
	2006	7 314	5 034	1 000	353	473	454
nurses	2004	7 615	5 566	866	341	453	388
	2005	7 455	5 251	909	349	476	469
	2006	6 939	4 753	969	334	460	423
midwives	2004	323	292	7	24	–	–
	2005	325	292	8	25	–	–
	2006	296	267	4	25	–	–
carers and other assistant personnel	2004	3 982	3 568	8	38	149	220
	2005	4 031	3 602	6	44	152	226
	2006	3 850	3 426	10	49	160	205

1 On the basis of economic activity reports.

2 Emergency aid, rehabilitation care and diagnostics institutions and blood centres.

Table 5. Outpatient medical care, 2000, 2002 and 2004–2006

	2000	2002	2004	2005	2006
Number of visits, thousand					
Outpatient visits to doctors	8 151	7 967	8 303	8 408	8 496
incl. visits to family doctor	1 972	3 615	3 935	4 043	4 166
Home visits by doctors	503	292	178	158	143
incl. visits by family doctor	197	248	162	148	136
Average number of visits per one family doctor position	4 963	4 918	5 015	5 016	5 227
outpatient visits	4 512	4 602	4 816	4 839	5 062
home visits	451	316	199	177	165
Inhabitants per one family doctor position	3 127	1 727	1 652	1 611	1 632
Proportion of family doctor visits ¹ in the overall number of outpatient visits	24,2	45,4	47,4	48,1	49,0
Proportion of family doctor home visits ¹ in the overall number of home patient visits	39,2	85,0	91,3	93,8	95,1
Per 1 inhabitant a year					
Outpatient visits to doctors	6,0	5,9	6,2	6,2	6,3
incl. visits to family doctor	1,4	2,7	2,9	3,0	3,1
Home visits by doctors	0,4	0,2	0,1	0,1	0,1
incl. visits by family doctor	0,1	0,2	0,1	0,1	0,1

1 All family doctor visits and home visits, not visits and home visits of family health centres.

Table 6. Nursing care¹, 2000, 2002 and 2004–2006

	2000	2002	2004	2005	2006
Number of visits of nursing specialists, thousand					
outpatient visits	226	162	346	376	413
home visits	7	29	100	106	196
Per 1 inhabitant a year					
outpatient visits	0,17	0,12	0,26	0,28	0,31
home visits	0,01	0,02	0,07	0,08	0,15

1 In 2000 physicians assistant's (feldscher's) independent work, from 2002 independent outpatient and home visits by nursing specialist (nurse, midwife).

Table 7. Emergency aid, 2000, 2002 and 2004–2006

	2000	2002	2004	2005	2006
Number of persons who received emergency aid upon call, thousand	286	267	242	233	235
accidents ¹	35	39	39	37	37
illness ¹	178	187	200	194	195
transportation of sick persons and women delivering birth ¹	19	13	3	2	2
Total number of persons who received emergency aid, thousand	232	239	233	225	227
Number of persons who contacted emergency units themselves and received outpatient care	54	29	9	8	8
Total number of persons who received aid per 1,000 inhabitants	209	197	179	173	174
adults (15+)	217	207	188	180	182
children (0–14)	171	145	134	133	130

¹ Before 2004, the indicator has only been obtained among persons who received aid on upon call; that means without persons who contacted to emergency aid unit themselves.

Table 8. Dental care, 2000, 2002 and 2004–2006

	2000	2002	2004	2005	2006
Total number of visits to dentists, thousand	2 310	2 139	2 012	2 011	2 057
Dental care visits	1 891	1 728	1 658	1 634	1 679
Prostheses visits	298	281	236	241	254
Orthodontist visits	121	130	118	135	125
Number of visits to dentists per one inhabitant	1,69	1,58	1,48	1,49	1,53
number of dental care visits per one inhabitant	1,38	1,27	1,23	1,21	1,25
adults (15+)	1,31	1,16	1,09	1,08	1,12
children (0–14)	1,68	1,8	1,99	1,95	1,99

Table 9. Treatment at hospitals and in day-care (incl. day surgery) departments, 2000, 2002 and 2004–2006

	2000	2002	2004	2005	2006
Inpatient visits					
Hospital beds, end of the year	9 828	8 248	7 850	7 374	7 588
active care beds ¹	7 600	6 118	5 750	5 140	5 287
Hospital beds per 10,000 inhabitants	71,9	60,8	58,3	54,8	56,5
active care beds per 10,000 inhabitants	55,6	45,1	42,7	38,2	39,3
nursing care beds per 10,000 inhabitants aged 65+	39,9	44,6	49,0	55,0	56,2
Number of hospitalisations per year, thousand	279,5	259,8	258,8	246,5	252,9
Number of hospitalisations per 1,000 inhabitants	204,1	191,2	191,8	183,5	188,3
Average number of bed days ² per patient (ALOS)	9,2	8,5	8,0	7,9	7,8
Bed occupancy rate ³, %	...	...	72,6	72,2	74,1
Bed turnover ⁴	27,7	29,5	33,2	33,3	34,6
Day care (incl. day surgery)⁵					
Day care beds, end of the year	380	403	334	358	361
Day care beds per 10,000 inhabitants	2,8	3,0	2,5	2,7	2,7
Number of hospitalisations per year, thousand	21,0	29,5	35,4	37,7	45,6
Number of hospitalisations per 1,000 inhabitants	15,3	21,7	26,2	28,1	33,9

1 Active care (short-term care) beds – hospital beds, excluding nursing care beds, psychiatry beds and tuberculosis beds.

2 Average number of bed days = general number of bed days per year/number of people who have left hospital.

3 Proportion of days in year when hospital bed is occupied.

4 Number of hospitalised people per one hospital bed.

5 Operating in hospitals or outpatient facilities.

Figure 2. Distribution of hospital beds by specialty, 2000–2006

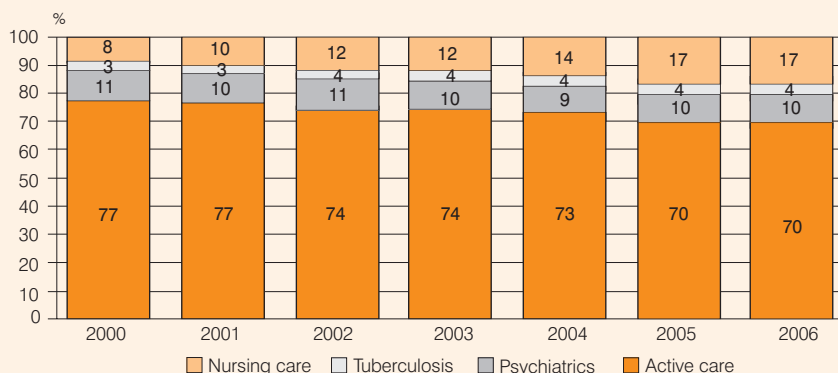


Figure 3. Changes in number of hospital beds compared to year 2000, 2001–2006

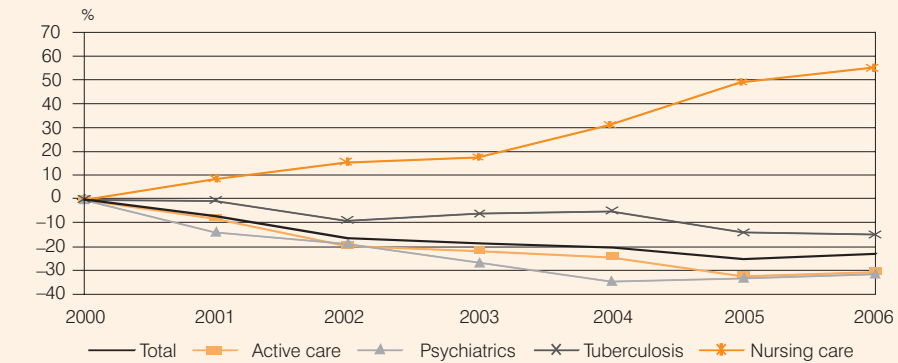


Table 10. Registered new cases of active tuberculosis, 2000, 2002 and 2004–2006

	2000	2002	2004	2005	2006
New cases of active tuberculosis	642	525	477	424	373
Males	448	348	330	274	253
Females	194	177	147	150	120
Incidence rate of active tuberculosis per 100,000 inhabitants	46,9	38,6	35,4	31,5	27,8
Males	70,9	55,6	53,1	44,2	40,9
Females	26,3	24,2	20,2	20,7	16,6

Source: Tuberculosis Registry

Table 11. Registered new cases of selected infectious and mainly sexually transmitted diseases, 2000, 2002 and 2004–2006

	2000	2002	2004	2005	2006
Pertussis	503	215	455	63	153
Males	219	83	185	28	61
Females	284	132	270	35	92
Tick-borne encephalitis	272	90	182	164	171
Males	149	52	83	81	87
Females	123	38	99	83	84
Acute viral hepatitis B	437	244	127	78	45
Males	319	172	76	54	29
Females	118	72	51	24	16
Acute viral hepatitis C	365	199	124	81	57
Males	265	148	82	60	42
Females	100	51	42	21	15
Incidence rate of C and B-hepatitis per 100,000 inhabitants	58,6	32,6	18,6	11,8	7,6
Syphilis	587	287	184	111	125
Males	242	111	39	42	39
Females	317	176	113	83	86
Urogenital chlamydial diseases	3 805	4 114	2 691	2 541	2 531
Males	1 308	1 353	604	518	507
Females	2 498	2 761	2 167	1 967	2 024
HIV infection	390	899	743	621	668
Males	312	632	497	389	429
Females	78	267	246	232	239
Incidence rate of HIV per 100,000 inhabitants	28,5	66,2	55,1	46,1	49,7
Males	49,4	100,9	80,0	62,7	69,3
Females	10,6	36,5	33,8	31,9	33,0
HIV disease (AIDS)	3	4	27	30	34
Males	3	4	17	15	24
Females	–	–	10	15	10

Source: Health Protection Inspectorate, Ministry of Social Affairs.

Table 12. Malignant neoplasms¹, 2000–2004

	2000	2001	2002	2003	2004	2005
Number of incident cases	6 013	6 018	5 833	6 038	6 386	6 061
Males	2 899	2 855	2 826	2 920	3 132	2 951
Females	3 114	3 163	3 007	3 118	3 254	3 110
Number of incident cases per 100,000 inhabitants	439,1	441,2	429,3	446,1	473,3	450,3
Males	459,0	453,9	451,2	468,2	503,9	476,0
Females	422,0	430,3	410,6	427,2	447,1	428,3

¹ Data for 2000–2004 are based on Cancer Register data as at 15.05.2007. The data is preliminary and there is no data on prevalent cases, because these have not been compared to Cause of Death Register of Statistical office due to absence of legal basis. The data will be specified by comparisons made after the launch of National Cause of Death Registry.

Source: Cancer Register

Table 13. Mortality by main causes, 2000, 2002 and 2004–2006

	2000	2002	2004	2005	2006
Total number of deaths	18 403	18 355	17 685	17 315	17 316
Males	9 265	9 369	9 067	8 833	8 853
Females	9 138	8 986	8 618	8 482	8 463
malignant neoplasms	3 365	3 426	3 463	3 479	3 533
Males	1 806	1 864	1 889	1 937	1 921
Females	1 559	1 562	1 574	1 542	1 612
diseases of the circulatory system	9 981	9 983	9 402	9 231	9 187
Males	4 295	4 338	4 127	4 078	4 107
Females	5 686	5 645	5 275	5 153	5 080
accidents, poisonings and traumas	2 093	2 009	1 766	1 659	1 628
Males	1 610	1 566	1 405	1 276	1 246
Females	483	443	361	383	382
Number of deaths per 100,000 inhabitants	1 343,8	1 351,0	1 310,7	1 286,3	1 288,8
Males	1 467,0	1 496,0	1 458,8	1 424,8	1 430,7
Females	1 238,3	1 227,0	1 184,2	1 168,1	1 167,7
malignant neoplasms	245,7	252,2	256,7	258,5	263,0
Males	286,0	297,6	303,9	312,4	310,5
Females	211,3	213,3	216,3	212,4	222,4
diseases of the circulatory system	728,8	734,8	696,8	685,8	683,8
Males	680,0	692,7	664,0	657,8	663,7
Females	770,5	770,8	724,8	709,6	700,9
accidents, poisonings and traumas	152,8	147,9	130,9	123,2	121,2
Males	254,9	250,1	226,1	205,8	201,4
Females	65,5	60,5	49,6	52,7	52,7

Source: Statistics Estonia

Figure 4. Number of deaths of persons aged 15–64 per 1,000 population by sex, 2000–2006

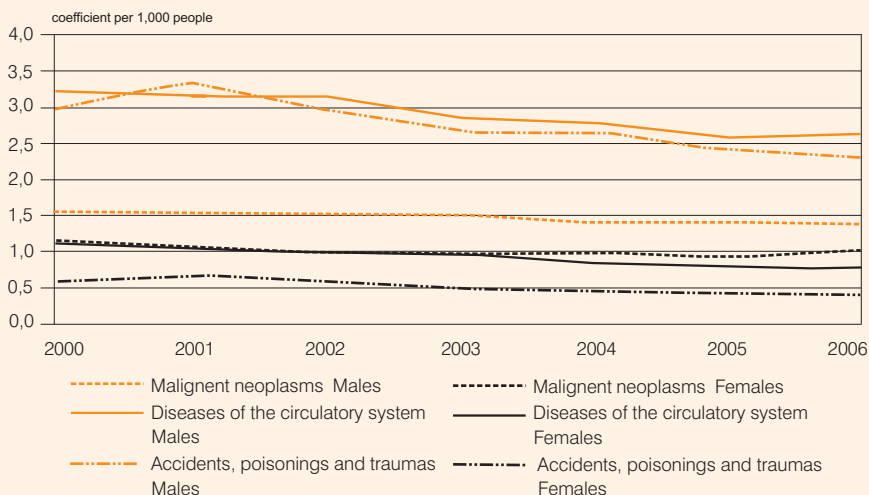


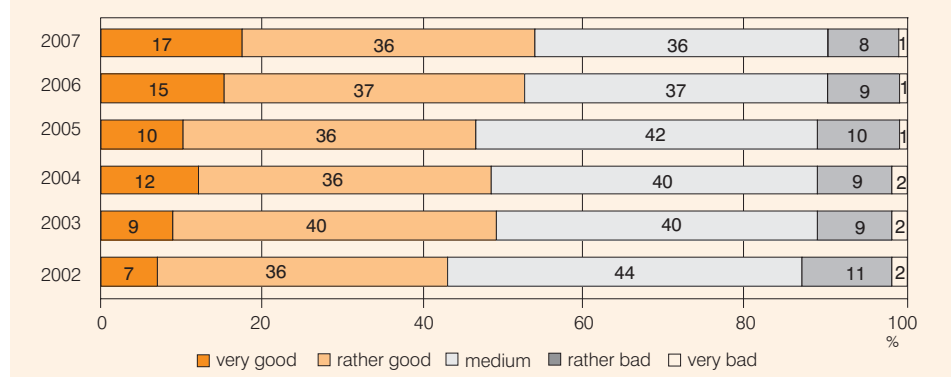
Table 14. Average life expectancy and healthy life years, 2000, 2002 and 2004–2006

	2000	2002	2004	2005	2006
Life expectancy at birth	70,6	71,0	72,0	72,8	73,0
Males	65,1	65,1	66,3	67,3	67,4
Females	76,0	77,0	77,8	78,1	78,5
Healthy life years	...	...	51,8	50,2	51,8
Males	...	...	49,8	48,0	49,6
Females	...	...	53,5	52,2	53,7

Source: Statistics Estonia

Self-perceived health and opinions on health care

Figure 5. Self-perceived health status of population, 2002–2007 (%)



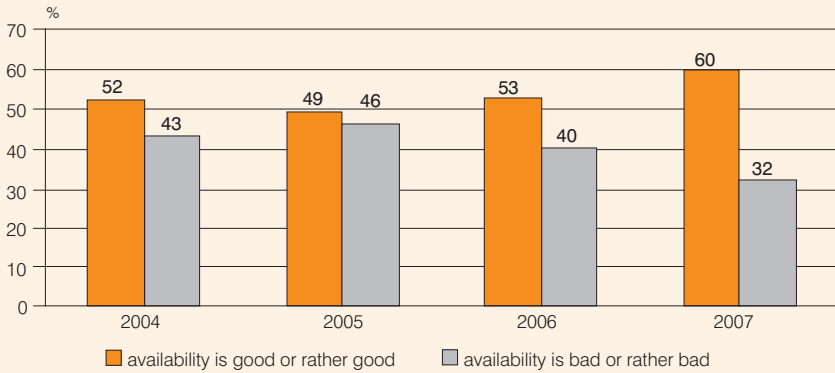
Source: The Ministry of Social Affairs and the Estonian Health Insurance Fund, survey "Self-perceived health status of population and opinions on health care, 2007"

Figure 6. Assessment of the quality of medical care, 2004–2007



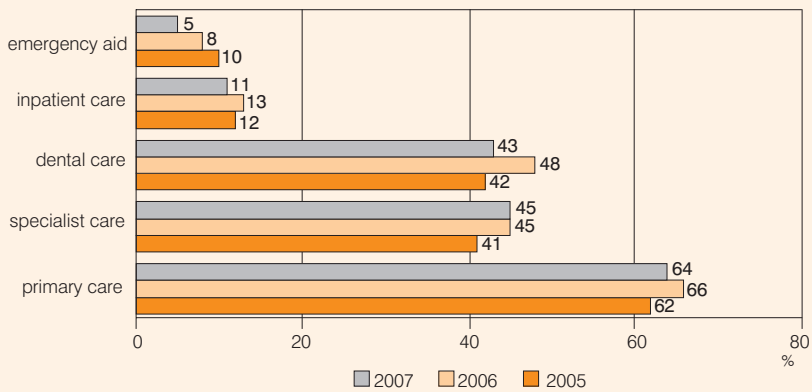
Source: The Ministry of Social Affairs and the Estonian Health Insurance Fund, survey "Self-perceived health status of population and opinions on health care, 2007"

Figure 7. Assessment of the availability of medical care, 2004–2007

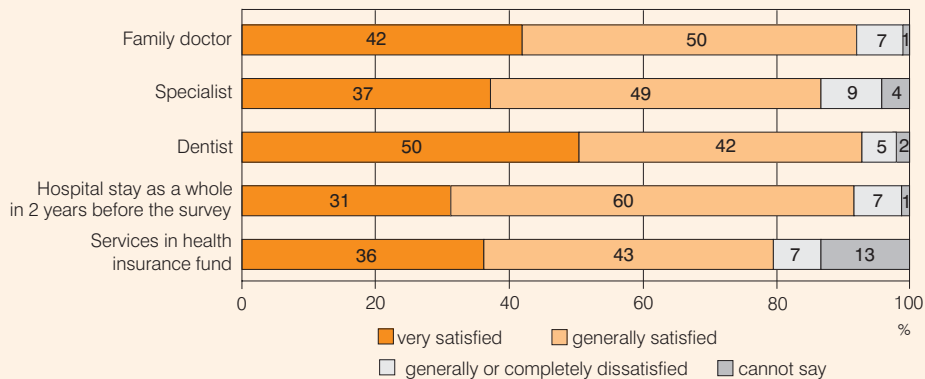


Source: The Ministry of Social Affairs and the Estonian Health Insurance Fund, survey “Self-perceived health status of population and opinions on health care, 2007”

Figure 8. Proportion of users of health care services in population during a year, 2005–2007 (%)



Source: The Ministry of Social Affairs and the Estonian Health Insurance Fund, survey “Self-perceived health status of population and opinions on health care, 2007”

Figure 9. Users¹ assessments of health service providers, 2007 (%)

¹ of the people who have used the service in the last 12 months (in case of hospital treatment, last two years).

Source: The Ministry of Social Affairs and the Estonian Health Insurance Fund, survey "Self-perceived health status of population and opinions on health care, 2007"

Health insurance and health expenditures

Table 15. Health insurance coverage, 2000, 2002 and 2004–2006 (at the end of the year)

	2000	2002	2004	2005	2006
Number of people covered by compulsory health insurance	1 276 923	1 284 076	1 271 558	1 271 354	1 278 016
% of the population	93,4	94,7	94,5	94,1	94,8
incl. working insured persons	...	578 578	595 734	617 625	651 141
% of insured persons	...	45,0	46,9	48,6	51,0

Source: Estonian Health Insurance Fund

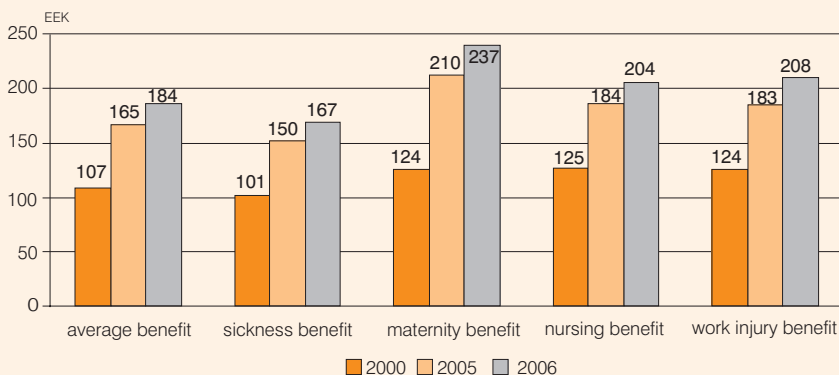
Table 16. Number of days covered by the benefit for temporary incapacity for work, 2000, 2002 and 2004–2006

	2000	2002	2004	2005	2006
Number of days covered by the benefit for temporary incapacity for work¹, thousand					
Total	6 763	6 411	7 321	7 685	8 195
sickness benefit days	4 819	4 504	5 222	5 454	5 751
nursing benefit days	614	558	624	691	797
work injury benefit days	157	172	119	125	132
maternity benefit days	1 066	1 178	1 356	1 414	1 515
Number of days covered by the benefit for temporary incapacity for work¹ per one employed person					
Total	11,8	10,9	12,3	12,7	12,7
sickness benefit days	8,4	7,7	8,8	9,0	8,9
nursing benefit days	1,1	1,0	1,0	1,1	1,2
work injury benefit days	0,3	0,3	0,2	0,2	0,2
Number of days of temporary incapacity for work per one certificate of temporary incapacity for work					
sickness benefit days	12,9	13,0	12,7	12,6	12,3
nursing benefit days	8,8	8,7	8,5	8,4	8,3
work injury benefit days	22,7	22,7	20,3	20,9	20,5
maternity benefit days	100,6	95,5	117,6	123,6	127,3

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 10. Average benefit for temporary incapacity for work per one day of temporary incapacity for work, by type of benefit, 2000, 2005–2006



Source: Estonian Health Insurance Fund

Table 17. Health insurance expenditure, 2000, 2002 and 2004–2006 (million EEK)

	2000	2002	2004	2005	2006
Total health insurance benefits	4 050,8	4 647,9	6 137,0	6 983,8	7 946,1
Non-monetary benefits	3 325,0	3 828,6	4 962,6	5 639,0	6 362,5
medical treatment ¹	2 881,0	3 097,2	4 098,8	4 767,2	5 395,7
medicinal products	444,0	731,4	863,8	871,8	966,8
Monetary benefits	725,8	819,3	1 174,4	1 344,8	1 583,6
Benefits for temporary incapacity for work	725,8	819,3	1 102,0	1 265,0	1 506,4
sickness benefit	488,1	529,8	723,5	817,6	957,7
nursing benefit	77,0	82,3	104,9	127,1	162,5
maternity benefit	132,3	182,0	253,2	297,4	358,8
work injury benefit	19,5	25,2	20,4	22,9	27,4
other benefits (transferred to easier work) ²	8,9	..	..	..	..
Other cash benefits ³	–	–	72,4	79,8	77,2
Percentage of health insurance benefits of GDP, %	4,24	3,83	4,09	3,98	3,84
Operating expenses of the Health Insurance Fund, million EEK	46,9	82,9	80,1	89,4	87,0

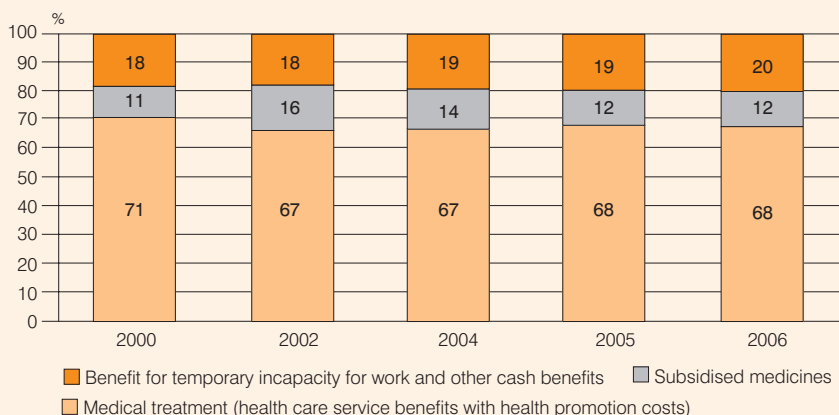
1 Expenditure on medical services, prevention of diseases, health promotion, nursing care, dental care services, benefits for auxiliary devices and costs related to foreign agreements.

2 Included under sickness benefits since 2002.

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

Source: Estonian Health Insurance Fund

Figure 11. Distribution of health insurance expenditure, 2000, 2002 and 2004–2006



Source: Estonian Health Insurance Fund

Table 18. Health care financing from the state budget¹, 2000, 2002 and 2004–2006 (million EEK)

	2000	2002	2004	2005	2006
Health care expenditure	431,2	485,3	659,3	825,4	982,2
medical services	87,5	95,1	97,6	103,2	134,9
incl. emergency medical aid to uninsured persons	72,0	76,3	91,8	97,3	123,9
rehabilitative care	5,7	2,0	3,5	4,9	2,4
long-term nursing care	0,3	–	57,1	99,9	147,3
ancillary health services	126,0	145,3	172,9	207,9	250,5
incl. support to emergency medical aid	122,5	144,6	172,8	206,1	228,7
medical products, medicines and auxiliary aids for outpatients	49,5	52,4	94,3	129,2	133,7
incl. medicines and medical products	26,3	26,2	47,3	59,7	25,3
incl. medicines	23,8	18,0	26,6	29,9	18,8
disease prevention and public health programmes	23,5	34,6	42,3	76,4	109,1
incl. prevention of infectious diseases	10,4	22,7	31,4	42,5	74,3
incl. prevention of non-infectious diseases	9,9	9,7	7,6	28,1	27,4
health care administration ²	62,1	101,8	158,0	166,6	149,3
capital expenses	76,6	54,1	33,6	37,3	55,0
Functions³ related to health care	110,6	98,3	201,8	170,3	235,1
Total expenditure on health care and related functions	541,8	583,6	861,1	995,7	1 162,4
of GDP, %	0,57	0,48	0,57	0,57	0,56

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 2003, 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.

Table 19. Total health expenditure¹, 2000, 2002–2006

	2000	2002	2003	2004	2005	2006
Total health expenditure, million EEK	5 145,5	5 958,8	6 830,8	7 782,6	8 787,4	10 440,9
Percentage in GDP ² , %	5,4	4,9	5,0	5,2	5,0	5,0
Sources of financing, %	100	100	100	100	100	100
national health insurance	66,0	65,6	65,4	65,7	66,2	62,5
state budget	8,4	8,1	10,0	8,5	9,4	9,4
local government	2,0	2,5	1,6	1,3	1,1	1,8
private sector:	23,3	23,7	22,9	24,0	23,0	25,6
households	19,7	19,9	20,7	21,3	20,4	23,8
insurance	1,0	1,0	0,0	0,1	0,3	1,1
employers	2,6	2,8	2,7	2,6	2,3	0,7
foreign aid, -loan	0,3	–	0,1	0,5	0,3	0,6

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

2 Period 2000–2005 is based on GDP indicators adjusted in Statistics Estonia in 2007.

Family benefits and parental benefit

The right to social security in case of birth, raising of and care for children is ensured by the State Family Benefits Act and 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 allowance. If a person is entitled to several types of family benefits, these benefits are determined 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. Since 1997, the child allowance rate has been 150, and since 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 2006, state family benefits were paid in total to 180,096 families and 274,985 children. The majority of the families receiving state family benefits are families with one child – 60% of all families receiving family benefits in 2006. The percentage of benefiting families with two children has been around 30% between 2000 and 2006. Families with three or more children make up 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 (39%). One fifth of all children receiving family benefits are growing in families with three or more children.

From 1 January 2004, the Parental Benefit Act entered into force. The aim of the Parental Benefit Act is to compensate for income not received by stay-at-home parents and support parents to balance their work and home 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 case of 100% benefit the size 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 (II pillar), the state pays one per cent of the amount of parental benefit to the II 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. The father generally becomes eligible for the parental benefit from the 70th day after the birth.

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. According to the amendment enforced in 2006, parental benefit is paid until the end of a 455-day period from the beginning of the 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). As of January 2008 the parental benefit payment period is 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 55% of all receivers of the benefit in 2006. The receivers of the two types of lower benefits accounted for 45% of all receivers of the parental benefit in 2006. 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 2006 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 has been stable around 4% since the introduction of the parental benefit.

The percentage of men among the receivers of parental benefits has been very low. Even though 30 more men were paid the parental benefit in 2006 than in 2005, men only accounted for 1.7% of all persons who received parental benefits in 2006.

The expenditures of family benefits have moderately increased in recent years. In 2006, expenditures on state family benefits amounted to 1.64 billion EEK. Expenditures on the parental benefit have increased significantly. A total of 898 million EEK were paid as parental benefits in 2006, which is more than double 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.

Table 1. Amounts of state family benefits, 2000, 2002 and 2004–2007 (EEK)

Type of benefit	2000	2002	2004	2005	2006	2007
Birth allowance (single benefit)						
1 st child (incl. multiple births since 2000)	3 750	3 750	3 750	3 750	5 000	5 000
2 nd and subsequent children	3 000	3 000	3 000	3 000	5 000	5 000
Adoption allowance (single benefit)	–	3 000	3 000	3 000	5 000	5 000
Child allowance (per month)						
1 st child	150	150	300	300	300	300
2 nd child	225	300	300	300	300	300
3 rd and subsequent child	300	300	300	300	300	900
Childcare allowance (per month)						
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 years in families with 3 or more children	300	300	300	300	300	300
supplementary childcare allowance for a child up to 1 year	–	–	100	100	100	100
Parental allowance of a family with 7 and more children (for one parent per month) ¹	–	–	–	2 400	2 520	2 640
Child's school allowance (at the beginning of the school year)	450	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	900	900	1 500
Conscript's child allowance (per month)	750	750	750	750	750	750
Start in independent life allowance ² (single benefit)	5 000	6 000	6 000	6 000	6 000	6 000
Allowance for families with 3 and more children (per child a quarter) ³						
per child for families with 3 children	–	150	150	–	–	–
per child for families with 4–5 children	–	–	–	150	300	–
per child for families with 6 and more children	–	–	–	300	450	–
Allowance for families with triplets (per family a quarter) ⁴	–	600	600	900	1 350	–

1 Children entitled to child allowance.

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

3 As of January 1 2004 allowance for families with 3 and more children is paid instead of former allowance for families with 4 and more children.

4 If family raises only triplets.

Source: Social Insurance Board

Table 2. **Receivers of state family benefits, 2000, 2002 and 2004–2006** (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	2002	2004	2005	2006
Birth allowance	12 636	12 986	14 402	14 245	14 917
Child allowance¹	312 172	301 015	290 281	287 459	274 985
1 st child	198 337	194 173	189 007	187 397	180 096
2 nd child	87 267	80 903	76 872	75 994	72 476
3 rd and subsequent child	26 568	25 939	24 402	24 068	22 413
Childcare allowance	55 056	58 762	48 543	50 517	48 355
for child up to 3 years of age	35 712	38 834	28 601	29 628	27 722
for children aged 3–8 years in families with a child under 3 years	10 597	11 087	11 219	11 722	12 076
for children aged 3–8 years in families with 3 or more children	8 747	8 841	8 723	9 167	8 557
Allowance to a family raising four and more children or raising triplets (children)	–	24 997	–	–	–
Allowance to a family raising three and more children or raising triplets (children)²	–	–	68 061	69 982	67 836
Allowance to a family raising seven and more children or raising triplets (families)	–	–	–	195	198
Child's school allowance	228 091	213 253	200 097	190 479	180 594
Single parent's child allowance (children)	...	27 958	28 540	28 126	27 258
Single parent's child allowance (families)	22 300	24 124	24 332	23 841	23 040
Allowance for a child in guardianship or in foster care (children)	...	2 982	2 835	2 507	2 262
Allowance for a child in guardianship or in foster care (families)	2 407	2 397	2 258	2 078	1 859
Adoption allowance	–	20	32	29	42
Conscript's child allowance	56	21	11	14	30
Start in independent life allowance³	76	88	108	123	110
Single supplementary allowance to families with four and 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 As of January 1 2004 allowance for families with 3 and more children is paid instead of former allowance for families with 4 and more children.

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

76 Family benefits and parental benefit

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

Year	2004 ¹			2005			2006		
	Total	Males, %	Fe- males, %	Total	Males, %	Fe- males, %	Total	Males, %	Fe- males, %
Total persons who have been granted parental benefit	21 643	2,0	98,0	14 272	1,6	98,4	14 642	1,7	98,3
Type of parental benefit									
Parental benefit in amount of 100% of the income of one calendar month	9305	3,3	96,7	6 825	2,5	97,5	7 483	2,7	97,3
Parental benefit in maximum amount	864	7,4	92,6	506	6,5	93,5	618	5,3	94,7
Parental benefit in the amount of minimum monthly wages	4 890	0,6	99,4	3 893	0,4	99,6	3 871	0,5	99,5
Parental benefit at the parental benefit rate	6 344	0,4	99,6	3 014	0,2	99,8	2 670	0,2	99,8
Parental benefit in the amount of minimum monthly wages if the previous child is under 2.5 years old and no income is received	240	–	100	34	–	100	–	–	–
Amount of parental benefit average per year (EEK)	4 712	8 988	4 626	5 243	10 226	5 163	6 182	10 913	6 099

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

Source: Social Insurance Board

Table 4. Expenditure on state family benefits and parental benefits, 2000, 2002 and 2004–2006 (million EEK)

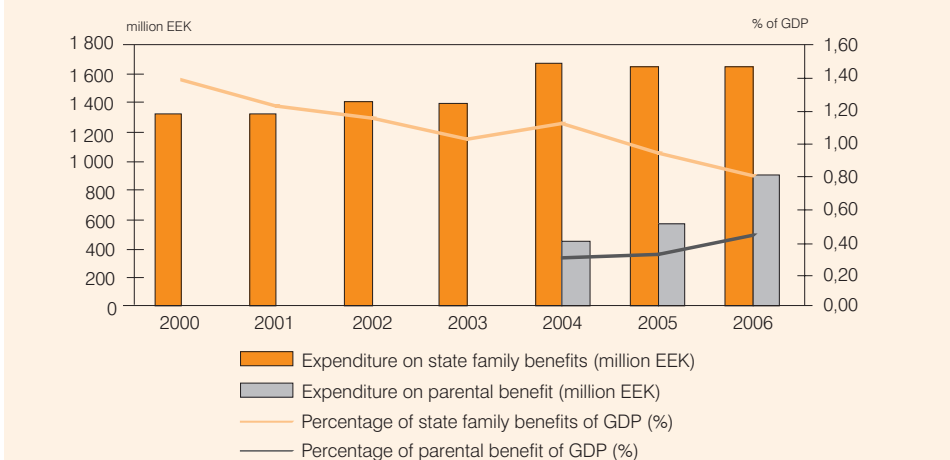
Type of benefit	2000	2002	2004	2005	2006
Family benefits and parental benefit total	1 317,0	1 395,4	2 106,0	2 195,8	2 541,6
Birth allowance	42,0	44,0	48,9	48,3	72,6
Child allowance	711,8	754,1	1 058,0	1 034,9	1 006,7
Childcare allowance ¹	352,8	354,0	293,5	286,7	269,0
Single parent's child allowance	85,1	100,6	103,7	102,6	100,2
Child's school allowance	102,5	95,9	90,5	85,8	81,2
Allowance for a child in guardianship or in foster care	10,3	32,4	32,0	29,4	26,0
Allowance to a family raising four and more children or raising triplets	–	13,6	–	–	–
Allowance to a family raising three and more children and raising triplets	–	–	37,3	48,9	80,8
Allowance to a family raising seven and more children	–	–	–	5,7	6,0
Single supplementary allowance to families with four and more children	11,5	–	–	–	–
Other allowances	1,0	0,8	0,8	0,9	1,1
Parental benefit	–	–	441,3	552,7	898,0
Social tax paid from the state budget ²	107,9	106,4	102,9	108,4	218,3
Percentage of family and parental benefits, %					
of GDP	1,38	1,15	1,40	1,25	1,23
of state budget	4,62	4,06	4,42	3,98	3,80

1 Since 2003, an additional 100 EEK childcare allowance was paid monthly for a child up to 1 year. 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 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 7 or more children.

Source: Social Insurance Board

Figure 1. Expenditure on state family benefits and parental benefit and percentage of GDP, 2000–2006



Source: Social Insurance Board, calculations of the Ministry of Social Affairs

Pensions

In 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. As of 2002, the new Pension Insurance Act entered into force remaining general principles of pension insurance 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 since 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: persons at least 16 years of age until the age of old-age pension 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.). Eligibility for 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 to persons with at least 15 years of pensionable length of service earned in Estonia.

As on 1 January 2007, there were 381,360 persons who received pensions in Estonia and 63% of them were women. The percentage of pension recipients accounted for 28.4% of the total population in the beginning of 2007 and has been increasing continuously during the years after the pension reform (27.6% in 2000). However, the total number of pension recipients has not increased considerably between 2000 and 2007 – the increase was only 0.5%.

More than $\frac{3}{4}$ of pension recipients – totalling 291,580 persons in the beginning of 2007 – are receivers of the old-age pension. The number of persons receiving pension for incapacity for work was 65,497, which was slightly less than 17% of all pension recipients. Survivor's pensions were paid to 9,537 families with a total of 13,000 family members. The number of receivers of the national pension was 8,393 and superannuated pensions were paid to 2,908 persons. The latter three types of pension recipients account for 6.4% of all pension recipients (with 3.4%, 2.2% and 0.8%, respectively).

The largest changes in the number and percentage of pension recipients during the period 2000–2007 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. By the beginning of 2007, the number of recipients of pensions for incapacity for work had again increased, reaching almost the same level as before the pension reform. Even though the percentage of pension recipients in the population has increased, the number of old-age pensioners has been decreasing in comparison with the post-reform peak in 2002. This decrease has been slightly faster than the decrease in population.

The average calculated pension (across all pension types) in the beginning of 2007 amounted to 2,819 EEK, which represents an increase by a factor of 1.93 since 2001. At the monthly level of 3,129 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 1,842 EEK in the beginning of 2007. The gap between this type of pension and the average pension has been increasing during the reviewed period. 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 65% by the beginning of 2007. 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 34% in 2001 to 46% in 2007).

Expenditures of state pension insurance amounted to 12.5 billion EEK in 2006. This represents an increase by a factor of 1.92 in comparison to the year 2000. Despite the significant increase in expenditures, the relative importance of pension expenditures decreased both in GDP and the state budget as a result of an even faster increase of these two (decrease from 6.78% to 6.03% in GDP and from 22.69% to 18.7% in the state budget).

State pension insurance

Table 1. **Receivers of state pension, by type of pension, 2000, 2002 and 2004–2007** (on January 1)

Type of pension	2000	2002	2004	2005	2006	2007
Total pension recipients¹	379 292	376 549	377 343	381 096	380 423	381 360
Males, %	34,1	34,9	36,0	36,3	36,6	36,7
Females, %	65,9	65,1	64,0	63,7	63,4	63,3
Proportion of pensioners in population, %	27,6	27,7	27,9	28,3	28,3	28,4
Total recipients of old-age pension	284 327	298 490	294 063	294 736	292 970	291 580
Old-age pensioners	284 305	298 432	293 032	293 606	291 777	290 342
receiving early-retirement pension	–	4 620	7 715	9 437	10 704	12 071
receiving deferred old-age pension	–	–	168	256	338	423
Recipients of special state pension	22	58	1031	1130	1193	1238
Recipients of superannuated pension	3240	3386	2820	2821	2848	2908
Recipients of pension for incapacity for work²	66 814	47 140	55 480	59 174	61 921	65 497
100% loss of capacity for work	7 496	5 449	7 538	7 830	8 169	8 620
80–90% loss of capacity for work	41 098	23 560	24 297	24 890	25 052	25 466
40–70% loss of capacity for work	13 468	18 131	23 645	26 454	28 700	31 411
Recipients of survivor's pension						
families receiving survivor's pension	15 318	14 017	7924	9312	9766	9537
family members receiving survivor's pension	23 256	19 429	11 613	13 131	13 500	12 982
Total recipients of national pension³	1 655	8 104	13 367	11 234	9 184	8 393

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

2 Until 2000, invalidity groups were determined. Since April 1 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 Due to an amendment to law in 2003, some of the recipients of survivor's pension started receiving national pension.

Table 2. Average amounts of pensions, 2000, 2002 and 2004–2007 (January 1, EEK per month)

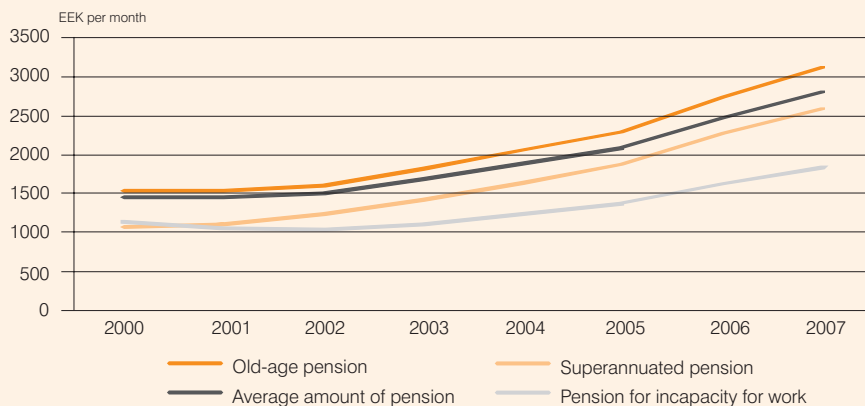
Type of pension	2000	2002	2004	2005	2006	2007
Old-age pension	1 551	1 620	2 072	2 302	2 739	3 129
early-retirement old-age pension	–	1 328	1 657	1 828	2 180	2 484
deferred old-age pension	–	–	2 061	2 345	2 873	3 336
special state pension ¹	...	...	5 903	6 093	6 229	6 392
Superannuated pension	1 083	1 250	1 651	1 887	2 279	2 595
Pension for incapacity for work²	1141	1 037	1 244	1 367	1 625	1 842
100% loss of capacity for work	1 381	1 310	1 664	1 849	2 214	2 532
80–90% loss of capacity for work	1 238	1 133	1 346	1 499	1 798	2 059
40–70% loss of capacity for work	817	831	1 004	1 101	1 306	1 481
Survivor's pension						
per family receiving pension	1 280	1 078	1 001	1 136	1 319	1 492
per family member receiving pension	843	778	707	822	964	1 104
National pension						
due to old age	...	936	984	1 019	1 162	1 270
due to incapacity for work	...	907	837	832	907	968
Average amount of pension	1 459	1 508	1 890	2 090	2 478	2 819

1 Pensions granted from the state budget to police officers, State Audit Office employees, judiciaries, prosecutors and the Chancellor of Justice.

2 Until 2000 granted and paid according to invalidity group. Since April 1 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.

Source: Social Insurance Board

Figure 1. Average amount of pensions, 2000–2007



Source: Social Insurance Board

Table 3. Expenditure on state pension insurance in 2000, 2002 and 2004–2006 (million EEK)

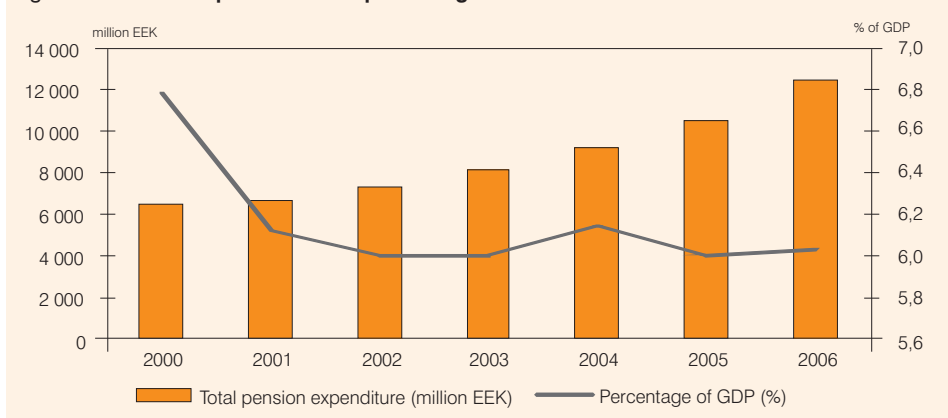
Type of pension	2000	2002	2004	2005	2006
Old-age pension	5 467,8	6 309,2	7 938,5	9 036,3	10 685,6
Pension for incapacity for work	663,3	655,9	931,6	1 127,0	1 400,6
Survivor's pension	229,4	156,0	122,1	147,6	173,3
Superannuated pension	36,9	44,4	56,9	67,6	81,4
National pension	67,3	105,7	125,8	110,2	104,0
Parliamentary pension, President's occupational pension ¹	9,1	14,4	24,4	27,3	32,9
Total pension expenditure	6 473,8	7 285,6	9 199,3	10 516,0	12 477,8
Pensions funded from social tax	6 214,3	6 962,5	8 789,9	10 083,8	12 015,6
Pensions and pension supplements funded from the state budget ²	259,5	323,1	409,4	432,2	462,2
Proportion of pension expenditure, %					
of GDP	6,78	6,00	6,14	6,00	6,03
of state budget	22,69	21,22	19,32	19,00	18,70

1 These pensions are paid from the budgets of the Office of the President and the Parliament. These figures include old-age pensions to MPs (75% of the salary) and survivor's pensions to family members of MPs (30% of the salary per every family member incapable of work) and the President's occupational pension (75% of the salary). The parliamentary old-age pension is not paid to MPs during their time in office.

2 Various pensions and pension supplements are funded from the state budget: national pension, pensions to various officials (judiciaries, prosecutors, National Audit Office employees, the Chancellor of Justice, members of the Defence Forces, police officers, members of Parliament, the President) as well as pension supplements paid on the basis of the length of services and other pension supplements (incl. to officials).

Source: Social Insurance Board

Figure 2. Pension expenditure and percentage of GDP in 2000–2006



Source: Social Insurance Board

Benefits for disabled persons

Disabled people are paid special benefits to support the independent coping and social integration and equal opportunities of disabled people 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.

Seven different types of benefits were paid to disabled persons from the state budget in 2006. 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. Benefits are calculated on the basis of the social benefit rate for disabled persons, which is established by the Riigikogu for each budgetary year (in the state budget). Since 2000, the monthly social benefit rate for disabled persons has been 400 EEK and it was not changed for the 2008 state budget.

The procedure for the payment of caregiver's allowance to disabled adults was changed as of 1 April 2005 and the funds for the payment of caregiver's allowances to disabled adults were reallocated from the Social Insurance Board to the 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 section 'Social Welfare').

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 2007 amounted to over 115,000 persons or 8.6% of the total population. This mostly includes elderly people – 60% of the disabled people are 63 years of age and older.

In 2006 the number of people registered as disabled for the first time was on the same level of recent years – the total of 18,300 people were declared disabled. This number includes children 6%, working age persons 40% and pension-age persons 54%.

The number of receivers of the disabled adult allowance has been gradually increasing in each year, crossing the 100,000 margin in 2005 and reaching 107,400 persons in 2006. The number of receivers of disabled child allowance was 5,295 in 2006, which was a slight decrease (by 62 children) in comparison to 2005.

84 Benefits for disabled persons

In connection with the transfer of the funds for the disabled adult care-giver's allowance to local governments as of second quarter 2005 the amount of caregiver's allowance paid via the Social Insurance Board decreased. In 2004 the number of recipients of caregiver's allowance was 38,060; in 2005 the corresponding number decreased to 2,053, as allowance was paid only to the parents of disabled children aged 3–18. In connection with this, in 2005 the total amount of benefits paid to disabled people via the Social Insurance Board decreased. 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. In 2006 total expenditure on social benefits for disabled persons was 580.3 million EEK. An overview of using the funds transferred to local governments is provided in the Social Welfare section.

Incapacity for work

Table 1. People declared as permanently incapacitated for work, by sex, age and percentage of loss of capacity for work in 2006–2007 (at the beginning of year)

Year	Total	Share in population, %	By sex, %		By age, %				
			Males	Females	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	
Per 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

Source: Social Insurance Board

Disability

Table 2. Persons with a determined degree of severity of disability, by sex and age in 2006–2007 (at the beginning of year)

Year	Total	Share in population, %	By sex, %		By age, %						
			Males	Females	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	
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	58,0	1,9	3,0	6,0	6,8	14,8	67,5

Source: Social Insurance Board

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

Type of dominating disability	Total	Share in population, %	By sex, %		By age, %				
			Males	Females	7-15	16-29	30-44	45-62	63+
Total disabled persons	115 354	8,6	45 713	69 641	5,0	5,2	7,2	22,5	60,1
Psychic disorder	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
Moving impairment	49 065	3,7	17 932	31 133	2,6	2,0	3,8	21,0	70,6
Other impairment	35 907	2,7	14 104	21 803	7,4	3,0	3,4	19,5	66,7
No information about type of disability	2 064	0,2	595	1 469	3,4	0,5	0,5	3,7	91,9

Source: Social Insurance Board

Table 4. Receivers of social benefits for disabled persons¹ in 2000, 2002 and 2004–2006 (at the end of year)

Type of benefit	2000	2002	2004	2005	2006
Disabled child allowance	4 409	4 923	5 302	5 357	5 295
Moderate disability, %	...	34,9	34,2	34,0	33,7
Severe and profound disability, %	...	65,1	65,8	66,0	66,3
Disabled adult allowance	–	88 794	98 032	102 263	107 431
Moderate disability, %	–	35,8	32,1	32,2	32,6
Severe disability, %	–	49,5	54,0	54,5	54,4
Profound disability, %	–	14,7	13,9	13,3	13,0
Caregiver's allowance (by the number of wards) ²	2 071	31 813	38 060	2 053	1 837
to a non-working parent of a disabled child aged 3–16	1 958	2 157	1 975	1 868	1 665
to a non-working parent of a disabled child aged 16–18 and to a non-working caregiver or guardian of a disabled person aged 18 and older ³	113	29 656	36 085	185	172
Severe disability, %	–	69,3	74,1	76,2	77,3
Profound disability, %	–	30,7	25,9	23,8	22,7
Disabled parent's allowance (number of children)	1 472	1 591	1 521	1 535	1 580
Disabled parent's allowance (number of families)	...	1 180	1 154	1 175	1 212
Education allowance to non-working disabled student	15	27	27	16	19
Rehabilitation allowance (to persons aged 16–65, single allowance)	–	1 381	1 815	1 848	2 274
In-service training allowance (single allowance)	–	30	34	56	51

1 As at the end of the year, excl. rehabilitation allowance and in-service training allowance (increasing since the beginning of the year).

2 Since April 1 2005 the funds for disabled adult caregiver's allowance were transferred to local governments. See section on Social Welfare.

3 A 15 time increase in 2001 is caused mainly by implementation of disabled adult caregiver's allowance.

Source: Social Insurance Board

Table 5. Amounts of social benefits for disabled persons¹, 2000–2007 (EEK)

Type of benefit	2000	2001	2002–2005	2006–2007 ³
Disabled child allowance				
Allowance to child with moderate disability	840	840	860	1 080
Allowance to child with severe and profound disability	940	940	1 020	1 260
Disabled adult allowance				
Allowance to adult with moderate disability	–	200	200	200
Allowance to adult with severe disability	–	420	420	420
Allowance to adult with profound disability	–	640	640	640
Caregiver's allowance				
to a non-working parent of a disabled child aged 3–16	300	300	300	300
to a non-working parent of a disabled child aged 16–18 and to a non-working caregiver or guardian of a disabled person aged 18 and older				
to a non-working parent of a child with severe disability aged 16–18	–	240	240	240
to a non-working parent of a child with profound disability aged 16–18	–	400	400	400
to a non-working caregiver or guardian of a person with severe disability aged 18 and older	–	240	240	–
to a non-working caregiver or guardian of a person with profound disability aged 18 and older	–	400	400	–
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 (aged 16–65)	–	–	up to 800 EEK per year	
In-service training allowance (single allowance)	–	–	up to 9 600 EEK during 3 years	

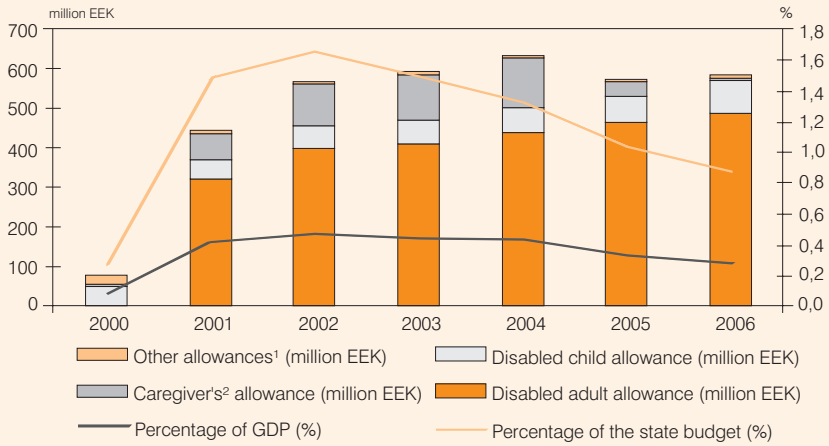
1 EEK per month, excl. rehabilitation allowance and in-service training allowance.

2 Allowance per child.

3 Since April 1 2005 the funds for disabled adult caregiver's allowance were transferred to local governments.

Source: Social Insurance Board

Figure 1. Percentage of expenditure on social benefits for disabled persons of GDP and the state budget, 2000–2006



1 Other allowances include disabled parent's allowance, education allowance to non-working disabled student, rehabilitation allowance to persons aged 16–65 and in-service training allowance.

2 Since April 1 2005 the funds for disabled adult caregiver's allowance were transferred to local governments.

Source: Social Insurance Board

Social welfare

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 lawfully residing in Estonia and refugees 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 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 three main target groups of social welfare are children, the elderly and persons with disabilities and special mental needs.

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.

Both the state and local governments have an important role to fulfill in the welfare of disabled people and people with special mental needs. Funds from the state budget are used to finance the rehabilitation services intended for disabled people and people with special mental needs, with the aim to improve independent coping ability, increase their involvement in the society and support working-age people in working or starting to work. Since 2005, rehabilitation services are also provided to minors with special behavioural needs. In addition to rehabilitation services, supportive and around-the-clock welfare services meant for adults with special mental needs are also financed from the state budget. Recent years have seen significant developments in these welfare services. In the late 1990s, persons with special mental needs were only offered the around-the-clock care service, but in the following years the open care services were added like assisted everyday life, assisted living, living in a community and, last, assisted working in 2001.

The provision of other welfare services meant for disabled people are first of all the responsibility of local governments. From 1 April 2005, the payment of the caregiver's allowance to the 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 governments. 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.

The state compensates 50–90% of the cost of the device to disabled people, the elderly and children, who need prostheses, orthopaedic and other aids (the percentages of the state's share by types of aid devices are established by a regulation of the Minister of Social Affairs). Upon paying for the aid device, the state's share is paid after the person's own share has been paid. A person's own share is the difference in the cost of the aid device and the state's share, but not less than 200 EEK.

The provision of welfare services to the elderly is organised by local governments. First of all, this concerns the provision of welfare services in welfare institutions, home services and housing services in social apartments or on social premises and day centre services.

The most important type of social benefit is the subsistence benefit paid by local governments from the state budget to families with low incomes. Pursuant to the Social Welfare Act, a person living alone or a family whose monthly net 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 Parliament 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. 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 2006, the subsistence level for a person living alone was 750 EEK, in 2007 – 900 EEK. In addition to this, families consisting entirely of underage members receiving subsistence benefit are since year 2005 paid together with subsistence benefit also an additional social benefit of 200 EEK a month. In 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 in order to improve their level of subsistence on the terms and conditions and according to the procedure established by the local government.

At first, this chapter presents data on the institutions providing welfare services and the recipients of these services in the period 2003–2006. This is followed by information on the service users who stay in the institutions for 24 hours a day, as well as the users of various open care services, other services and benefits, and service providers.¹ Expenditures on welfare services by different funding sources have been presented separately in the chapter on ‘Social Protection’.

24-hour welfare services are defined as services to persons who are not capable of living independently due to their need for care, as they need care and assistance for 24 hours a day. These services include: care for orphans and children left without parental care in a social welfare institution, care for adults in a social welfare institution (except for persons with special mental needs), and social welfare services for adults with special mental needs.

Open care services are defined as services provided to a person who lives independently or is supported by the family in his or her natural environment.

In the end of 2006, the number of 24 hour care institutions amounted to 175, including 116 institutions for adults (except for persons with special mental needs), 38 institutions providing substitute home services for children, and 28 institutions providing 24-hour care for persons with special mental needs. Seven of the 175 institutions provided services to several target groups at once.

The total number of users of 24-hour care services in the end of 2006 was nearly 8,600. More than half (55%) of them were users of care services for adults, 26% were users of services for persons with special mental needs, and 19% users of social welfare services for children. The aggregate percentage of the users of all three abovementioned services was 0.64% of the total population in the end of 2006. It means that 64 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 9. With regard to the total number of service users, the percentage of 24-hour care service users increased in 2006 by 14% in comparison to 2000. The users of care services for adults accounted for the main part of the increase, with an increase by 45%.

The number of users of 24-hour services for persons with special mental needs has decreased as a result of increasing number of support services. The number of recipients of support services grew from 2,634 persons in 2003 to 3,284 persons in 2006. The increase in the number of users of support services in 2006 ranges across all types of services: the number of users of everyday life support services increased nearly by one third, the number of users of assisted living services increased by one fifth, and the number of users of living-in-community services even redoubled in comparison to 2003. Only the growth in the number of recipients of employment support services remained moderate with an increase by 6%.

¹ The content and organisation of collecting statistical data on the welfare domain changed significantly in 2003, the change meant a transition from institution-centred data to service-centred data. Therefore some statistical data is presented only since 2003. The full statistical reports are available on S-web (social register based reports from local governments, starting from 2001) and H-web (reports from institutions providing welfare services, starting from 2003) at www.sm.ee/sveeb and www.sm.ee/hveeb respectively.

As the persons with special mental needs often receive several types of support services simultaneously, the total number of service users is lower than the number of persons who have used different services.

With regard to open care services, increase was recorded in the number of recipients of home services, prosthetic appliances, and orthopaedic or other supported assistance equipment.

Decreasing trends were detected in the number of persons using lodging and shelter services for the homeless, rehabilitation services for former prisoners and homeless persons, as well as persons in foster care. 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 establishment of social accommodation units.

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. 1,680 children left without parental care and children needing assistance were registered for the first time in 2006.

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 employed by the local and county governments has increased to 162 during the period 2003–2006. 78% of these officials have received specialised education. It means that the target established in the Concept of Child Protection – one child protection official per 1,000 children – is coming closer with each year: in 2006, there were 1,596 children per one child protection official. On the one hand, this is affected by the increased number of child protection officials and, on the other hand, by the decreasing number of children.

The number of children in foster care has decreased by a factor of 1.5 during the period 2003–2006, and the decrease has been even steeper in the number of adults in foster care – by a factor of 5. The number of foster families has decreased in the review period as well, amounting only to 444 families in 2006 in comparison to 869 families in 2003.

The number of adopted children has increased in comparison to 2003, amounting to 158 children in 2006. 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 242 children in 2006.

The number of staff members of social welfare institutions in the end of 2006 was over 5,500². Nearly 46% of them are educational workers, caregivers and providers of nursing care. This percentage rises to 52% if we include nurses and social workers. The number of full-time employees providing the three abovementioned 24-hour care services amounted to 3,070, which accounted for 55% of the total staff members of social welfare institutions.

² Only personnel of institutions providing welfare service, excl. social workers and children protection workers administering social welfare service in local municipalities, social workers providing home care, also caregivers to disabled persons, personal assistants, support persons and families providing support family service, families providing family care service and specialists providing rehabilitation service to disabled persons and persons with special mental needs.

Due to the data collection method, the data has been presented in an aggregate form as recorded by service providers. It means that a service provider records provision of services to one person, irrespective of the number of services provided to that person during the year or the number of referrals to the institution in question. However, if the same person receives services from two different service providers during the year, he or she is registered twice in the data records.

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

Type of service	Number of institutions providing service (at the end of the year)				Number of persons using service (during the year)			
	2003	2004	2005	2006	2003	2004	2005	2006
Substitute home service¹	37	38	38	38	1 835	1 860	1 905	1 807
Institutional welfare services for adults (excl. persons with special mental needs)	108	112	114	116	5 404	5 997	6 422	6 828
Welfare services for adults with special mental needs	71	80	86	87	4 491	4 693	4 901	4 955
incl. 24 hour care service	24	25	27	28	2 413	2 443	2 419	2 414
Rehabilitation service for disabled people²	31	39	41	48	6 599	9 543	15 861	11 008 ³
Rehabilitation service for adults with special mental needs²	6	8	9	41	669	949	1 035	1 198 ³
Day centre service⁴	86	94	102	103	65 069	55 884	60 947	65 869
Housing service in the form of social housing, premises and support homes	83	85	87	85	3 697	3 907	4 194	4 020
Shelter service and rehabilitation service to ex-convicts	28	29	27	29	3 243	2 580	2 606	2 487
Night shelter service for the homeless	10	11	12	11	1 712	2 062	1 880	1 535

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

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

3 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 2006. A person may produce several application during the period.

4 The users of day centre services are counted only once during the year, regardless of times and number of different services used by a person in a certain day centre.

Source: Ministry of Social Affairs

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

Position	2003	2004	2005	2006
Personnel total	5 416	5 584	5 661	5 528 ²
Males, %	15,1	14,7	14,0	13,1
Females, %	84,9	85,3	86,0	86,9
Management, senior and mid-level specialists	673	646	657	648
Males, %	18,9	18,6	18,7	17,7
Females, %	81,1	81,4	81,3	82,3
Persons involved in teaching and development³	1 388	1 584	1 216	1 255
Males, %	9,5	9,4	7,8	7,9
Females, %	91,5	91,6	92,2	92,1
Social workers	139	180	175	150
Males, %	7,9	6,7	5,7	14,0
Females, %	92,1	93,3	94,3	86,0
Nurses	284	274	232	207
Males, %	1,8	1,1	1,3	1,0
Females, %	98,2	98,9	98,7	99,0
Caring personnel	1 171	1 163	1 252	1 275
Males, %	3,3	2,8	3,0	2,7
Females, %	96,7	97,2	97,0	97,3
Psychologists, physiotherapists, speech therapists, doctors, pedagogues	109	157	197	95
Males, %	14,7	12,1	11,7	12,6
Females, %	85,3	87,9	88,3	87,4
Other personnel (economic, catering, cleaning and other staff)	1 652	1 580	1 932	1 898
Males, %	30,5	21,6	26,0	23,1
Females, %	69,5	68,4	74,0	76,9

1 The table presents the number of employees of institutions specialising in the provision of welfare services. Certain services (e.g. rehabilitation services) are, however, provided by institutions with a different main field of activity (e.g. hospitals), the personnel of which is not included in the table.

2 Decrease in the number of workers is caused by changes in administration of rehabilitation service to disabled people and persons with special mental needs, therefore statistical data are no more collected in the reporting system H-web. Therefore this table does not present data on the personnel of institutions providing abovementioned service.

3 Minders, assistant minders, activity instructors.

Source: Ministry of Social Affairs

Table 3. Personnel in institutions providing welfare services by age, 2003–2006 (at the end of the year, %)

Age group	2003	2004	2005	2006
Total	100,0	100,0	100,0	100,0
Under 25	4,6	4,4	3,6	3,1
25–39	24,5	23,3	22,8	21,7
40–49	27,5	27,1	26,5	25,4
50–59	29,4	29,7	31,1	32,7
60+	14,1	15,5	16,0	17,1

Source: Ministry of Social Affairs

Table 4. Users of 24-hour institutional welfare service, 2000, 2002 and 2004–2006 (at the end of the year)

	2000	2002	2004	2005	2006
Service users total	7 500	7 847	7 951	8 382	8 584
Service users per 10,000 inhabitants	55	58	59	61	64
By type of service					
Substitute home service (in children's welfare institutions ¹)	1 715	1 881	1 549 ²	1 683	1 621
Welfare service for adults (in general care homes ¹)	3 276	3 509	4 175	4 479	4 737
24-hour welfare services for adults with special mental needs (in special care homes ¹)	2 509	2 457	2 227	2 220	2 226

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

Table 5. Users of substitute home service by sex, 2000, 2002 and 2004–2006 (at the end of the year)

	2000	2002	2004	2005	2006
Service users total	1 715	1 881	1 549 ¹	1 683	1 621
Boys, %	49,7	60,3	60,2	48,9	48,7
Girls, %	40,3	39,7	39,8	41,1	41,3
Service users per 10,000 inhabitants aged 0–24	38	42	37	41	40

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

Table 6. Adults¹ using institutional welfare services by sex and age, 2000, 2002 and 2004–2006 (at the end of the year)

	2000	2002	2004	2005	2006
Service users total	3 276	3 509	4 175	4 479	4 737
Males, %	35,9	36,7	37,4	38,1	38,1
Females, %	64,1	63,3	62,6	61,9	61,9
Service users per 10,000 inhabitants aged 18 and older	31	33	39	42	44
Age groups of service users, %					
18–29	1,4	1,1	1,0	0,9	0,6
30–49	5,4	4,8	4,8	4,6	4,5
50–64	15,0	15,8	15,5	15,9	15,8
65–74	21,9	22,2	22,3	21,5	22,6
75+	56,3	56,1	56,4	57,1	56,5

1 Excl. persons with special mental needs.

Source: Ministry of Social Affairs

Table 7. Persons using welfare services for adults with special mental needs by sex and age, 2003–2006 (during the year)

	2003	2004	2005	2006
Service users total	4 491	4 693	4 901	4 955
Males, %	52,6	53,1	52,9	53,3
Females, %	47,4	46,9	47,1	46,7
Service users per 10,000 inhabitants aged 18 and older	40	42	44	44
Age groups of service users¹, %				
18–29	21,1	22,1	21,6	22,1
30–49	39,8	39,9	41,3	40,7
50–64	24,4	24,6	23,8	23,8
65+	14,5	13,2	13,3	13,3

¹ Service users include also persons aged 16–17 who are not direct target group of the service as disabled adults are persons aged 18 and more.

Source: Ministry of Social Affairs

Table 8. Home care services, 2000, 2002 and 2004–2006

	2000	2002	2004	2005	2006
Service users total¹ (during the year)	5 638	5 964	5 539	5 696	6 082
Males, %	24,5	26,2	25,5	24,4	24,3
Females, %	75,5	73,8	74,5	75,6	75,7
Share of persons with special needs, %	39,5	49,1	51,1	54,0	57,1
Service users per 10,000 inhabitants	41	44	41	42	45
Age groups of service users, %					
Under 18	2,7	2,5	2,2	2,5	2,0
18–24	0,9	1,0	1,1	0,6	0,5
25–49	5,4	5,5	5,4	4,5	4,3
50–64	11,3	12,2	10,3	9,7	10,9
65–79	42,0	41,6	37,9	37,8	38,2
80+	37,9	37,2	43,1	44,9	44,1
Home care service providers (at the end of the year)	747	737	697	682	667

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

Source: Ministry of Social Affairs

Table 9. Day centre services, 2000, 2002 and 2004–2006

	2000	2002	2004	2005	2006
Service users total¹ (during the year)	30 740	27 859	55 919	60 947	65 869
incl. regular clients	...	...	18 673	19 575	20 614
Service users per 10,000 inhabitants²	224	205	414	453	490
Employees providing services (at the end of the year)	432	549	441	430	350 ³
Volunteer workers (during the year)	...	...	244	233	215
Number of service providers (at the end of the year)	62	85	94	102	103

1 Approximate number of clients. Since 2003 also regular clients are counted. Regular 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 Since 2006 the contractual employees (mainly hobby instructors) working with the clients of a day centre are reported separately. In 2006, there was in addition to full-time employees providing the service also 221 contractual employees.

Source: Ministry of Social Affairs

Table 10. Housing service in the form of social housing and premises, in support homes¹, 2000, 2002 and 2004–2006 (at the end of the year)

	2000	2002	2004	2005	2006
Number of places total²	1 577	2 055	2 727	2 844	2 987
incl. places adapted to persons with special needs	115	137	125	144	142
Service users total	1 682	2 653	3 439	3 584	4 020
living alone	1 119	1 494	2 065	2 246	2 435
living as a family	563	1 159	1 374	1 338	1 585
Of service users					
with special needs	340	718	953	1 002	1 070
in pensionable age	1 057	1 037	1 467	1 543	1 630
Service users per 10,000 inhabitants	12	20	26	27	30

1 Social housing or social premises mean dwellings in municipal ownership, for people needing social services. Support homes – institutions providing daily or periodical 24h care to disabled people living at home.

2 Number of social housings and separate rooms (rented as social premises).

Source: Ministry of Social Affairs

Table 11. Persons using welfare services for adults with special mental needs by service type, 2003–2006 (during the year)

	2003	2004	2005	2006
Service users total¹	2 250	2 482	2 541	2 250
Service users per 10,000 inhabitants aged 18 and older	20	22	23	20
Service users by service type				
Assistance in everyday life	1 525	1 668	1 688	2 015
Assisted living	565	562	618	678
Living in a community	28	32	39	43
Assisted working	516	548	533	548

1 One person may simultaneously receive several services.

Source: Ministry of Social Affairs

Table 12. **First-time registration of children left without parental care and children needing assistance¹, 2003–2006** (during the year)

	2003	2004	2005	2006 ¹
Registered children, total	1 276	1 092	858	1 680
Boys, %	53,7	55,1	50,2	54,3
Girls, %	46,3	44,9	49,8	45,7
Registered children per 10,000 children aged 0–17	45	39	32	64

¹ Since 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. Also was specified the number of children staying in their biological family after registration which means that the social worker solved the case with supportive measures to the family.

Source: Ministry of Social Affairs

Table 13. **Child protection specialists in county governments and local governments, 2003–2006** (at the end of the year)

	2003	2004	2005	2006
Child protection specialists, total	147	148	153	162
incl. with special professional qualification	108	107	115	126
Children aged 0–17 per one child protection worker	1 908	1 847	1 736	1 596

Source: Ministry of Social Affairs

Table 14. **Number of persons in foster care and foster families, 2003–2006** (at the end of the year)

	2003	2004	2005	2006
Persons in foster care, total	1 113	997	743	559
children (0–17) ¹	1 081	971	732	551
adults (18+)	32	26	11	8
Children using service per 10,000 children aged 0–17¹	39	36	28	21
Foster families total	869	778	606	444
incl. caring for children	838	753	597	436
caring for adults	31	25	9	8

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 15. **Children adopted and placed into guardianship, 2003–2006** (during the year)

	2003	2004	2005	2006
Adopted children, total	130	165	152	158
incl. children adopted by foreign citizens	15	28	16	20
Boys, %	54,6	52,1	53,9	51,9
Girls, %	45,4	47,9	46,1	48,1
Children placed into guardianship	257	203	221	242
Boys, %	44,7	55,7	42,5	46,3
Girls, %	55,3	44,3	57,5	53,7

Source: Ministry of Social Affairs

Table 16. **Receivers of prosthetic, orthopaedic and other devices, 2000, 2002 and 2004–2006** (during the year)

	2000	2002	2004	2005	2006
Receivers of devices, total¹	19 995	21 694	26 369	34 790	38 249
children aged up to 18	4 723	4 421	5 097	6 727	7 175
incl. disabled, %	7,0	36,9	34,3	29,6	29,3
working-age people	4 460	3 737	3 818	5 026	5 435
working of them, %	22,9	19,7	23,2	26,8	26,4
people entitled to old-age pension	10 812	13 536	17 454	23 037	25 639

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

Source: Ministry of Social Affairs

Table 17. Shelter services and rehabilitation services to ex-convicts, 2003–2006 (during the year)

Institutions providing service (at the end of the year)	2003		2004		2005		2006	
	28		29		27		29	
	Service users	incl. children	Service users	incl. children	Service users	incl. children	Service users	incl. children
Total	3 243	1 798	2 580	1 354	2 606	1 237	2 487	1 156
Males, %	62,8	58,7	67,1	61,6	63,8	56,8	61,2	54,4
Females, %	37,2	41,3	32,9	38,4	36,2	43,2	38,8	45,6
Service users by cause								
Release from penal institutions	698	3	559	12	579	–	557	4
Males, %	92,7	33,3	91,2	91,7	94,0	–	89,2	100,0
Females, %	7,3	66,7	8,8	8,3	6,0	–	10,8	–
Homelessness ¹	595	292	365	127	414	138	476	138
Males, %	56,5	55,8	59,5	52,8	56,5	44,9	56,7	52,9
Females, %	43,5	44,2	40,5	47,2	43,5	55,1	43,3	47,1
Vagrancy	368	327	302	265	369	230	216	152
Males, %	69,6	70,3	73,5	75,5	69,9	70,0	70,4	67,8
Females, %	30,4	29,7	26,5	24,5	30,1	30,0	29,6	32,2
Domestic violence	326	180	254	174	309	136	265	129
Males, %	29,1	52,2	37,8	53,4	26,9	55,1	22,6	41,9
Females, %	70,9	47,8	62,2	46,6	73,1	44,9	77,4	58,1
Other violence	33	24	15	8	8	5	13	7
Males, %	54,5	66,7	53,3	75,0	62,5	80,0	69,2	57,1
Females, %	45,5	33,3	46,7	25,0	37,5	20,0	30,8	42,9
Domestic neglect	238	217	221	211	204	196	231	194
Males, %	55,5	57,6	61,1	62,1	53,4	53,6	55,0	55,7
Females, %	44,5	42,4	38,9	37,9	46,6	46,4	45,0	44,3
Alcohol abuse	158	48	134	36	148	51	147	59
Males, %	69,0	66,7	73,9	66,7	80,4	72,5	64,6	61,0
Females, %	31,0	33,3	26,1	33,3	19,6	27,5	35,4	39,0
Alcohol abuse by parents and other relatives	222	210	137	132	144	137	155	151
Males, %	41,9	43,3	51,1	52,3	50,7	52,6	45,8	47,0
Females, %	58,1	56,7	48,9	47,7	49,3	47,4	54,2	53,0
Drug abuse	172	166	94	94	89	77	50	45
Males, %	77,3	78,3	72,3	72,3	64,0	66,2	70,0	66,7
Females, %	22,7	21,7	27,7	27,7	36,0	33,8	30,0	33,3
Drug abuse by parents and other relatives	39	24	28	28	28	27	48	45
Males, %	53,8	70,8	53,6	53,6	53,6	51,9	47,9	48,9
Females, %	46,2	29,2	46,4	46,4	46,4	48,1	52,1	51,1
Other/cause unknown	394	307	471	267	314	240	329	232
Males, %	50,0	50,8	62,0	56,2	52,9	50,4	55,3	53,4
Females, %	50,0	49,2	38,0	43,8	47,1	49,6	44,7	46,6

¹ Excl. people released from penal institutions.

Source: Ministry of Social Affairs

Table 18. Persons using the night shelter services for the homeless, by sex and age, 2003–2006 (during the year)

	2003	2004	2005	2006
Service users, total	1 712	2 062	1 880	1 535
homeless ¹	1 582	1 700	1 460	1 250
persons from other night shelters ²	130	362	420	285
Homeless				
Males, %	82,9	82,5	80,4	82,7
Females, %	17,1	17,5	19,6	17,3
By age, %				
Under 18	–	0,5	0,3	–
18–24	5,3	2,6	4,4	5,6
25–49	59,4	50,3	48,4	45,4
50–64	30,7	41,8	39,0	42,0
65+	4,6	4,7	8,0	7,0
By duration of stay, %				
up to 7 nights	25,2	19,6	18,1	35,4
8–30 nights	16,2	21,4	15,5	21,4
31–90 nights	17,3	19,2	37,7	21,6
91–180 nights	19,7	19,6	14,0	11,1
181–270 nights	12,6	15,9	8,6	5,0
more than 270 nights	9,0	4,2	6,0	5,4

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 various reasons (family conflicts, domestic violence etc.).

Source: Ministry of Social Affairs

Table 19. The use of subsistence benefit funds, the number of families receiving benefit, the number of satisfied applications and the average amount of benefit, 2001, 2002 and 2004–2006

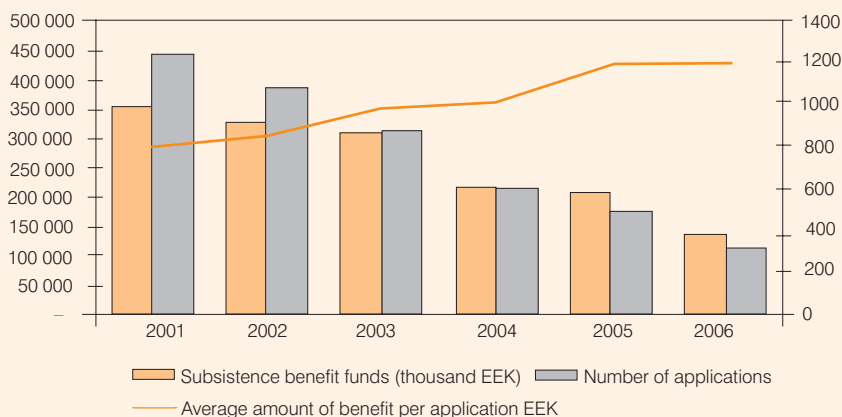
	2001	2002	2004	2005	2006
Subsistence benefit (to maintain subsistence level)					
Number of produced applications (during the year)	453 474	391 537	218 585	176 799	114 668
Number of satisfied applications (during the year)	443 265	385 705	214 593	174 406	112 990
Average number of satisfied applications (monthly)	36 939	32 142	17 883	14 534	9 416
Number of families receiving benefit (during the year)	70 417	69 346	33 232	26 752	19 229
Proportion of families receiving benefit of all households ¹ , %	12,4	12,2	5,9	4,7	3,4
Average amount of benefit per application (EEK)	797	847	1 010	1 192	1 199
The use of funds (during the year, thousand EEK)	353 308	326 556	216 842	207 830	135 450
Supplementary benefits² (from the subsistence benefit funds)					
Number of satisfied applications (during the year)	3 817	48 386	33 477	104 879	118 425
Average number of satisfied applications (monthly)	318	4 032	2 790	8 740	9 869
Average amount of benefit per application (EEK)	279	440	545	419	446
The use of funds (during the year, thousand EEK)	1 065	21 306	18 230	43 918	57 308

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

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

Source: Ministry of Social Affairs

Figure 1. The use of subsistence benefit funds, satisfied applications and average amount of benefit per application, 2001–2006



Source: Ministry of Social Affairs

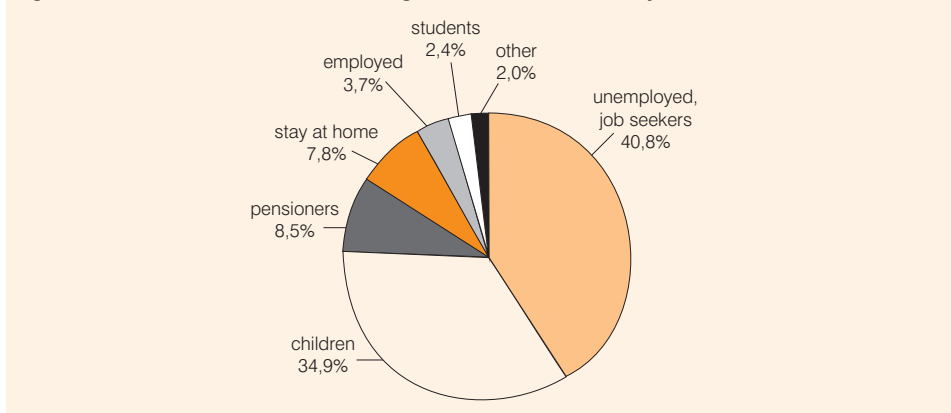
Table 20. **Structure of families receiving subsistence benefit, by satisfied applications, 2001, 2002 and 2004–2006 (during the year)**

	2001	2002	2004	2005	2006
Number of applications, total	443 265	385 705	214 593	174 406	112 990
Share of all applications, %					
Families with an unemployed person	59,1	56,6	72,4	70,3	66,3
recipient of unemployment benefit ¹	31,5	26,5	27,8	26,9	23,7
long-term unemployed, non-working job-seeker	27,6	30,1	44,6	43,4	42,6
Pensioner's families	16,7	21,7	1,9	1,7	1,8
Student's families	7,7	7,9	6,7	9,3	10,9
Other families	16,5	13,8	19,0	18,7	21,0
Share of all applications, %					
Families with children	38,3	34,1	43,4	39,1	36,4
Families with a disabled person	5,8	5,7	6,4	8,0	8,7
Families with children receiving subsistence benefit, by number of children, %					
with 1 child	56,7	58,5	52,7	54,0	54,7
with 2 children	29,0	27,7	28,3	27,7	27,2
with 3 and more children	14,3	13,8	19,0	18,3	18,1

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

Source: Ministry of Social Affairs

Figure 2. **Members of families receiving subsistence benefit, by social status, 2006**



Source: Ministry of Social Affairs, calculated on the basis of satisfied applications

Social protection

The purpose of social protection is to provide the residents with safeguards for 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 the expenditure on major social welfare services by different sources of financing, public expenditure on social insurance and social welfare expenditure. The chapter concludes with aggregated data on all social protection expenditure, calculated according to the ESSPROS¹ method.

Expenditure 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 the families (compensation of victims of crime, funeral benefit, writing off study loans) financed from the social taxes and the state budget.

Expenditure on social welfare include financial resources from the state budget and local government budgets for the provision of services and payment of benefits, as well as partial self-financing of the services by the service users and/or their family members, and financial resources from other sources (sponsorship, income generated from the own funds of service providers).

The difference between the social protection expenditure of ESSPROS and the expenditure listed at the beginning of this chapter lies in the fact that the ESSPROS methodology does not include self-financing of social welfare services by the persons in the social protection expenditure. However, the expenditure calculated according to the ESSPROS methodology include expenditure associated with illness, healthcare and unemployment.

The total expenditure on social welfare services in 2006 amounted to 1.14 billion EEK, including 40% (i.e., nearly 456 million EEK) paid by the local governments. The contribution of the state was at the level of 36.5% while the self-financing of service users was 22%. The financing schemes are different for different services. While the expenses of substitute home services for orphans and children left without parental care are covered mainly from the state budget, the care for the elderly in social welfare institutions is paid for by the service users and/or the person required to maintain the elderly together with the local government. While the rehabilitation services for persons with special mental needs are fully financed by the state, the expenses of rehabilitation services for disabled persons are partially also covered by the service users.

1 European System of Integrated Social Protection Statistics (ESSPROS)

Nearly 55%, or 624 million EEK, of the funds used for the provision of social welfare services in 2006 were spent on the provision of 24-hour care services, with 45%, or 513 million EEK, being allocated to open care services

Nearly half (49% or 304 million EEK) of the expenditure on 24-hour care services in 2006 comprised the expenditure on the care for adults in social welfare institutions. In addition, this service was also the largest expenditure item, constituting over one quarter of the total expenditure on social welfare services.

State budget expenditure on social insurance in 2006 amounted to 16 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 16% while the portion of social support for disabled persons was 3.6%.

In comparison to 2001², the state social insurance expenditure in 2006 were higher by a factor of 1.86. Among the above three expenditure categories, the growth was most significant with regard to family benefits and the parental benefit – by a factor of 1.93. This was mainly affected by the parental benefit introduced in 2004, which accounts for 73% of the increase in the family benefits. The increase of the expenditure on state pension insurance – by a factor of 1.88 – only slightly exceeded the increase in general social insurance expenditure. The increase was slowest with regard to the social support for disabled persons – only by a factor of 1.32. The reason 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 the state budget and GDP has decreased over the period 2001–2006. While in 2001 the expenditure on state social insurance constituted 8% of the GDP, this level had been reduced by 0.3 percentage points to 7.7% by 2006. Even though the portion of social insurance expenditure constitutes nearly one quarter of the state budget, there is a decrease in percentage terms and it is faster than the decrease in relation to GDP. While in 2001 the social insurance expenditure constituted 29% of the state budget, this percentage had dropped to 23.9% in 2006. There is a simple reason for that. Namely, the growth of GDP and the state budget from 2001 to 2006 exceeded significantly the growth of funds allocated for social insurance, with GDP increasing by a factor of 1.91 and the state budget by a factor of 2.25.

However, state budget expenditure on social welfare increased during the period from 2000 to 2006 only by a factor of 1.22. This modest growth was mainly affected by the decrease in social benefits. The increased standard of living has significantly reduced the need for subsistence benefits. The expenditure on subsistence benefits in 2006 were less than half of the corresponding expenditure in 2000 (dropping from 306 million EEK in 2000 to 136 million EEK in 2006).

Even though the expenditure on social welfare services have increased by a factor of 1.44 during the period 2000–2006, the relative importance of these expenditure in GDP and the state budget has decreased.

² Comparison data from year 2001 are provided because by this year the Social Benefits for Disabled Persons Act had fully enforced.

The total sum of social protection expenditure in 2005, calculated according to the ESSPROS method, amounted nearly to 22 billion EEK, including 43% age-related expenditure. The second highest category included expenditure associated with medical services and healthcare (32%), followed by families and children (12%) and, finally, disabilities and incapacity for work (9%).

In comparison to 2000, the expenditure in 2005 increased by a factor of 1.65. The percentage of social protection expenditure in GDP in 2005 was 12.5%³, which was the lowest level since 2000.

Table 1. Number of service users, expenditure and financing of welfare services¹, 2003–2006 (during the year)

Type of service and year	Number of service users (during the year)	Total expenditure (thousand EEK)	Financed by, %					
			Person	Local government	State	incl.		Other sources
						state budget	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
2005	...	975 331,1	20,7	28,3	49,6	49,4	0,2	1,5
2006	...	1 137 063,1	22,0	40,1	36,5	36,1	0,4	1,4
Institutional welfare services to orphans and children without parental care (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
2005	1 905	142 676,8	0,1	2,5	91,2	91,1	0,1	6,2
2006	1 807	160 874,9	0,1	2,5	90,8	90,3	0,5	6,6
Institutional welfare services to children with severe or profound disability upon parents' 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
2005	136	9 741,4	11,7	28,5	59,0	59,0	...	0,8
2006	131	11 326,2	11,9	28,5	59,2	59,2	...	0,4
Institutional welfare services to adults (excl. 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
2005	6 422	257 339,4	50,3	47,6	1,5	1,3	0,2	0,5
2006	6 828	303 777,6	55,0	43,1	1,7	1,3	0,3	0,2
Welfare services to 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
2005	5 297	182 609,1	23,3	4,5	71,4	71,0	0,4	0,7
2006	5 698	205 878,8	24,7	8,1	66,3	65,4	0,8	1,0

continued ►

³ In 2006 Statistics Estonia retrospectively adjusted the 2000–2005 GDP indicators in accordance with the changed methodology. In 2007, retrospective calculations were made also concerning years 2003–2006. New adjusted GDP indicators have been used throughout this collection.

► continuation

Type of service and year	Number of service users (during the year)	Total expenditure (thousand EEK)	Financed by, %					Other sources
			Person	Local government	State	incl.		
						state budget	gambling tax	
Rehabilitation services to 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	–	–
2005	1 035	6 162,1	0,0	2,2	97,8	97,6	0,2	–
2006	1 198 ⁴	5 808,0	...	...	100,0	100,0	–	–
Rehabilitation services to the 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
2005	15 861	33 315,3	2,1	4,9	92,3	92,0	0,3	0,8
2006	11 008 ⁴	30 509,9	...	...	100,0	100,0	–	–
Rehabilitation service for minors with behavioral special needs¹								
2005	11	50,6	–	–	100,0	100,0	–	–
2006	34	161,6	–	–	100,0	100,0	–	–
Prosthetic, orthopedic and other devices								
2003	25 292	46 147,5	23,1	–	76,9	76,9	–	–
2004	26 369	42 484,8	25,4	–	74,6	74,6	–	–
2005	34 790	64 247,0	25,7	–	74,3	74,3	–	–
2006	38 249	72 608,1	27,5	–	72,5	72,5	–	–
Shelter services and rehabilitation services to people released from penal institutions								
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
2005	2 606	27 029,1	0,5	88,6	9,7	9,1	0,6	1,2
2006	2 487	28 979,7	1,4	85,8	10,5	9,4	1,1	2,3
Housing services in the form of social housing, premises, support homes								
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
2005	4 194	26 133,6	26,7	71,7	1,1	1,1	...	0,6
2006	4 655	30 163,6	17,9	80,6	1,2	0,4	0,8	0,3
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
2005	60 947	52 427,3	6,8	88,2	1,7	0,8	0,9	3,3
2006	65 869	56 825,1	8,2	86,8	2,1	0,7	1,4	2,9
Domestic 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	–	–
2005	5 696	40 661,6	1,0	98,5	0,5	0,5	–	–
2006	6 082	49 518,3	1,4	98,0	0,6	0,6	–	–
Night shelter services 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
2005	1 880	6 899,7	0,1	99,9	–	–	–	–
2006	1 535	7 106,4	0,0	100,0	–	–	–	–

continued ►

► continuation

Type of service and year	Number of service users (during the year)	Total expenditure (thousand EEK)	Financed by, %					
			Person	Local government	State	incl.		Other sources
						state budget	gambling tax	
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
2005	1 246	11 312,9	0,0	10,5	88,5	88,5	–	0,9
2006	915	9 208,2	0,5	14,5	83,7	83,7	–	1,3
Guardianship								
2003	2 076	25 617,0	–	–	100,0	100,0	–	–
2004	1 991	21 599,0	–	–	100,0	100,0	–	–
2005	1 868	19 937,0	–	–	100,0	100,0	–	–
2006	1 814	18 599,0	–	–	100,0	100,0	–	–
Welfare services to disabled adults								
2005	22 831 ⁵	94 788,1	–	–	100,0	100,0	–	–
2006	22 600 ⁵	142 839,6	–	100,0	–	–	–	–
Appointed caregiver's service								
2006	126	1 338,0	7,5	78,6	13,9	13,9	–	–
Support person's and support family service								
2006	501	1 540,0	0,3	85,8	10,8	10,3	0,5	3,0

1 Expenses directly related to the provision of services and sources of financing.

2 Number of service users reflects the total added number of users of different type of services, not the number of single service users.

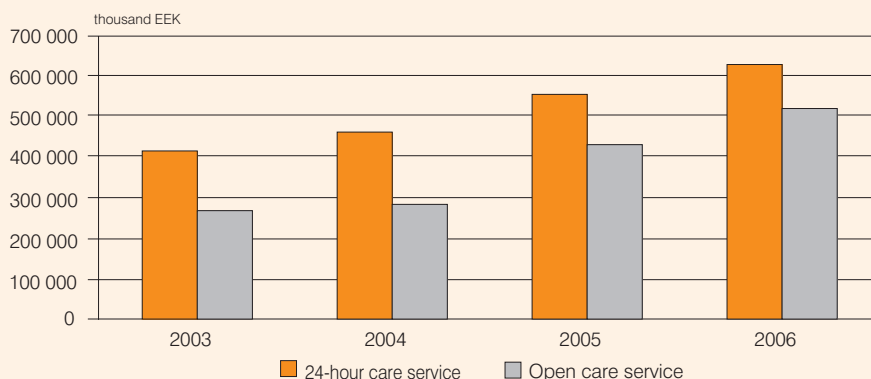
3 Expenditure on rehabilitation services is presented in the table „Expenditure on social insurance and welfare from the state budget“ under the other benefits and payments for social insurance.

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 2006. A person may produce several application during the period.

5 At the end of the year.

Source: Ministry of Social Affairs

Figure 1. Expenditure on 24-hour care services and open care services, 2003–2006



Source: Ministry of Social Affairs

Table 2. **Expenditure on social insurance and welfare from the state budget, 2000, 2002 and 2004–2006** (during the year, million EEK)

	2000	2002	2004	2005	2006
Social insurance¹	8 097,4	9 528,0	12 227,1	13 602,6	16 018,4
State pension insurance	6 473,8	7 285,6	9 199,3	10 516,0	12 477,8
Social benefits for disabled persons	75,7	565,2	630,1	571,3 ²	580,3
Family benefits	1 317,0	1 395,4	2 106,0	2 195,8	2 541,6
incl. parental benefit	–	–	441,3	552,6	898,0
Other benefits and payments ³	74,7	88,7	112,5	149,3	160,1
Social tax paid from the state budget in special cases ⁴	108,5	141,5	141,8	134,9	226,8
Payment expenses on pensions and benefits	47,7	51,6	37,4	35,3	31,8
Percentage of social insurance expenditure, %					
of GDP	8,5	7,9	8,2	7,8	7,7
of the state budget	28,4	27,8	25,7	24,6	23,9
Administration expenses of the Social Insurance Board	79,6	80,6	90,8	99,0	110,4
Social welfare	568,0	672,7	563,5	769,4	693,4
Social benefits	318,3	347,9	235,0	273,7	214,3
benefits from the subsistence benefit funds	315,3	347,9	235,0	251,7	192,7
subsistence benefit	305,3	326,6	216,8	207,8	135,4
supplementary benefit	10,0	21,3	18,2	43,9	57,3
other expenses from the subsistence benefit funds	–	–	–	10,1	21,6
cash benefits for adults with disabilities ²	–	–	–	11,9	–
other benefits ⁵	3,0	–	–	–	–
Social services	249,7	258,5	283,6	425,9	360,1
state welfare for persons with special mental needs ⁶	96,8	98,8	105,5	129,5	134,0
institutional welfare services for adult ⁷	6,2	4,0	3,4	3,4	3,4
state welfare for children ⁸	88,6	105,7	121,4	138,4	147,1
services to adults with disabilities/welfare services ²	–	–	–	82,9	–
operating expenses of vocational training centre for disabled people	11,4	13,1	15,9	17,6	17,7
partial compensation of the cost of prosthetic and other devices	23,2	26,2	31,9	47,9	52,9
national welfare programmes	12,6	6,4	1,8	2,5	1,5
other services	10,9	4,4	3,7	3,7	3,5

continued ►

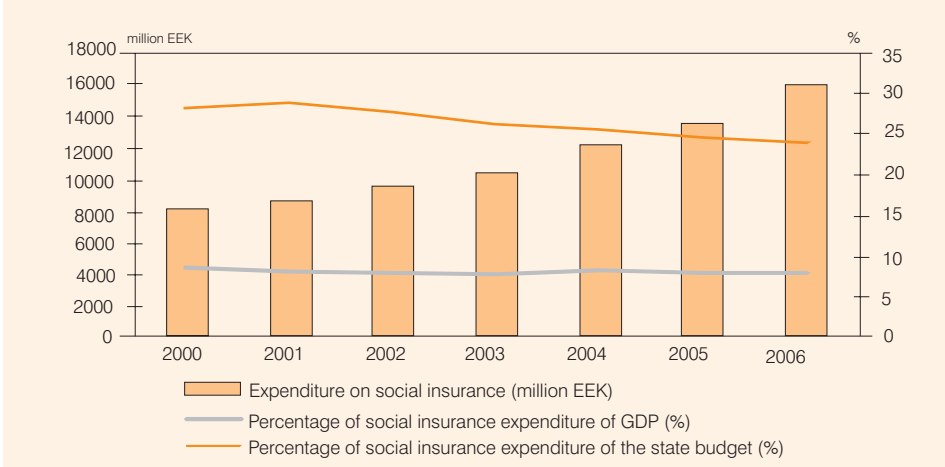
► continuation

	2000	2002	2004	2005	2006
Other expenditure related to welfare	...	66,3	44,9	69,8	119,0
investments into welfare institutions from the state budget and gambling tax ⁹	...	50,2	23,1	42,6	82,8
welfare projects financed from gambling tax	...	16,1	21,8	27,2	36,2
Percentage of social welfare expenditure, %					
of GDP	0,6	0,6	0,4	0,4	0,3
of state budget ⁵	2,0	2,0	1,2	1,4	1,0

- 1 Does not include health insurance and unemployment insurance (covered in sections "Health protection" and "Labour market").
- 2 Since 01.04.2005 the funds for disabled adult caregiver's allowance (incl. funds for social tax) were transferred to local governments, see the subsection "Social services" of the same table.
- 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 childcare leave, additional days off for parents of disabled children, paid breaks for feeding children, treatment in rehabilitation centres, funeral benefit, social benefit for Estonian citizens who have settled in Estonia from a foreign country or persons of Estonian nationality and compensations to victims of crime.
- 4 Social tax is paid from the state budget via the Social Insurance Board for receivers or childcare allowance and parental benefit, persons taking care of disabled people, in certain cases also for dependents and people returning to Estonia.
- 5 Transport benefit for disabled people and benefit for the victims of the Chernobyl disaster, paid as a social insurance benefit since 2001.
- 6 Expenses of welfare institutions and open care services.
- 7 The expenses of adult persons placed in general care homes before 1 January 1993 are covered from the state budget.
- 8 For providing sustenance and rehabilitation services to orphans and children left without parental care in foster care and welfare institutions.
- 9 Since 2003 only investments from the state budget.

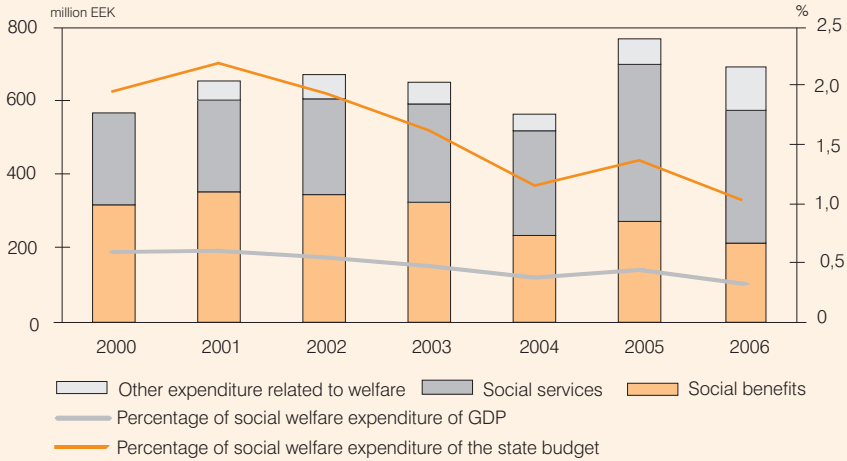
Source: Social Insurance Board, Ministry of Social Affairs

Figure 2. Expenditure on social insurance, percentage of GDP and of the state budget, 2000–2006



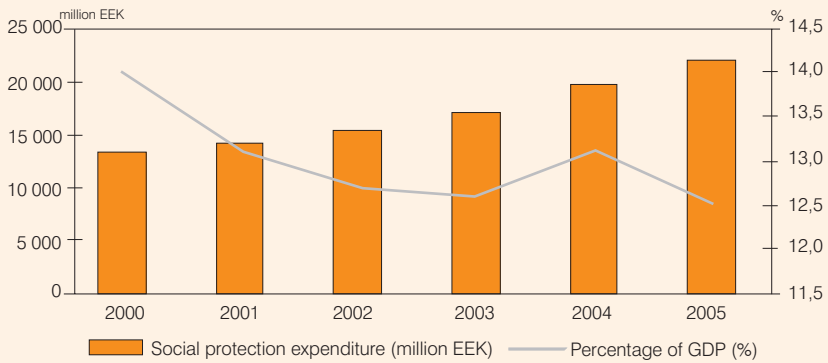
Source: Social Insurance Board, Ministry of Social Affairs

Figure 3. Expenditure on social welfare, percentage of GDP and of the state budget, 2000–2006



Source: Ministry of Social Affairs

Figure 4. Social protection expenditure (incl. administration expenses) and percentage of GDP, 2000–2005



Source: Statistics Estonia

Table 3. **Social protection expenditure, 2000, 2002 and 2004–2005** (based on ESSPROS methodology)

Types of expenditure	2000	2002	2004	2005
Total expenditure (million EEK)	13 358,3	15 404,6	19 693,4	21 967,4
Expenditure on social protection benefits, total	13 148,9	15 174,6	19 414,6	21 645,7
sickness, health care	4 221,4	4 719,4	6 106,4	6 913,8
disability, incapacity for work	869,3	1 355,0	1 774,0	2 031,5
old age	5 704,5	6 617,0	8 320,9	9 337,5
survivors	258,1	188,9	157,3	185,2
family and children	1 568,4	1 725,6	2 464,0	2 630,1
unemployment	167,8	166,0	309,9	286,1
housing	93,3	96,2	70,3	50,3
social exclusion	266,1	306,4	211,9	211,2
administration expenses	209,4	230,0	278,8	321,8
Structure of expenditure, % of total	100,0	100,0	100,0	100,0
sickness, health care	32,1	31,1	31,5	31,9
disability, incapacity for work	6,6	8,9	9,1	9,4
old age	43,4	43,6	42,9	43,1
survivors	2,0	1,2	0,8	0,9
family and children	11,9	11,4	12,7	12,2
unemployment	1,3	1,1	1,6	1,3
housing	0,7	0,6	0,4	0,2
social exclusion	2,0	2,0	1,1	1,0
Percentage of GDP¹, %				
Total	14,0	12,7	13,1	12,5
sickness, health care	4,4	3,9	4,1	3,9
disability, incapacity for work	0,9	1,1	1,2	1,2
old age	6,0	5,5	5,6	5,3
survivors	0,3	0,2	0,1	0,1
family and children	1,6	1,4	1,6	1,5
unemployment	0,2	0,1	0,2	0,2
housing	0,1	0,1	0,0	0,0
social exclusion	0,3	0,3	0,1	0,1
administration expenses	0,2	0,2	0,2	0,2

¹ In 2007, Statistics Estonia retrospectively adjusted the 2003–2006 GDP indicators, therefore percentages of GDP concerning mentioned years somewhat differ from those presented in previous collections by the Ministry of Social Affairs.

Source: Statistics Estonia

