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Research Report

Project: Women and Enlargement Final Report (English)

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Study for the European Parliament

August 2004

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EXECUTIVE SUMMARY

This report considers the position of women in the countries that joined the EU in May 2004 and those countries which remain candidates for membership. These countries fall into four groups:

- the transformation countries of Eastern and Central Europe: Lithuania, Estonia, Latvia, Poland, Hungary, Czech Republic, Slovakia and Slovenia which became members of the EU in June 2004;
- Romania and Bulgaria, which are also former communist countries and are candidates for membership of the European Union;
- Malta and Cyprus which are new member states;
- Turkey which is a candidate for membership.

We refer to the first two groups collectively as Eastern and Central Europe (ECE). Far less information is available for groups 3 and 4 so we have concentrated mainly on the ECE countries because there is relatively little information available for groups 3 and 4, especially group 4. Groups 1 and 2 represent the post-communist trajectory with one set of gender ideologies whilst groups 3 and 4 represent rather than “Southern” model of gender relations. Within each group there are also important differences in the speed of reforms. The report considers the situation of women in the thirteen countries, compares their situation with women in the EU 15 and draws out the implications of enlargement of the EU for women. The EU has been concerned to promote equality of opportunity for women in member states and at the community level and it is especially necessary to consider if enlargement will have any impact on the situation of women in the new member states or potentially influence the situation of women at the EU level of in the EU 15.

The Report shows that the transformation of the societies of Eastern and Central Europe has led to profound changes in the role of women. In terms of employment, these countries have moved from being full employment countries to ones where there is deeply entrenched structural unemployment. This unemployment especially affects women and young women in particular. However, the disappearance of women from the labour force is concealed by the fact that many have taken early retirement, work unpaid in family businesses or have become “housewives”. In the past women were expected to work full time for their whole lives in the same way as men and received their social security based upon this contribution to society. This is still the expectation. Although part-time work has been introduced, women (and men) expect to work full time. This is not only a social expectation but also because the relatively low wages mean that more than one income is needed for households to manage. Thus, despite the drop in women’s participation compared with the 1980s, the ECE countries still come nearer to meeting the Lisbon targets of 60% of working aged women employed than do many EU 15 countries. The gender wage gap is nevertheless quite large in ECE countries and women are under-represented in new and more important professions such as managers, proprietors and self-employed. They are over-represented in certain professions such as medicine and teaching, which are very low paid. The situation of women in the Mediterranean countries that we are considering is more “traditional” with high involvement in the family and less in the labour market.

The pattern of labour market participation as well as other indicators, follows to some extent the path of transition in different countries. All countries experienced an initial economic crisis when the structural reforms started to be introduced (liberalisation of the economy, opening of the labour market, convertability of the currency etc.). Some countries, such as the Czech Republic, Slovenia, Poland, Slovakia and Hungary started to improve economically from the middle 1990s. These countries are quite well advanced in terms of

reforms. In other countries such as the Baltic States (Lithuania, Latvia, Estonia), whose economies were much more embedded in the Soviet system, the recovery took longer – from the later half of the 1990s and there are still quite big differences between the advanced level of reforms in Estonia and the slow pace of reform in Latvia. In Romania and Bulgaria reforms have been very slow too and recovery only began from the end of the 1990s. Even now, they face much deeper economic crisis than the other countries we are considering. In Malta, Cyprus and Turkey, by contrast we see only economic improvement over the period in question.

The educational levels in ECE countries were traditionally high and the vocational educational system was especially well developed. Women are over represented at this level and also form the majority of graduates in many countries, although less often in science and technology. Women are most likely to benefit from life-long learning programmes. Fewer women are found among those with no qualifications or at the lowest levels of education. Hence, the basic infrastructure for the improvement of women's situation exists already.

The New Member States and Candidate Countries of ECE have suffered a dramatic decline in the birth rate since the onset of the transition and this is often a continuation of earlier trends. Levels of fertility have fallen as women have effectively begun a "birth strike". From relatively high levels of fertility under the previous regimes encouraged by financial incentives (housing, grants) these countries now have among the lowest fertility in Europe. This is partly a consequence of new sources of professional realisation, travel, consumerism and so on that have introduced different priorities. However, it is also a consequence of economic uncertainty and unemployment that make it difficult to plan families. Finally the transition has led to the cutting back of many forms of child care assistance that were previously rather generous and in some countries no alternatives have been introduced. Hence, we see different patterns of family formation with a rise in the diversity of family forms (single parents, cohabitation, single households) and a postponement of family formation. In the long term this signals an ageing population and shrinking of the workforce, as in Western Europe. However, the effects are postponed because of the high levels of fertility previously.

One reason for the fall in fertility is lack of affordable child care provision. Although child care provision might have fallen in comparison with the 1980s, it is still relatively good in ECE countries compared with many countries in the EU 15. In the more advanced transformation countries, extensive child care facilities have been introduced under local authority jurisdiction and the private sector is expanding. New legislation encouraging women to stay at home as paid carers is available for up to four years after the birth of a child. In the less advanced transition countries (for example, Bulgaria, Romania) the main substitute for the previous public child care facilities is either the extended family.

The life expectancy in ECE countries is still substantially below that in the EU 15, but the situation is much worse for men than for women. On a range of both non-infectious (heart disease, cancer) and infectious diseases (tuberculosis) women are far less affected than men. Even in the case of social and psychological pathologies such as suicide, mental disorders, homicides, women are much less affected than men. This contrasts with their subjective views which are that their health is not good. Men, by contrast, feel subjectively well although the statistics tell us that they are at far more risk of mortality from a range of causes. However, in terms of some diseases such as cervical and breast cancer, women's health seems to be getting worse since the transition. This means that the ageing societies will be comprised mainly of older women in future.

Despite the relatively high participation of women, attitudes towards women are very “conservative” and “traditional”. Most people do not believe that women make good politicians or that they should earn more than men. Attitudes are more conservative than in Western Europe, but less so than in Turkey. Furthermore, men do less for the care of children than is the case in some Western countries. This belief in women’s subordination however, goes alongside the idea that it is women’s duty to work and to contribute to the household economy, so this is not the same as the traditional idea of the “male breadwinner” role that we find in Western Europe. Participation in the workforce alongside a rather one-sided division of labour in the home means that women have a “double burden” of work and care that is even more onerous than for women in Western Europe, although they express no feelings of conflict in this respect. It is probably simply a continuation of what has gone on for several decades. However, it is not surprising that women do not find such good jobs and are not so represented in politics under these circumstances: where would they find the time? Also, the idea of a birth strike perhaps makes more sense under these circumstances if women reject shouldering this double burden.

Women are severely under-represented in politics in all the New Member States and Candidate Countries, their representation having fallen by up to 75% as a result of the transition. This seems to be the case at the local as well as the national level as it is in leadership positions. Where women are in leadership positions it tends to be in fields of social, arts and culture rather than fields such as the economy. The rather good childcare facilities are often the result of pro-natalist policies or the legacy of the past rather than the result of lobbying on behalf of women or a widespread feminist movement. Women are even more under-represented in this respect than in most Western European countries, although some measures have been put into place to improve this situation.

Accession to the European Union and participating in the *acquis communautaire* means that the New Member States and Candidate Countries have had to sign up to agreements on women’s participation and gender mainstreaming. This rather goes against the current ideologies in many New Member States. It remains to be seen to what extent the commitments on paper can be turned into real achievements for improving the position of women. Indeed, in a number of Eastern and Central European countries there has been an upsurge in what we might term “masculinism” such that more traditional roles are seen as suitable for women and this is reflected in the discourse of prominent politicians. This, along with the rather conservative attitudes towards women’s roles that predominate mean that we might see a reversal of the emphasis on gender mainstreaming and equal opportunities that have been an important plank of EU legislation as the influence of the New Member States and Candidate Countries starts to be felt. Hence we may see a reshaping of the European Social Model with a strong emphasis on social security but a weaker emphasis on gender issues as a result of Enlargement.

The Report draws upon secondary statistical data that has been compiled and standardised by reliable international sources: Eurostat, the World Health Organisation (WHO) and UN ESCO being the main sources. Information about social policies is drawn from international publications and data bases such as MISSEC. This information is supplemented by data from other projects on which we have worked, most notably that of “Households, Work and Flexibility” (HPSE-CT-1999-0030) a project carried out under the Fifth Framework Programme of the European Commission. This information was supplemented by analysis of recent surveys such as the Eastern European Eurobarometer from 2002 and the World Values Surveys/European Values Surveys from 1990/1995/1999. Although these data sources are quite comprehensive, inevitably, some countries are covered in more detail than others and often countries are missing. Therefore, coverage of the New Member States and Candidate

countries is not always even. We have concentrated on the period from 1990 onwards because there is little comparable data before that. Where possible we compare these countries with the EU 15 or with selected countries from the EU 15.

CHAPTER I: INTRODUCTION TO THE CHANGING SOCIAL ROLE OF WOMEN IN THE CONTEXT OF EUROPEAN UNION ENLARGEMENT

1. Introduction

In July 2004 the European Union became the world's largest political and economic trading bloc when 10 new countries joined the existing 15 member states. Further expansion is anticipated as there are also three candidate countries. This report considers the implications for women of the enlargement of the EU. It examines the position of women in the new member states and candidate countries and the implications for them of EU membership as well as the implications of enlargement on the situation of women more broadly in the EU. The new member states are the transformation countries of Eastern and Central Europe: Lithuania, Estonia, Latvia, Poland, Hungary, Czech Republic, Slovakia and Slovenia together with Malta and Greek Cyprus. Romania and Bulgaria and Turkey are the candidate countries. The countries of Eastern and Central Europe are broadly similar in terms of the situation of women and have shared similar trajectories of change since the fall of communism in 1991 and we generally consider them together. Malta and Greek Cyprus are conservative 'Mediterranean' countries – the former Roman Catholic and the later Greek Orthodox. Turkey is also conservative and although it has a secular state the position of women is heavily influenced by relatively secular Muslim culture.

The Report draws upon secondary statistical data that has been compiled and standardised by reliable international sources: Eurostat, the World Health Organisation (WHO) and UNESCO being the main sources. Information about social policies is drawn from international publications and databases such as MISSEC. This information is supplemented by the data from other projects on which we have worked, most notably "Households, Work and Flexibility" (HPSE-CT-1999-0030) supplemented by analysis of recent surveys such as the Eastern European Eurobarometer (2002) and the World Values Surveys/European Values Surveys (1990/1995/1999). While these data sources are relatively comprehensive, some countries are covered in more detail than others and data are not available for all the countries for all the issues covered. Consequently, coverage of the New Member States and Candidate countries is not always even. Recognising that the position of women and gender relationships are dynamic we have in terms of considering the present position of women in the context of social trends from 1990 where possible we compare the new member states and the candidate countries with the EU 15 as a whole and/ or with selected EU 15 member states.

The radical political and economic changes in Central and Eastern Europe have had profound implications for the respective societies. Ralf Dahrendorf, at the beginning of the transition described the changes as that of three clocks: whilst the first clock (political change) was moving forward rather quickly, the second clock (economic change) was moving at a slower pace and the third clock (social changes) was moving far more slowly¹. Therefore, looking back over the last 15 years we can start to assess the movements of the third clock in the evolution of transitional societies.

Women had a special role in the former communist countries, where they were expected to be fully productive full time workers in the same way as men. The family as an institution took a "modern" form that is only now evolving in Western Europe, with at least two full time wage earners (under normal circumstances). At the same time, wages were very low for both sexes

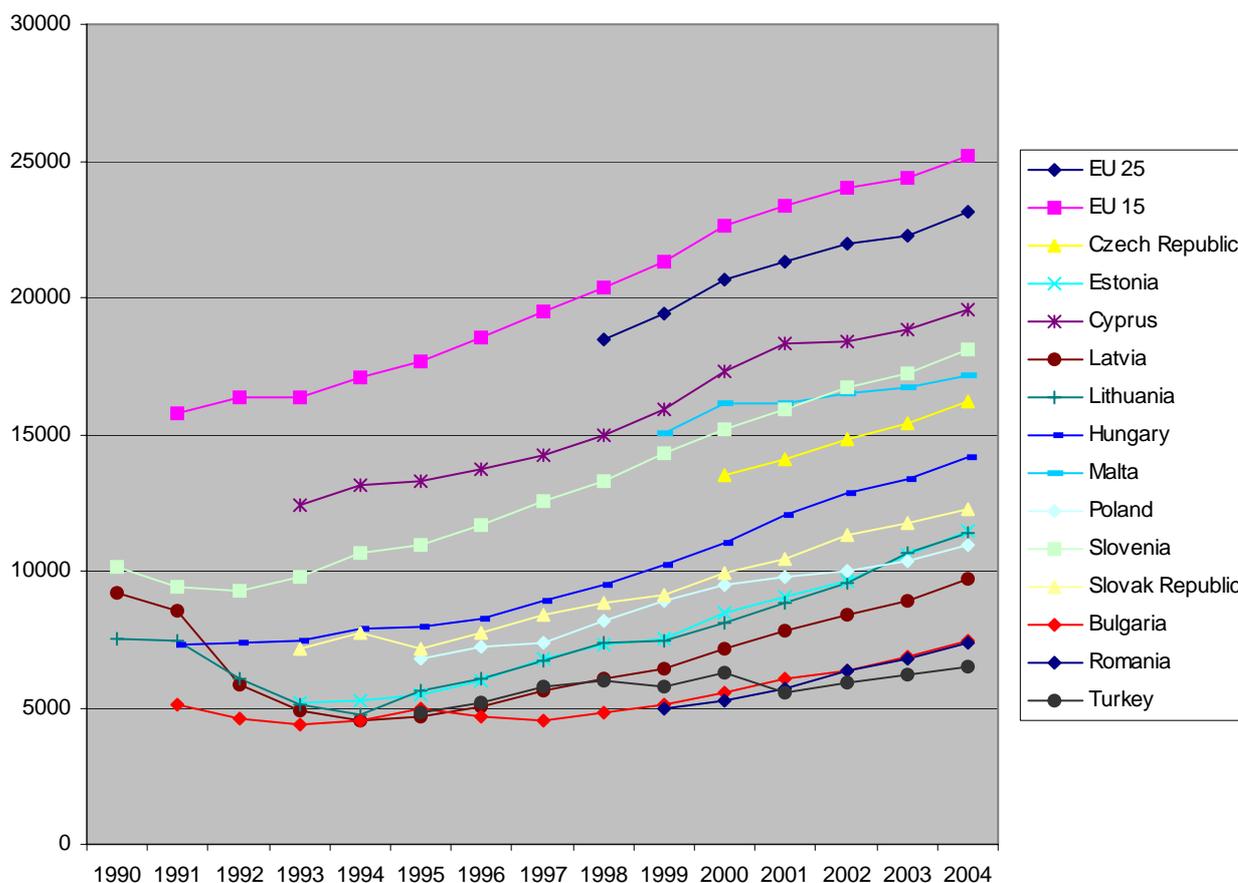
¹ Dahrendorf, R., *Reflections on the Revolutions in Europe*, Chatto and Windus, London, 1996.

(for women there was also a gender wage gap) and women had to work in order to maintain family budgets that could not be sustained on one income. Under the former regimes, women benefited from many welfare and family benefits provided by employers or by the state, which also supported their role within the family. Hence, women had long periods of paid child care leave (up to 2 or 3 years), crèches and kindergartens that took in children from early in the morning to late at night, and women were given their jobs back when they returned to work. They also had their childrearing years taken into account for their pension entitlements so that many women could retire early. Favourable housing policies towards families meant that having children was almost universal and most people had families in their early 20s. The fertility rates of the communist countries which are now the New Member States were therefore rather high. Nevertheless, the extended family was an important resource for women, and the early retirement of women along with early ages of child bearing meant that “grandmothers” were available for baby sitting and for helping out busy young mothers². Indeed, lack of housing meant that the generations often lived together in multiple generation households. However, comparative surveys found that under communism attitudes to women in Eastern and Central Europe were even more patriarchal and conservative than in Western Europe³. Following the transition, there has been increasing divergences emerging in the path of reform among the different Enlargement countries. This can be illustrated using economic data as is shown in Graph I-1 below.

² Mozny, I., “The Czech Family in Transition: from social to economic capital. Social Reform in the Czech Republic”, S. Ringen and C. Wallace, Central European University, Prague, 1994.

³ Siemienska, R., “Reconciliation of family and work in Poland. Factors shaping conceptions of women's and men's roles. Reconciliation of family and work in Eastern European Countries”, M. E. Domsch and D. H. Ladwig, Peter Lang, 2000.

Graph I - 1: GDP per capita in PPS



Source: Eurostat database

The data for 2004, 2003 (except EU 15), 2002 (except EU 15, EU 25, Bulgaria, Cyprus and Poland) are forecasts

Whilst in the the EU 15 there is a clear trend of increasing GDP per capita PPS for the whole period 1990 and 2004, the New Member States and Candidate countries from Central and Eastern Europe have experienced economic decline and then recovery during the course of transformation (Graph I-1). All countries experienced a drastic slump in their economic situation following the introduction of structural reforms in the late 1980s/early 1990s (liberalization of the economy, opening of the labour market). The countries in Central Eastern Europe or ECE (Slovenia, Hungary, the Czech Republic, Slovakia and Poland) recovered first from the middle of the 1990s. The Baltic States took a little longer to recover and within the Baltic States the period of growth affected Lithuania and Estonia more than Latvia. The South Eastern European Candidate countries (Bulgaria and Romania) began to recover only at the end of the 1990s. They are still suffering considerable problems of economic adjustment.

Cyprus and Malta have high level of GDP per capita PPS, i.e. near to the EU 15 averages, and have enjoyed constantly rising GDP over the last ten years. Turkey has a relatively low level of GDP per capita PPS which even decreased from 1998 to 2001 before starting to rise once more.

The transformation of society since 1988 has had profound impacts on the role of women. There has been more sympathy for the “male breadwinner” model of the household among some sections of the population, although on the whole women are expected to maintain their productive role in the labour market. Although wages remain relatively low, meaning that a family needs two incomes to survive, many women have lost their jobs in the workforce. In particular it is difficult for women to return to their previous positions after maternity and childcare leave. The increasing numbers of women defining themselves as “housekeepers” are thus a new group of hidden unemployed. There has also been a reduction in the support provided for working families although in the more affluent transition countries, such as Hungary, Slovenia and the Czech Republic, many of the childcare benefits, including lengthy paid maternity leave (2-4 years) and kindergartens for children have been restored, whilst in less affluent societies, such as Romania and Bulgaria, women have neither realistic paid leave nor affordable childcare facilities. In these societies therefore the situation of women has declined still further.

At first sight to have benefited from the transition. The high levels of premature mortality in Central and Eastern European countries did not affect women as profoundly as men and female life expectancy continues to improve more than that of men's. New opportunities to travel and to develop their own careers have opened up. However, the poor and deteriorating economic situation of women which leaves many young women, for example, with no income and no economic prospects at all, makes them vulnerable to various forms of exploitation⁴. Lack of legislation to promote equal opportunities means those women can be quite openly discriminated against on the labour market. Many commute to Western Europe to work as illegal domestic workers or caregivers for children and elderly in private homes, leaving their own children behind them⁵. Others fall into the hands of traffickers and many thousands disappear each year into the brothels in Western Europe or the Middle East; some of the luckier ones manage to escape⁶. The visible explosion of prostitution in the border areas with the European Union is perhaps also an indication of the poor economic prospects for women in other fields.

The model of women as productive workers continues to prevail in the New Member States and Candidate countries of Eastern and Central Europe. However, there are tensions between this and the patriarchal views of the division of labour that we explore in the final chapter, the under-representation of women in public life and the increasingly conservative social policies being introduced which privilege women as carers. In addition, there is a rise of “masculinist” rhetoric in public life⁷. On the whole these societies do not see women's positions as being problematic and their rights have not been openly challenged. The exception perhaps is the case of reproductive rights, mainly in the Catholic New Member States such as Poland and Lithuania, where the right to abortion has been challenged. Under the previous regimes there was a right to abortion (except in Romania) but this was in the context of inadequate contraception, so that abortion was a method of contraception. Now, whilst rights to abortion have been challenged in some countries, the availability of more user-friendly methods of

⁴ International Organisation for Migration (IOM) quarterly report 2001, Geneva Reports on trafficking of migrants.

⁵ Caixeta, L., B. Haas, et al., “Housework and Caretaking Part: Austria. Migrant Women in Private Households”, MAIZ, Linz, 2004.

⁶ Lazaridis, G., “Trafficking and Prostitution: the Growing Exploitation of Migrant Women in Greece”, in *European Journal of Women's Studies*, 2001, Vol. 8, No.1, pp. 67-102.

IOM, Op.cit.

⁷ Watson, P., “Politics, policy and identity: EU eastern enlargement and East-West differences.” *Journal of European Public Policy* 7(3), 2000, p.: 369-84.

contraception have made these challenges perhaps less alarming than they might have been.

However, there has been a patriarchalisation of society in more ways than one⁸. The reassertion of a more dominant model of masculinity is seen in the assertively patriarchal statements of leading politicians such as Vaclav Klaus who have tried to define a new kind of post-communist masculinity, claiming that communism represented an emasculation of men, whilst capitalism brought the opportunity for men to reassert themselves. In Poland and in other countries, a conservative political gender has been advanced which recommends that women celebrate their roles as carers and mothers⁹. There is a deluge of crude sexist images both in advertising and in the universally prevalent pornography that is seen as the hallmark of “freedom” leading to an instrumentalisation of women. There is open discrimination in job advertising, unchecked by any sense of “political correctness” or gender discrimination legislation, such as has been developed in Western Europe.

The gender mainstreaming and gender awareness policies of the European Union, introduced through the Accession process might help to challenge this, but there is also evidence that this aspect of EU legislation has been marginalized in the Accession process¹⁰.

In this report we explore the situation of women in detail. The first chapter represent an introduction to the changing social role of women in the context of EU enlargement; Chapter II looks at the demographic trends; Chapter III examines the educational and professional training and employment; in Chapter IV we consider women and health; in Chapter V we look at the representation of women in politics; Chapter VI explores the gender roles and the recent changes regarding them; Chapter VII looks at the social security system and the social role of women; an overview of the child care services is done in Chapter VIII; Chapter IX examine the application of EU legislation in terms of equal opportunities within the process of EU enlargement and Chapter X presents the conclusions and policy recommendations concerning the social role of Women in the New Member States and Candidate countries.

⁸ Watson, P., "Eastern Europe`s Silent Revolution: Gender." *Sociology* 27(3), 1993, pp. 471-488.

⁹ Ragulska, J., "The political' and its meaning for women: transition politics in Poland. *Theorising Transition*. J. Pickles and A. Smith. London and New York, Routledge, 1998.

Siemienska, R., Reconciliation of family and work in Poland. Factors shaping conceptions of women's and men's roles. *Reconciliation of family and work in Eastern European Countries*. M. E. Domsch and D. H. Ladwig, Peter Lang, 2000.

Watson, P., "Politics, policy and identity: EU eastern enlargement and East-West differences." *Journal of European Public Policy* 7(3), 2000, p. 369-84.

¹⁰ Bretherton, C., "Gender mainstreaming and EU enlargement: swimming against the tide?" *Journal of European Public Policy* 8(1), 2001, p. 60-81.

CHAPTER II: DEMOGRAPHIC TRENDS AND THE CHANGING SOCIAL ROLE OF WOMEN

1. Introduction

Demographic trends across Europe are broadly comparable – delayed marriage and family formation, relatively low birth rates and an ageing population. There have been some striking changes over the last ten years in the new member states and candidate countries with falling birth rates and a consequent decline in the average number of children per family, an increasing rate of extra-marital childbearing, of consensual unions, of single households (in some countries). These trends have a bearing on the expectations and role of women as they spend less time in bearing and caring for children and can expect a relatively long period of life after their children are no longer dependent. However an ageing population can place additional burdens of providing informal care for elderly relatives on women. An ageing population combined with a tendency for young people to spend longer in education and training means there is a decline in the proportion of the working age population. Population projections show that the fall in the number of employed persons between 2010 and 2030 might be of the order of 20 million workers for the EU 25, which is a negative trend in the context of the Lisbon strategy's targets. This potentially has negative social and economic consequences for the labour market, educational system, social security systems and public pension systems as the dependency ratio grows. The burden of the cost of social benefits on the working population may mean that there may be pressure on the support provided for working women and women may experience poverty in old age as they have to survive on reduced pensions that are increasingly employment related or become dependent upon their children and extended family.

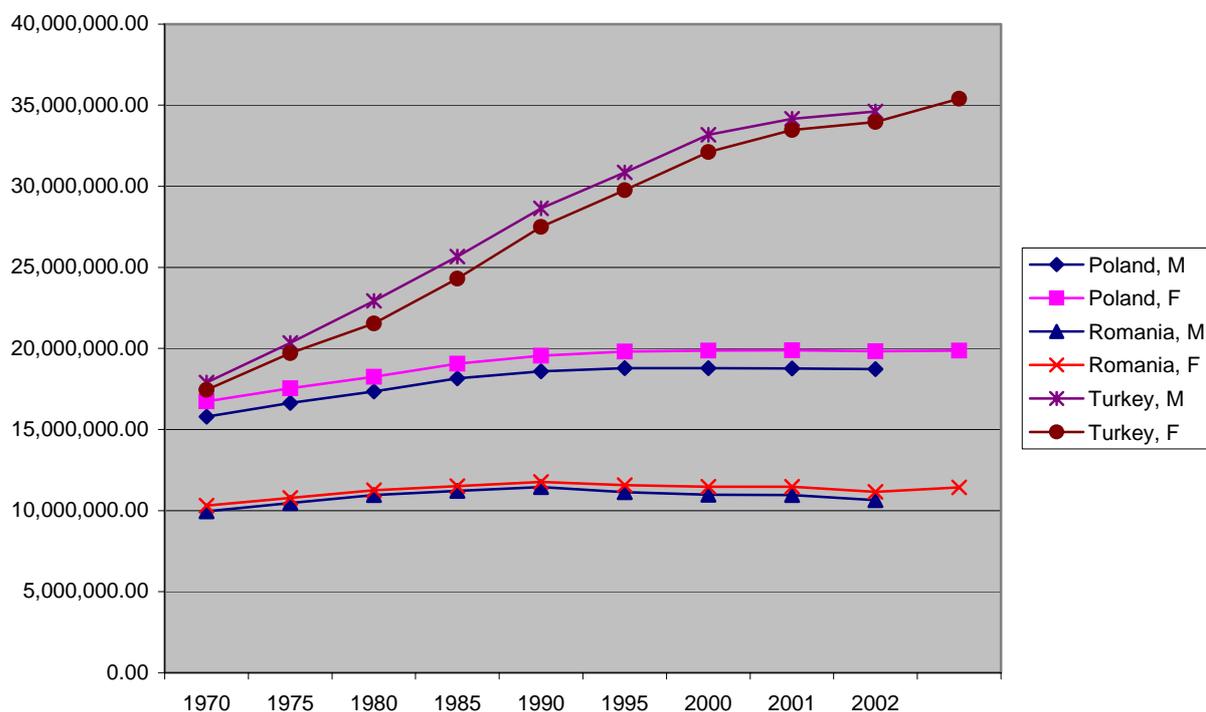
2. Population change in Europe

The population of Europe is declining. According to the UN Population Division report 2001¹¹, the population in most EU countries and New Member States will decrease between 10% and 25% by 2050 and is predicted to decline by more than 25 % in Italy, Estonia, Latvia and Bulgaria. However, in the United Kingdom, Finland, Belgium, Holland and Denmark the decrease is only predicted to be between 0% and 10%, while an increase of between 0 and 10% is predicted for France and one of more than 10% in Ireland (see Picture 1. in the Annex). The New Member States thus show some of the steepest levels of predicted population decline.

Population stability or decline is a general trend in all the New Member States from 1990, In Eastern and Central Europe it coincided with the beginning of the socio-economic reforms following the collapse of communism. In ECE the decrease in the population has been a result not only of declining birth rates (as in Malta and Cyprus) but also an increase in emigration and until the mid 1990s an increase in the mortality rate especially for men in mid life. Of the larger Enlargement countries - Turkey, Poland and Romania – only the population in Turkey is increasing, due to a relatively high birth rate and continuing increases in life expectancy and even this trend has slowed down since 2000. The male and female population follows the similar trends in all three observed countries (Graph II-1; Graph II-2; Graph II-3).

¹¹ United Nations (UN) Population Division, 2001, cited from Laczko F. at al. (Eds.), "New Challenges for Migration Policy in Central and Eastern Europe, 2002", IOM, ICMPD and T.M.C Asser Press, the Hague, 2002, p.253.

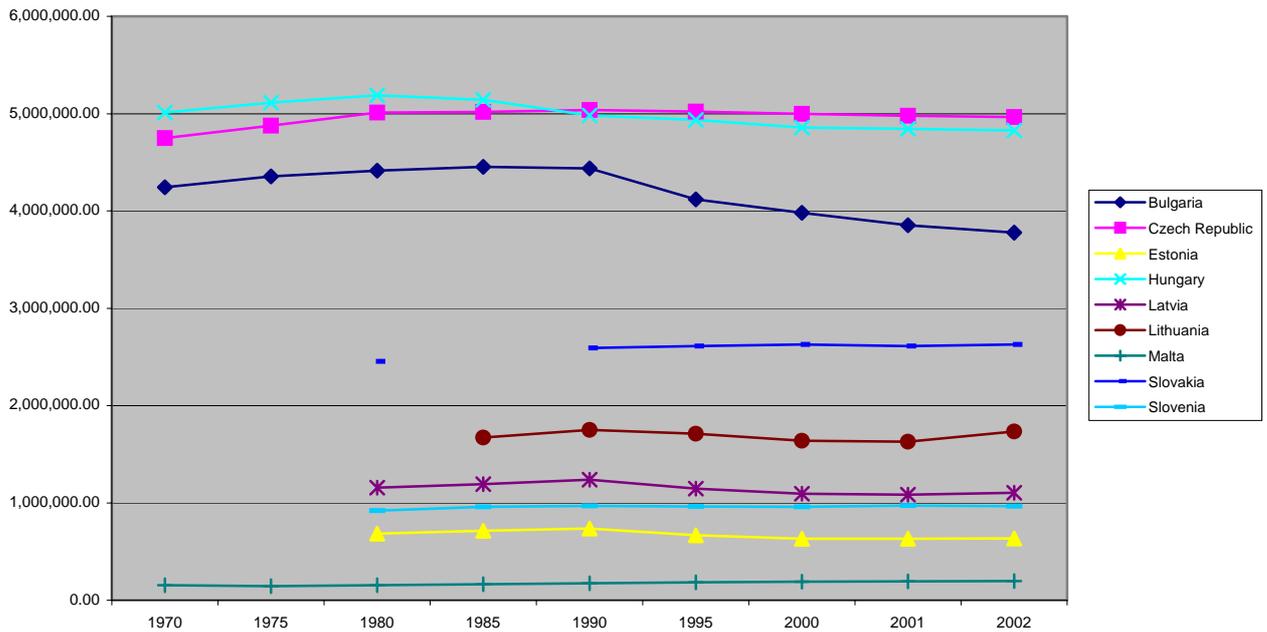
Graph II - 1: Mid-year Population, Male and Female



Source: WHO Regional Office for Europe, European health for all database, February 2004
M – Male; F - Female

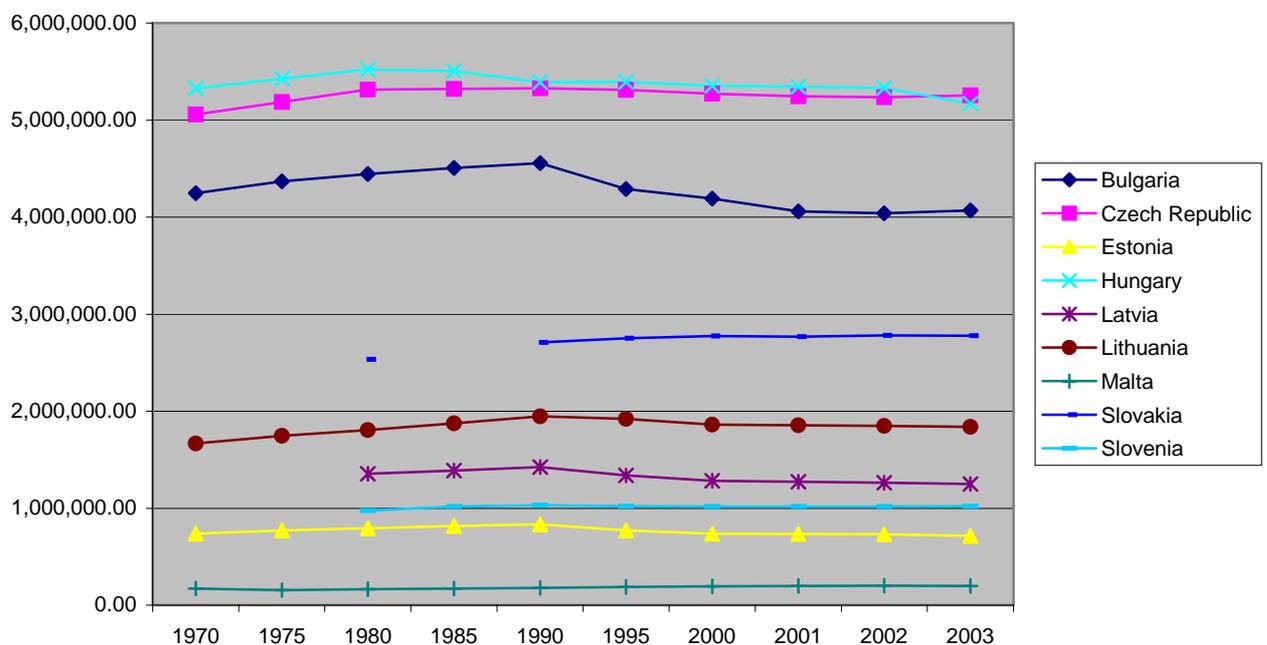
Thus a majority of the New Member States show a small decrease in both their male and female populations. Although the rate of the population increase is declining, notably after 2000 in some countries we see some stabilisation. The decline, or lack of growth in the populations of New Members States and Candidate Countries is in contrast to the EU as a whole, where the female population has been increasing and the male population been relatively stable (Graph II-4). However this is due to increased life expectancy rather than an increase in the birth rate. With economic development it is likely that life expectancy will increase in the countries of ECE where it is comparatively low and where the male female gap is high. Whilst women are likely to continue on average to outlive their male partners the male - female gap in life expectancy is likely to continue to decline as it has in most of the countries since the mid 1990s.

Graph II - 2: Mid-year population, Male

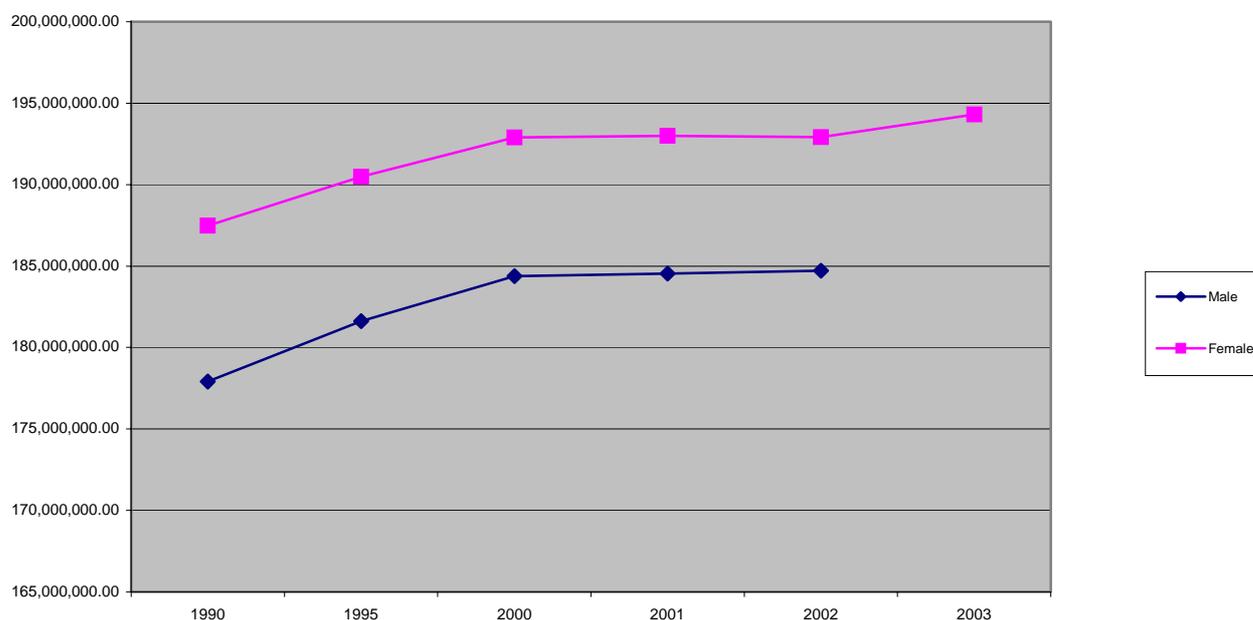


Source: WHO Regional Office for Europe, European health for all database, February 2004

Graph II - 3: Mid-year population, Female



Source: WHO Regional Office for Europe, European health for all database, February 2004

Graph II - 4: Mid-year population, EU Average

Source: WHO Regional Office for Europe, European health for all database, February 2004

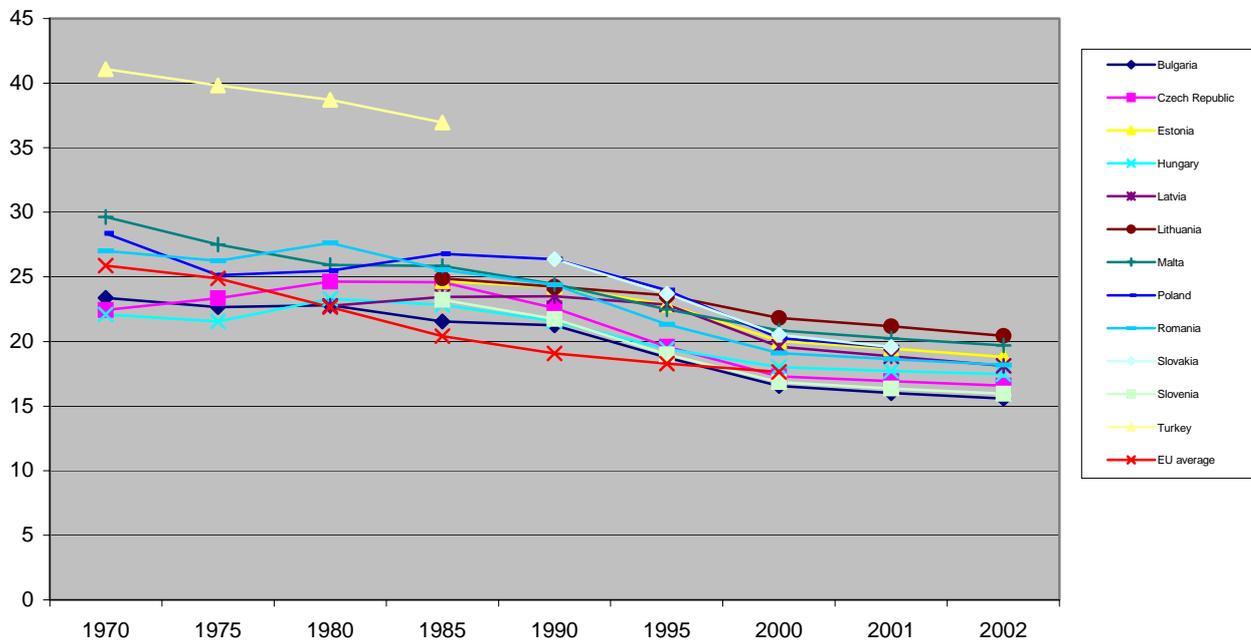
2.1. The population age structure and dynamics

The implications become clearer if we consider the changes and projected changes in different age groups. The percentage of young people in the population (0-14 years)– has been declining 1990 (Graphs II-5, Graph II-6), while the proportion of older people has been increasing (Graphs II-7, Graph II-8) in all Enlargement countries. Women form a larger proportion of the older population than men whilst they are likely to retire earlier, meaning that they have a longer period of life with reduced incomes or as dependents on their extended family, since almost nobody can live independently on their retirement pensions. Pension reforms mean that state retirement pensions have declined in value and older people are not necessarily able to draw on private or occupational schemes that did not exist when they were of working age.

In the past this kind of extended family solidarity meant that older women were able to support the younger generations both materially (because they could work or maintain agricultural small holdings in addition to their pensions) and also in terms of childcare and other housekeeping activities which enabled younger women to work or study full time or even go abroad for periods of time, leaving their children in safe hands. Many older women lived with the family or on the family dacha which was used by the younger family members during holidays. The incidence of second home ownership increased even since the transition providing an important role for older women (and men) in the family economy. However, if the demographic trends that we have outlined here are correct, then older women will no longer be needed to the same extent for child care and are more likely to become burdens on the household economy or left isolated in rural areas. The extent to which the traditional extended family could act as a buffer against economic storms may be under threat as the needs of younger members will be different and the economic situation of older women will

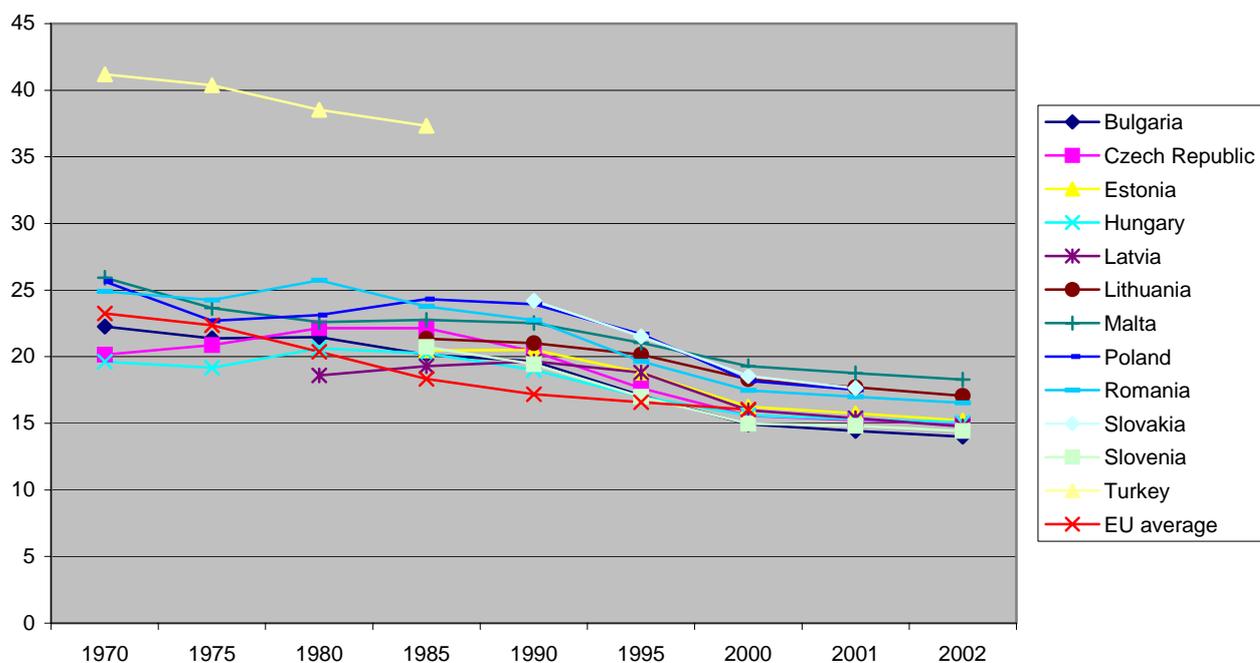
have declined. We may thus find a reconfiguration or feminization of poverty.

Graph II - 5: Share of population aged 0-14 years (%), Male



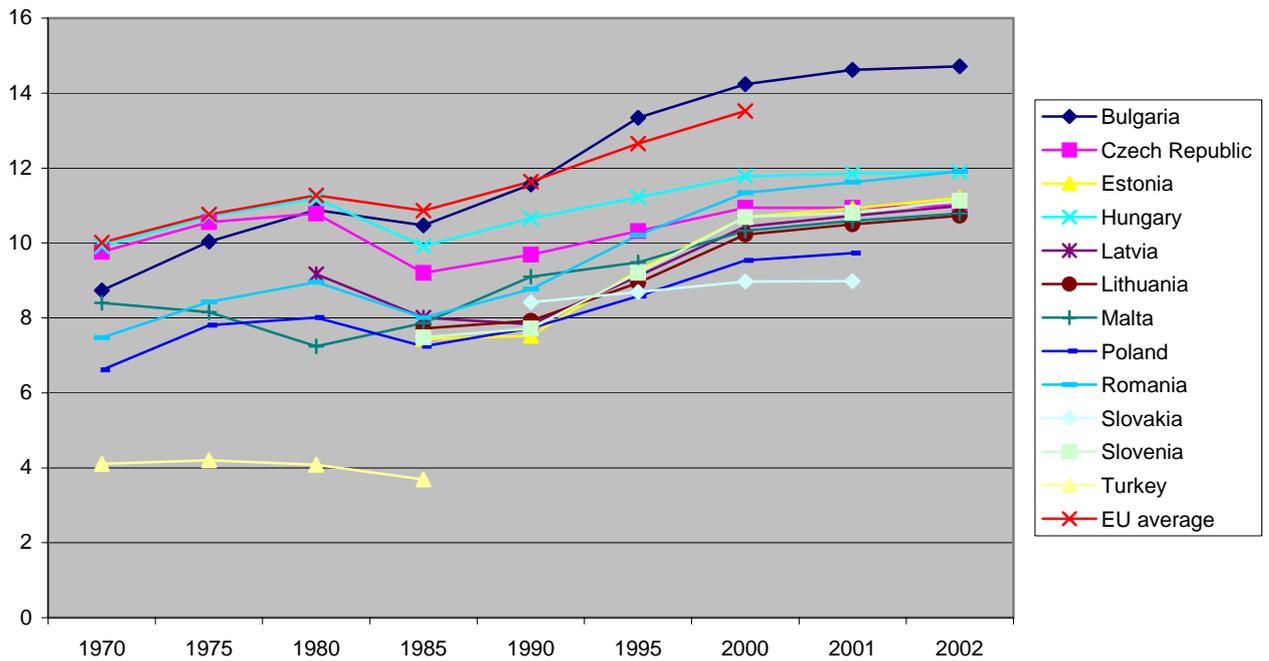
Source: WHO Regional Office for Europe, European health for all database, February 2004

Graph II - 6: Share of population aged 0-14 years (%), Female



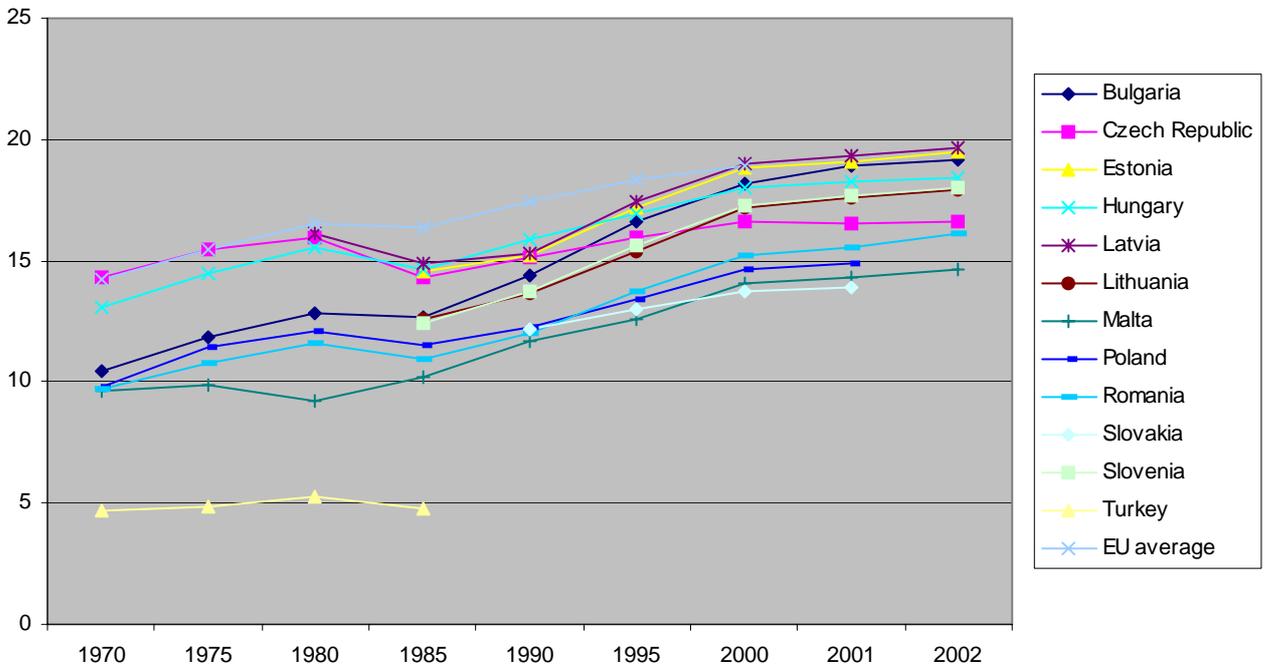
Source: WHO Regional Office for Europe, European health for all database, February 2004

Graph II - 7: Share of population aged 65+ years (%), Male



Source: WHO Regional Office for Europe, European health for all database, February 2004

Graph II - 8: Share of population aged 65+ years (%), Female



Source: WHO Regional Office for Europe, European health for all database, February 2004

3. Trends related to family life

3.1. Trends related to family formation

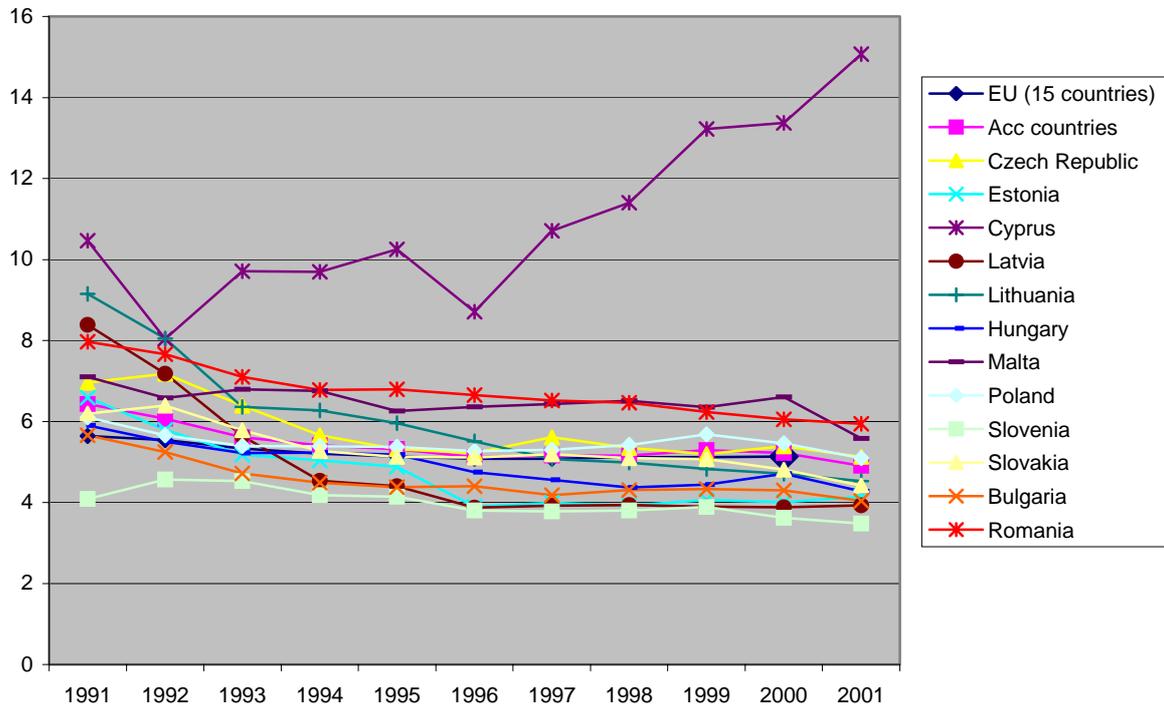
In the past, marriage and child bearing was nearly universal in Enlargement countries. Most people married in their early 20s and had children very soon afterwards and fertility rates were comparatively high – although not all the new member states had total fertility rates above the EU 15 average. The pattern of early marriage and family formation was encouraged by limiting access to housing to couples with children and with the provision of marriage grants. Thus, virtually the only way for someone to set up an independent household was to marry and have children.

During the socio-economic reforms of the 1990s there was a decline in family formation . The number of marriages per 1000 population declined in all Enlargement countries with the exception of Cyprus (Graph II-9). There was also a decrease in the number of marriages per 1,000 population in the EU 15, but the decline is not as striking as in the reforming economies. The decline in the marriage rate per thousand population is due to a number of factors including later age at marriage, an increase in those choosing not to marry, an increase in divorce and an increase in widows and especially widowers, with consequently more female headed households. The number of divorces per 1000 population increased marginally in many new Member States and Candidate countries during the 1990s with the upward trend being more marked in the late 1990s and early years of the 21st century (Graph II-10). However, unlike in the EU 15 countries this tends not to lead to large numbers of single female households because incomes do not allow women to live alone (except in Russia and Eastern Germany).

As in the EU 15 there is a tendency for many young people to remain in education longer in order to acquire further or higher educational credentials demanded increasingly by employers. This combined with high unemployment rates, which especially affect young people, and the restructuring of paid maternity leave in the countries of Central and Eastern Europe results in many young people delaying marriage and family formation until they are established in the labour market and financially secure. As a result there has been an increase of the mean age at first marriage, for men and women with men marrying in their mid to late twenties on average and women in their mid twenties across the EU (Table II-1). The mean age of women at childbearing has also increased slightly for women but remains between 25 and 30 years across the countries for which data is available,(Graph II-11).

Another growing trend is that of childbirth outside of marriage. Economic uncertainty, changes in social attitudes and more flexible styles of living and working are possibly responsible for this trend. However the majority of children born outside of marriage live with their natural parents. Live births outside marriage as a proportion of all live births have increased (Graph II-12). Also the proportion of single person households with and without children has increased.

Graph II - 9: Marriages per 1 000 persons



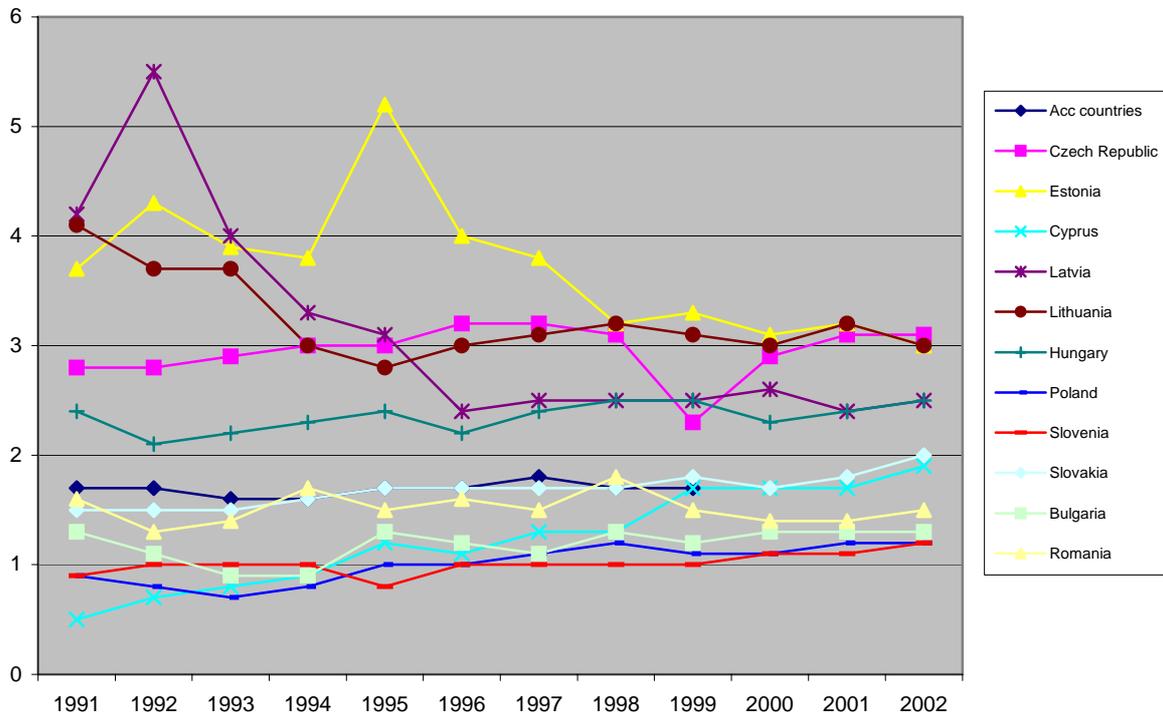
Source: Eurostat, free data, February 2004, <http://europa.eu.int/eurostat>; Data for EU 1998=1999

Table II - 1: Mean age at first marriage, years

	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002
	Mean age at first marriage - males											
EU (15 countries)	28.01	28.24	28.48	28.74	28.96							
Czech Republic	24.2	24.2	24.4	24.7	25	25.4	:	:	26.8	27.2	27.6	28.1
Estonia	24.5	24.7	25.1	25.6	25.6	26.1	26.2	26.4	27	27.3	27.7	28.1
Latvia	24	24	24.2	24.6	24.8	25.1	25.7	25.9	26.2	26.5	26.7	26.7
Lithuania	24	23.8	24	24	24.2	24.3	24.5	24.7	25.1	25.6	26	26.3
Hungary	24.2	24.3	24.4	24.7	25	25.2					27.9	28.2
Poland	:	:	:	:	:	:					26.5	26.7
Slovenia	26.76	27.13	27.6	27.73	27.87	28.18					29.6	30.1
Slovakia	24.03	24.3	24.41	24.62	24.88	:					26.8	27.3
Bulgaria	24.7	24.9	25.2	25.7	26.2	26.4					27.7	27.9
Romania	:	:	:	:	:	:					27.1	27.2
	Mean age at first marriage - females											
EU (15 countries)	25.53	25.81	26.04	26.31	26.52							
Czech Republic	21.4	21.6	21.7	22	22.4	22.9	23.3	:	24.1	24.5	24.8	25.2
Estonia	22.4	22.5	23	23.5	23.5	23.7	24	24.3	24.5	24.8	25.2	25.5
Latvia	22.2	22.3	22.4	22.6	22.9	23.2	23.6	23.9	24.2	24.5	24.7	24.8
Lithuania	22.3	22.1	22.1	22.2	22.3	22.4	22.7	22.8	23.1	23.6	23.9	24.1
Hungary	21.5	21.6	21.7	22	22.2	22.6	:	:	24.23	24.64	25.1	25.5
Poland	22.8	22.2	21.9	22	22	22.3	22.5	:	24.07	23.89	24.1	24.4
Slovenia	23.96	24.23	24.72	24.9	25.18	25.4	25.6	:	26.33	26.69	27	27.4
Slovakia	21.56	21.3	22.12	22.32	22.56	21.6	:	:	23.21	23.98	24.2	24.6
Bulgaria	21.5	21.6	21.9	22.3	22.6	22.85	23.1	:	23.54	24.14	24.3	24.5
Romania	22	22.1	22.2	22.4	22.8	22.9	23	:	23.17	23.36	23.6	23.8

Source: Eurostat, free data, February 2004, <http://europa.eu.int/eurostat>

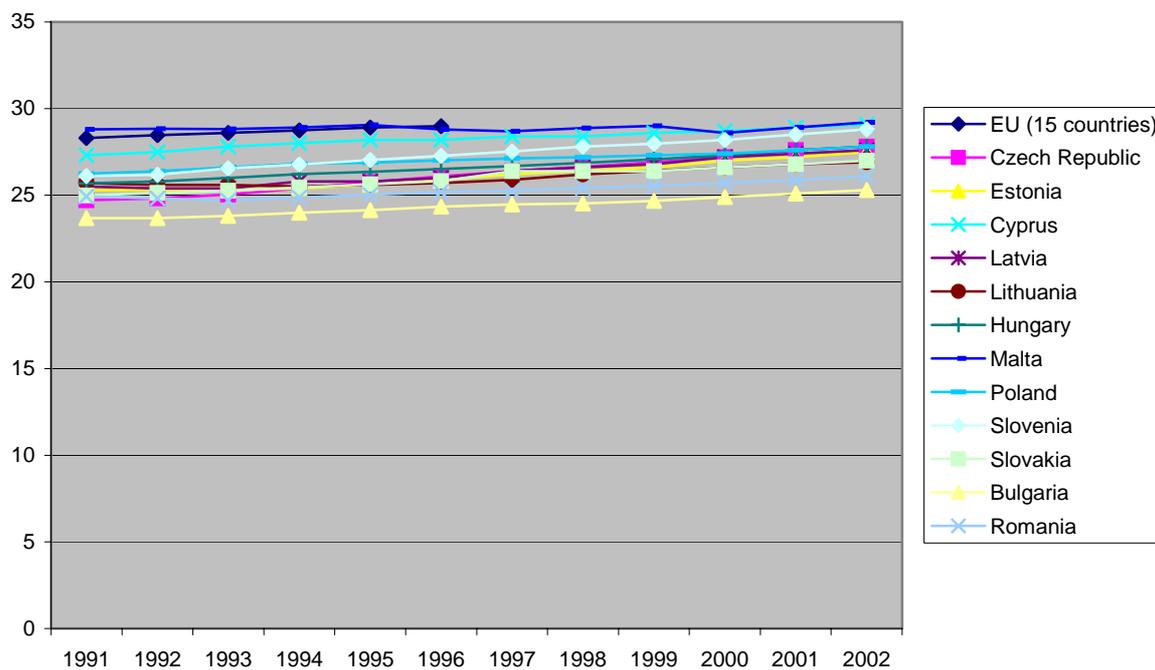
Graph II - 10: Divorces per 1000 persons



Source: Eurostat, free data, February 2004, <http://europa.eu.int/eurostat>

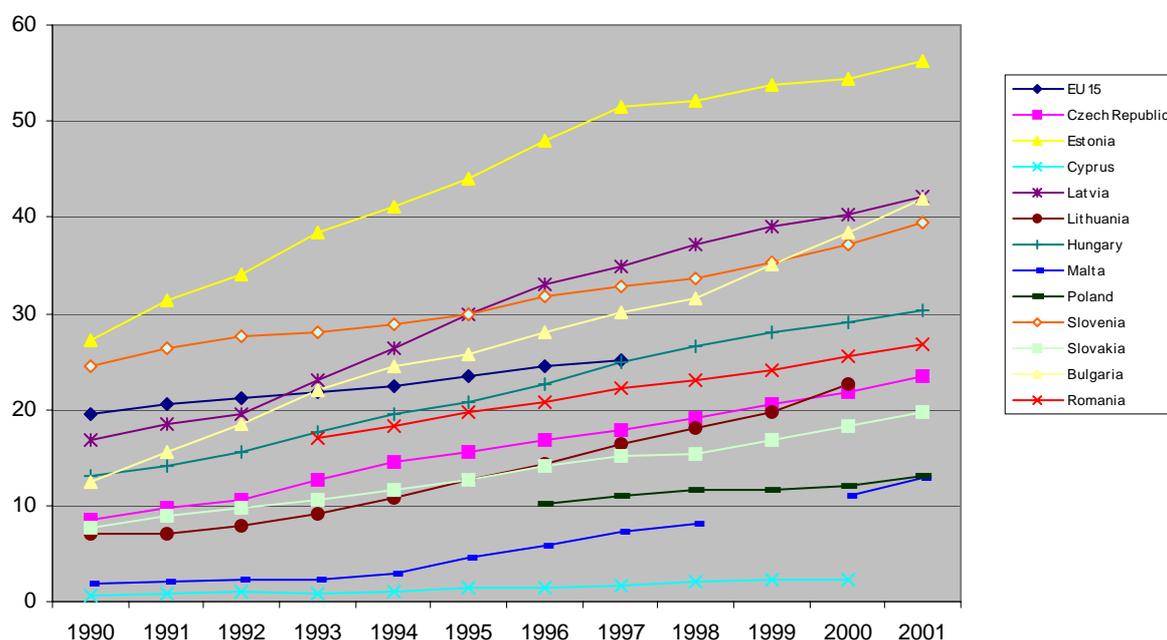
Data for ACC 1998=1999; Provisional value: Latvia – 1999; Czech Republic, Hungary, Latvia, Lithuania, Poland, Slovenia, Bulgaria, Romania (estimated provisional value) – 2001; Lithuania, Poland, Slovenia, Bulgaria, Romania

Graph II - 11: Mean age of women at childbearing



Source: Eurostat, free data, February 2004, <http://europa.eu.int/eurostat>

Data for Slovakia 1997 and 1998 =1999

Graph II - 12: Live births outside marriage (share of all live births %)

Source: Eurostat, free data, February 2004, <http://europa.eu.int/eurostat>; Cyprus – 2000 – estimated value; Lithuania 1999 – provisional value; Hungary – 2001 – provisional value

3.2. Trends in the Fertility and Birth Rates

Since 1990 the fertility rate has decreased dramatically in the reforming economies (Table II-2; Graph II-13; Graph II-14). Within a few years, fertility levels that were in most cases higher than in the Western European countries have declined to around or in some cases now lower than the EU 15 average. The main exception to this is Turkey where total fertility rate has declined dramatically since 1960 but from a much higher level so that the rate in 2000 was 2.5 compared with the EU 15 one of 1.53 and 1.14 in the Czech Republic the country with the lowest rate. In addition two major factors explain why fertility was higher in Central and Eastern European countries than in Western Europe until the late 1980s: firstly, housing was distributed according to marital status and number of children and secondly, working conditions at state-owned factories and the availability of child care facilities made it easier for women to combine motherhood and family life with a professional career¹². The socio-economic reforms in these countries were accompanied by the cutting of social benefits for maternity leave during the 1990s, as well as the family targeted social policies. This may have encouraged the decline in fertility rates and the birth rates in the transformation economies. However as we have noted fertility and birth rates declined in the EU 15 during the late twentieth century and seems to be a feature of high-income economies across the world. The willingness of women (or couples) to have children is clearly not just related to the benefits available to support families with the costs of child bearing and bring up children although the availability of such benefits clearly supports families and especially women.

¹² Fassmann, H., Münz, R., "EU Enlargement and future East-West Migration", in Laczko F. at all, 2002, Op.cit, p.77.

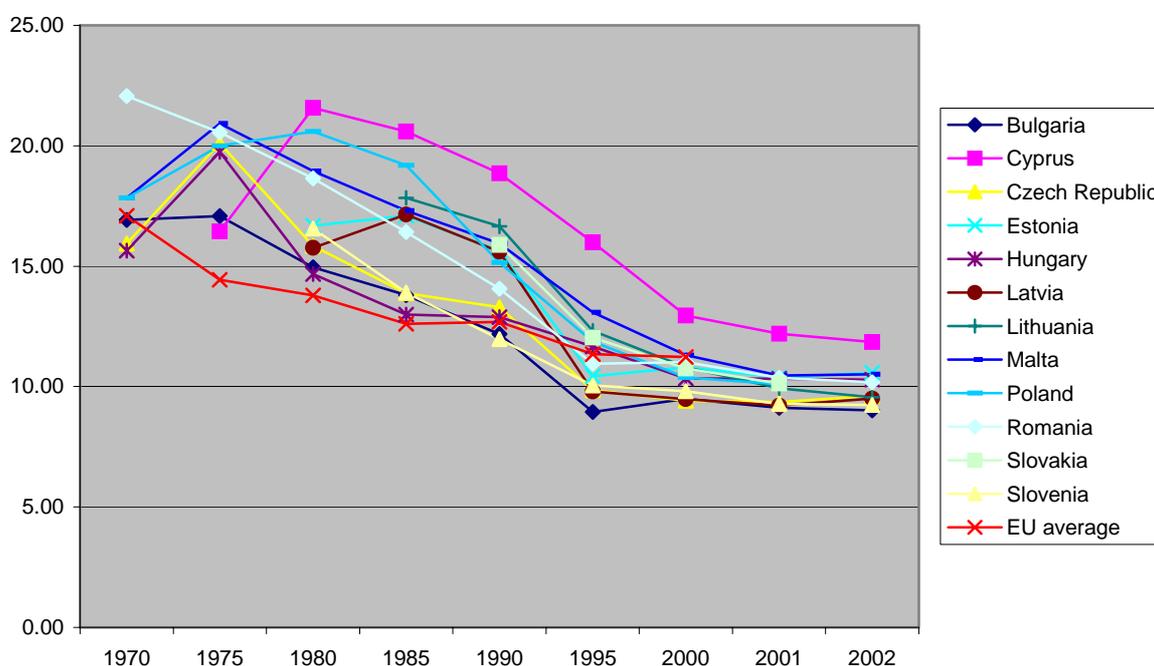
We can conclude that the trends mean that patterns of family formation in the new member states are now comparable to the Western model of family life—where family formation and child bearing at a later age with on average one or two children and consensual unions more socially acceptable. Divorce was always relatively simple legally, but more difficult to manage in terms of finding alternative accommodation. Affordable accommodation continues to be a problem even after the privatisation of real estate. The consequences for women are later marriage and child bearing, fewer years spent in child bearing and rearing and a risk of being head of a lone parent family for at least part of the time when they have dependent children.

Table II - 2: Total fertility rate

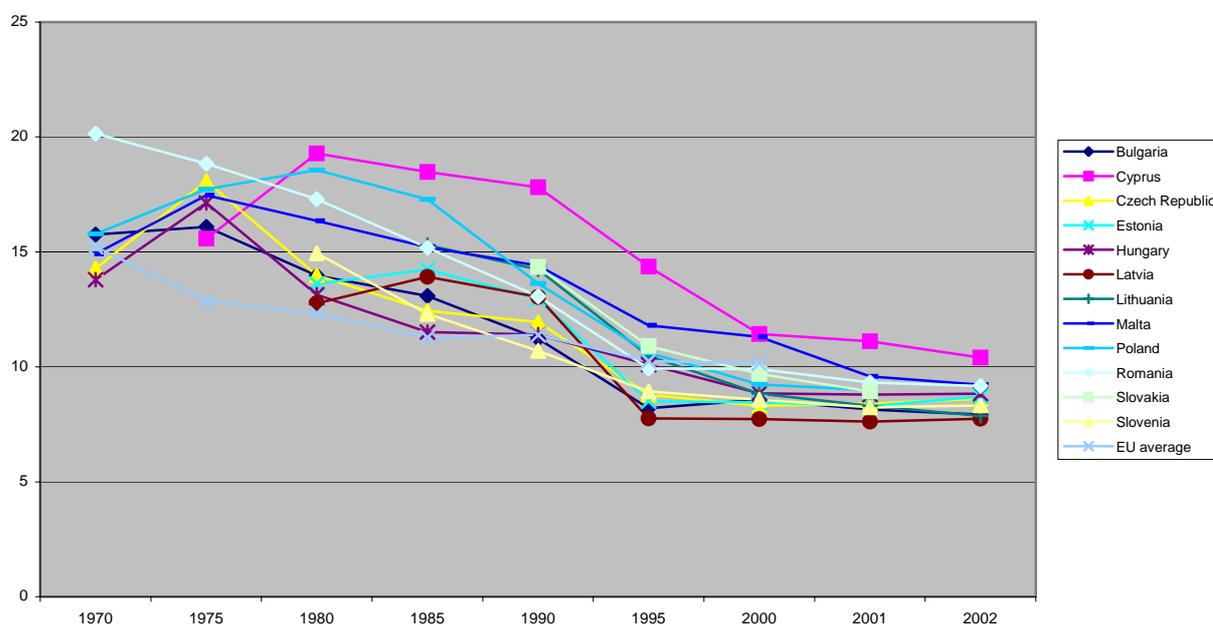
	BG	CY	CZ	EE	HU	LV	LT	MT	PL	RO	SK	SI	TR	EU15
1960	2.31	3.51	2.11	-	2.02	-	2.60	3.62	2.98	2.33	3.07	2.18	6.18	2.59
1970	2.18	2.54	1.91	2.16	1.98	2.01	2.40	2.02	2.20	2.89	2.40	2.10	5.68	2.38
1980	2.05	2.46	2.10	2.02	1.91	1.90	2.00	1.99	2.28	2.45	2.32	2.11	4.36	1.82
1990	1.81	2.42	1.89	2.05	1.87	2.02	2.00	2.05	2.04	1.83	2.09	1.46	2.99	1.57
2000	1.25	1.83	1.14	1.39	1.33	1.24	1.33	-	1.34	1.30	1.20	1.25	2.50	1.53

Total fertility rate is the average number of children that would be born alive to a woman during her lifetime if current fertility rates were to continue. Source: Eurostat – Demographic Statistics. TR: partly also Council of Europe, cited from The social Situation of the European Union, 2002, Directorate-General for Employment and Social Affairs, Annex II, p. 117; Annex IV, p. 137

Graph II - 13: Live births per 1000 population, Male



Source: WHO Regional Office for Europe, European health for all database, February 2004

Graph II - 14: Live births per 1000 population, Female

Source: WHO Regional Office for Europe, European health for all database, February 2004

4. Cultural factors influencing demographic trends

In order to shed more light on the demographic changes that we have outlined above, we are now going to look at the evidence on changing family values in the new member states and candidate countries. The group with the highest proportion of people who are unmarried but currently living with partner is the 15-24 years group and this holds for all households income groups. This suggests that the young people prefer living in a consensual union rather than get married (Table AII-1; Table AII – 2; Table AII-3; Table AII-4 in the Annex). This may however be a prelude to getting married with young people choosing to live together prior to marriage rather than totally rejecting marriage.

In our discussion above we have suggested social and economic reasons for the decline in the birth and fertility rates. It may also be that this reflects a cultural shift with a decline in the desire of people to have children. According to Eurobarometer data young men and women in the 15 – 24 age group are less likely than those in older age groups to think that it is essential to have children to enjoy the good life. In the 16 –24 age group 63% of women think that this is the case compared with 80 percent in the 25 – 39 and 40 – 54 age groups and 81 percent in the 55 + age group. The comparable figures for men are 67, 81, 82 and 82 percent. In all but the oldest age group men are significantly less likely than women to think that children are not necessary to enjoy the good life but the differences are not large, (Table AII – 5; Table AII – 6 in the Annex)

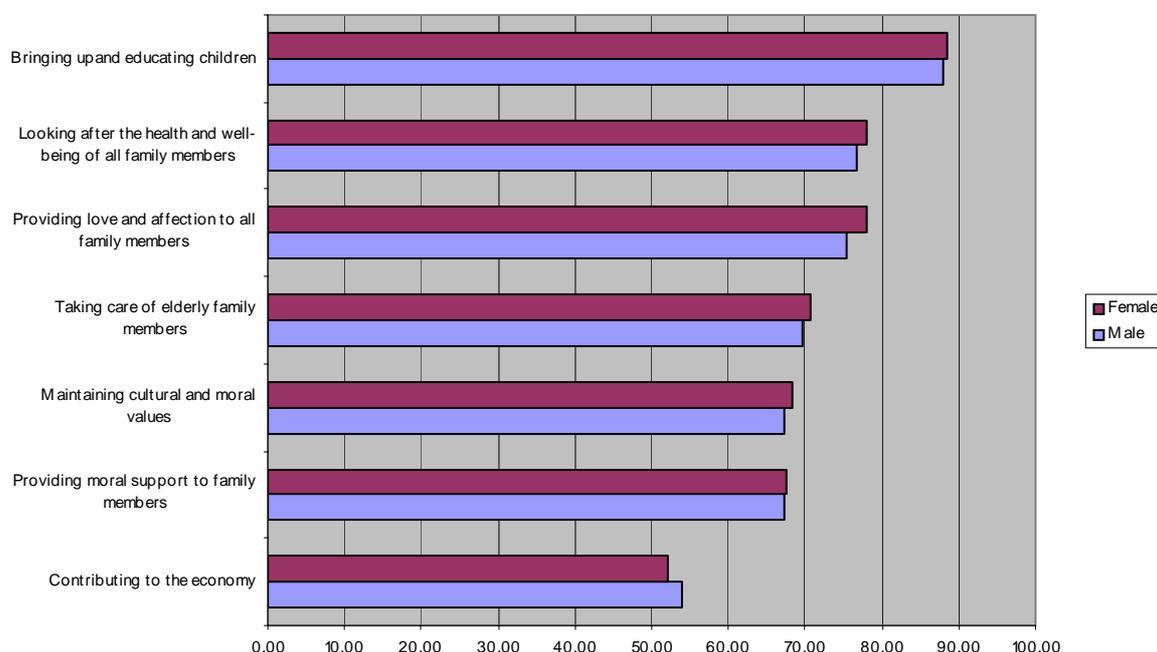
Therefore, having children seems to be losing some importance especially amongst young people. However, we cannot determine from these data if this is an age or a cohort effect – if this is an attitude that young people grow out of or if it is indeed a profound change in values. Evidence from other countries would suggest the latter as the shift towards post-materialist

values is associated with more liberal attitudes towards sexuality and gender equality and a search for self-fulfilment rather than material security¹³.

However, most people believe that the family has an important role, to play in society - especially in bringing up and socialising children and the family's role in maintaining cultural and moral values and contributing to the economy is also seen as important (Graph II-15). There are wide variations between the countries and in many of the countries the family is seen as important in looking after the health and welfare of family members, providing love and affection and taking care of elderly family members (A11 – 9; AII – 11 and AII – 13 in the Annex). These are all roles where women are expected to take on the major burden of care. In terms of the role of the family more generally there is little difference between the attitudes of women and men. The difference perhaps between these countries and those of much of Europe is that the extended family were expected to play quite a large role in the care of its members. This is not so different to Southern European countries perhaps, but different to the Northern parts of Europe.

¹³ Inglehart, R., Culture Shift in Advanced Industrial Society. New Jersey, Princeton University Press, 1990.

Graph II - 15: Role of the family in the society, Country code, sex of respondent, Crosstabs' results, % within the country code, all New Member States and Candidate Countries



Source: Candidate countries Eurobarometer (CCEB), May 2002

As we have noted above there are variations between the countries in terms of the proportions of men and women agreeing that the family plays an important role in key social and economic areas. However the role of the family follows the same priority order in each country as Graph II-15 above. Respondents from countries where religion plays an important role in society and / or where more traditional patriarchal family models are the norm see the family as being more important than in the other countries. Respondents in Turkey, Cyprus and Poland for example were more likely to think that the family has an important role in bringing up and educating children than those in Lithuania, Latvia, Hungary and Czech Republic were respondents were the least likely to think so (Table AII-7 in the Annex). We find the same pattern for those who think that the family is important for looking after the health and well being of all family members (Table AII-9 in the Annex). Hence we find a pattern of some societies valuing the traditional role of the family more and these are Turkey, Poland, Cyprus and Malta, whilst countries which are less family centred opinion are the Czech Republic, Hungary, Lithuania and Latvia.

5. Conclusions on socio-economic repercussions of demographic change, gender perspective and policy issues

In the short term there is predicted to be only a modest decline in the working age population in the New Member and Candidate countries. However, in the longer term the impact of the declining in fertility and the birth rates, means that we will see an ageing population with a proportionately smaller workforce having to support an increasing ageing population, as in Western Europe. Given these trends and the shift towards post-materialist and individualistic values among young people, it is possible that in future there may be more

isolated older women living alone. If this is the case, then older women will be in danger of leading very penurious lives reliant on state pensions. The trends in family formation in the countries of in the new member states and candidate countries are becoming similar to those observed in the Western European countries – postponement in family formation and in child bearing, more consensual unions, a decline in marriage rates, a rising number of children born out of marriage. These trends are both a cause and consequence of the changes in the situation of women for whom early marriage and children are no longer attractive as they were in the past. This is reflected in both their attitudes and their behaviour. The question remains therefore if this is really a “birth” or “fertility” strike by young women or whether they are simply postponing family formation until later in the life course. The evidence from western Europe suggests a combination of n both – an increase in the proportion of women choosing to remain childless, an increase in the age at which women choose to have children and a decline in the number of children women (and their partners choose to have.)

During the period of socio-economic reforms in Central and Eastern Europe the reduction in social benefits for maternal leave, the abolition of family targeted social policies and the closing down of childcare facilities in most countries may also have encouraged the decline in fertility rates and in the birth rates in the transformation economies although these trends also predate the fall of Communism. Studies in Western Europe have shown that birth rates respond to childcare facilities and support. It will be interesting to see if the reconfigured family support in countries such as the Czech Republic, Hungary and Slovenia, where it is still higher than in most Western countries, will help to reverse this trend (this is explored in more detail in a later chapter). We should note however that while economic support may have some impact on fertility, the trend to smaller family size is found in all advanced economy countries.

Other factors that may have impacted on fertility may be the availability of better methods of contraception. Although contraception was available previously, one of the main methods of birth control was abortion and women sought to have children before their bodies were damaged by multiple abortions. Better and less traumatising forms of contraception perhaps allow women to better control their fertility.

The demographic trends are similar across the EU 15, the new member states and the candidate countries. The main trend is towards an ageing population with an older dependent population having to be supported by a smaller working age population. This has implications for the taxation burden on the population as well as the adequacy of the available workforce. The EU 15 have responded to these challenges by encouraging migrant workers especially to fill key employment vacancies and by trying to encourage older people to remain in employment longer. Many of the migrant workers have come from and are expected to come from the new member states, although given the demographic trends that we have been describing, this is likely to be only a short term solution. The flow of people in the most suitable age category to migrate (20-45) in Central and Eastern Europe is drying up. Early retirement, especially among women, is a very strong trend in Eastern and Central Europe where many older women are no longer economically active.

Women are affected in a number of ways by the trends. Opportunities for women to gain employment may grow as available workforce declines but this will only really be of significant benefit to women if there is a decline in labour market segregation and segmentation and family friendly employment policies and support for working mothers is put in place. Women are more likely to be in poverty than men in old age. This is because women on average outlive their male partners by a number of years whilst the value of state

pensions will decline and has become increasingly employment related in recent reforms. Women will also be expected to take on the additional burden of caring for elder relatives.

CHAPTER III: EDUCATION, PROFESSIONAL TRAINING, EMPLOYMENT

1. Introduction

The analysis of the participation of women in education and employment in the New Member and Candidate countries reflects the changes of the role of women within the socio-economic transition process. Women, like men, have benefited from an expansion in the opportunities for vocational training and obtaining university degrees at the same time as they have been under pressure to respond to labour market changes. The cuts in social support during the transition in many countries makes the reconciling of family life with these new opportunities difficult and demonstrates the need to create new policy instruments and institutional mechanism. This is related to the adoption and appropriate implementation of the policy objectives of the EU strategy on gender equality within the EU of the New Member and Candidate countries. The promotion of equal opportunities for women and men in education and employment is a objective of crucial importance within the *Community Framework Strategy on Gender Equality 2001-2005*. The European Council of Lisbon invited the Commission and the Member States to further all aspects of equal opportunities in employment policies, including reducing occupational segregation, increasing the participation of women and helping to reconcile working and family life. It is also essential to foster ways of giving women equal access to the knowledge based economy for example by participating in life-long learning, profession training and skills in information and communication technologies (ICT), since they affect employment in all economic sectors¹⁴.

In this report we considers the proportion of women at different levels of the education system and how this is changing over time. We also look at the subjects which they choose to study especially at degree level and how this varies between countries. The same analysis is carried out for professional training and life-long learning now, enabling a general comparison of the differences between the New Member and Candidate countries. There are several sources of statistics about education, professional training and life-long learning, which it is possible to analyse by gender, mainly from Eurostat.

In terms of labour market participation, a key consideration is that the participation of women in the labour market has actually declined since the fall of communism in Eastern and Central Europe and the rates of unemployment have increased. Women's labour market position has been affected by economic restructuring more negatively than men's.

The representation that women previously had in the political and administrative system that was based on quotas has been abandoned with the result that women have disappeared from many parts of public life. Furthermore, the fact that women's rights and representation were seen as part of the old system means that discussion of these things has been anathema under the post-communist regimes¹⁵ and even now, although this situation has improved, there is limited discussion of women's rights or equal opportunities. The brave efforts of some women's centres in some countries represent a rather minority interest and are kept going mainly through subventions from abroad¹⁶. The Accession process to the EU may have forced the issue once again onto the agenda and the EU policies and directives aimed at

¹⁴ Community Framework Strategy. Gender Equality (2001-2005), http://europa.eu.int.employment_social

¹⁵ Wallace, C., "Eine Westfeministin geht nach Osten" *Transit* 9, 1995, p. 129-145.

Wallace, C., "Misunderstandings and Misleading Stereotypes: a western feminist goes East Soundings", 16 Autumn 2000, p. 144-167.

¹⁶ Smejkalova, J., "Feminist Sociology in the Czech Republic after 1989" *European Societies*, Vol 6, 2, 2004, p. 169-180.

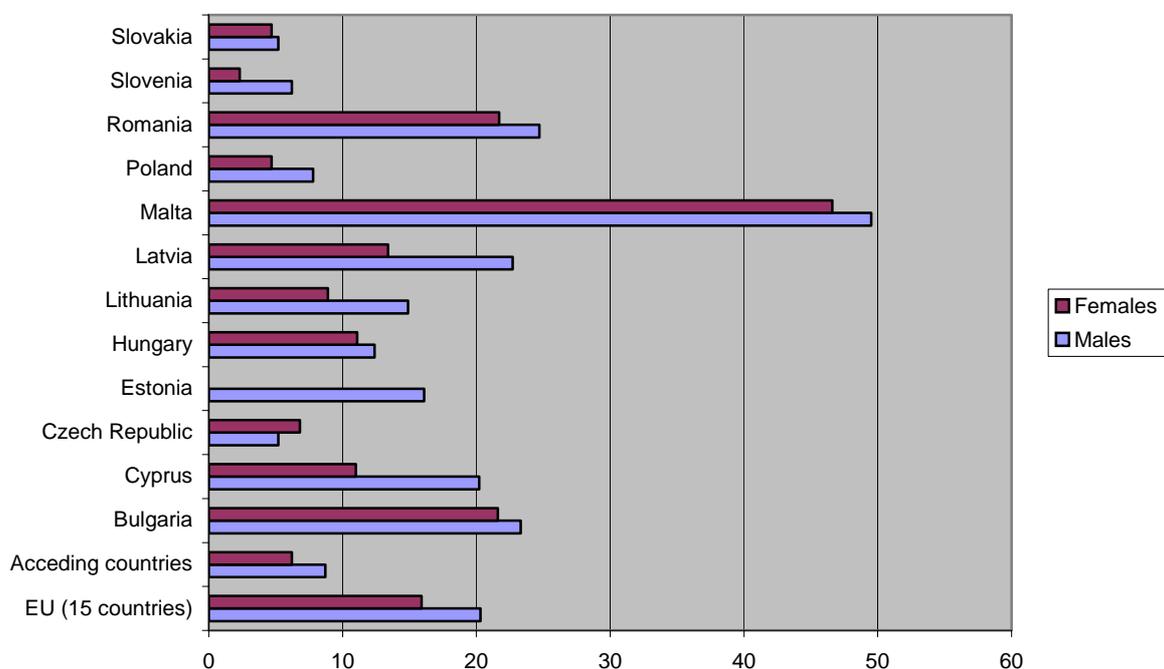
promoting equality of opportunity for women should ensure that it continues to be on the political agenda.

2. Education

In order to consider gender differences in educational attainment and differences in educational attainment between countries we will consider the differences between the following groups: early leavers, those who complete secondary education and those who go on to vocational or higher education. Early school leavers are those whose highest level of education or training attained is ISCED 0, 1 or 2 and who have not having received any education or training in the four weeks preceding the survey)¹⁷.

The recent data on early school leavers in the New Member States and Candidate countries indicates that in the 18 to 24 age group male early leavers exceed females early school leavers, with the exception of Czech Republic. The difference is the largest in Slovenia, Poland, Latvia, Lithuania and Cyprus (Graph III-1). There are also differences in the proportions of young people leaving early in the different countries with nearly 50 percent of young people leaving education early in Malta while it is significantly less than 30 percent in all the other countries and even below 10 percent in some of them (no data is available for Turkey). The proportion of early female leavers is also lower in most countries for which data is available than the EU 15.

Graph III - 1: Early school leavers, 2003



Source: Eurostat, free data, March 2004, <http://europa.eu.int/eurostat>

(e) - Estimated value – Accession countries, Malta

(p) - Provisional value - Poland

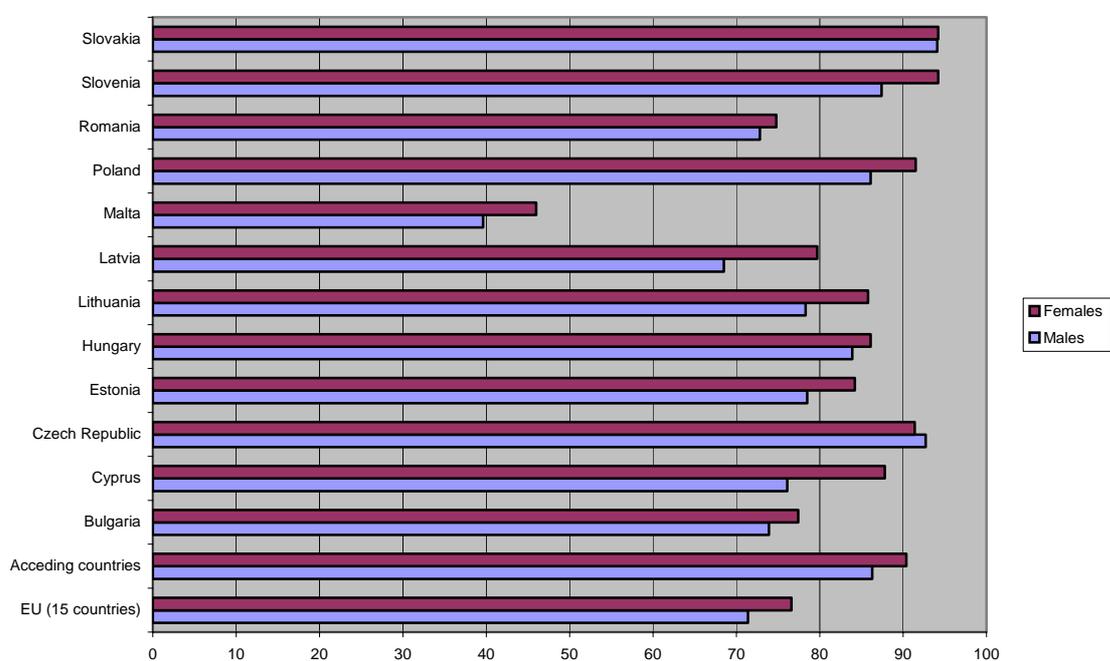
(b) - Break in series – EU (15 countries), Cyprus, Hungary, Slovakia

(u) - Unreliable or uncertain data- Slovenia

¹⁷ Source: Eurostat, free data, March 2004, <http://europa.eu.int/eurostat>

The upper secondary and post secondary non-tertiary education, is measured by the youth education attainment level. The proportion of women obtaining this level is slightly larger, than that for men In the Czech Republic the proportion of men reaching the youth education attainment level marginally exceeds that of women and there is the same proportion of men and women attaining this level in Slovakia (Graph III-2). Thus, women are quite well represented in upper secondary and post-graduate secondary non-tertiary education in all New Member and Candidate countries. In the New Member States there was a strong tradition of vocational training and although the links between this and the enterprises that sponsored it have been severed, there is nevertheless a relatively good system of vocational training not unlike the dual system in Germany. Information about the number of graduates by sex at ISCED levels 3 and 4 by level of education, programme orientation; programme destination is presented in Table AIII-7 in the Annex.

Graph III - 2: Youth education attainment level, 2003



Source: Eurostat, free data, March 2004, <http://europa.eu.int/eurostat>

(e) - Estimated value - Malta

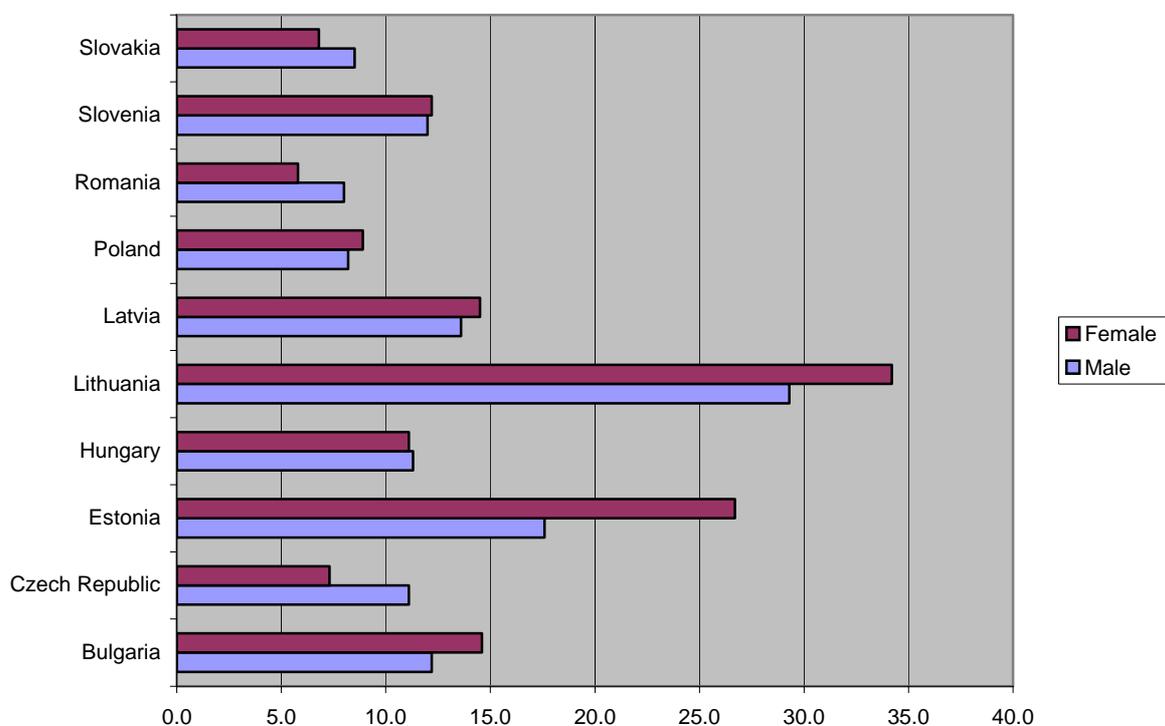
(p) - Provisional value – EU (15 countries), Accessing countries, Poland

(b) - Break in series - Hungary

We now turn to higher and tertiary education, where participation in the New Member and Candidate countries has traditionally been quite high. Women are well represented in tertiary education in the New Member and Candidate countries from Central and Eastern Europe. In the most of the countries the proportion of of women in tertiary education exceeds the proportion of men – in the Baltic States, Bulgaria, Poland and Slovenia. In Slovakia, Romania, Hungary and Czech Republic the participation of men in the tertiary education is higher than the participation of women, although the difference is not large (Graph III-3). There are large differences between the various New Member and Candidate States in the percentage of the population in higher education and in those countries where participation is highest, participation by women is also the highest. Thus, the recent data show that there is a relatively high participation of of women in tertiary education. In the EU 15 there is also

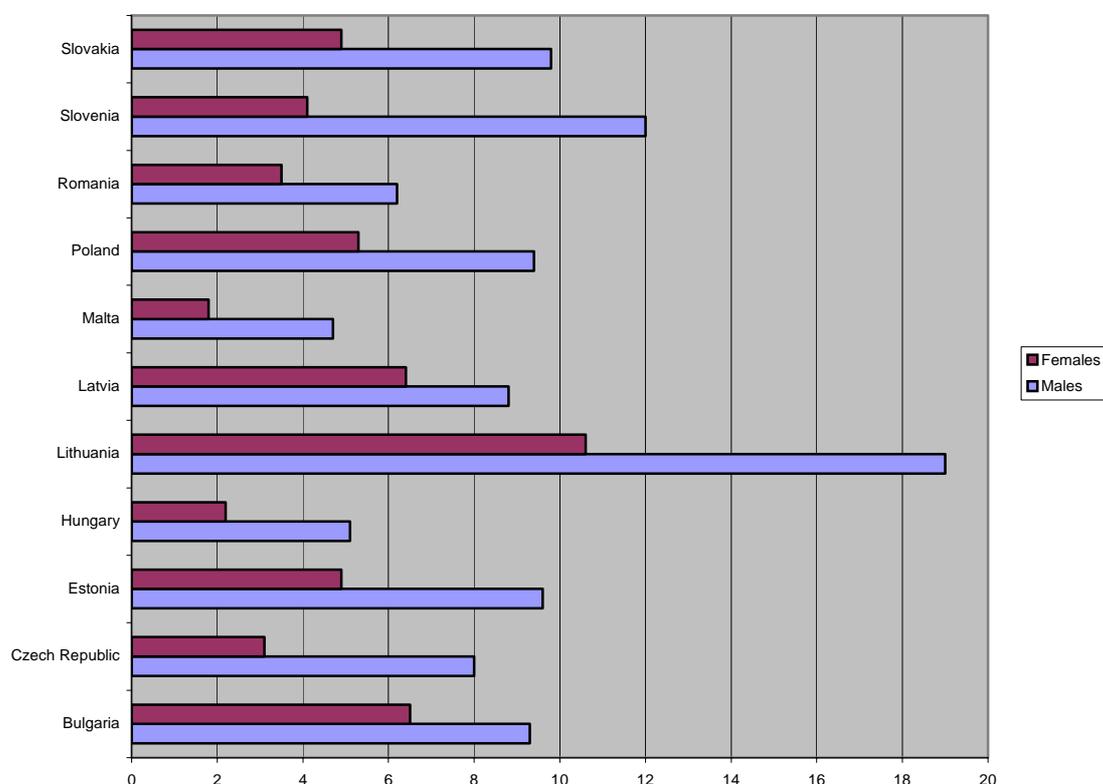
higher participation by women than men in higher education, although in many countries in the EU 15 a higher proportion of the age group enter University (Graph III-4).

Graph III - 3: Age group 15-64 by tertiary education, 2000



Source: Eurostat ¹⁸

¹⁸ European Social Statistics – Labour Force, survey results 2000, Theme 3, Eurostat, Luxembourg, 2001. Employment and Labour Market in Central European Countries, Theme 3, Eurostat, Luxembourg, 2001.

Graph III - 4: Science and technology graduates, Tertiary graduates in science and technology per 1000 of population aged 20-29, 2001

Source: Eurostat, free data, March 2004, <http://europa.eu.int/eurostat>; The indicator "Tertiary graduates in science and technology" includes new male/female tertiary graduates in a calendar year from both public and private institutions completing graduate and post graduate studies compared to an male/female age group that corresponds to the typical graduation age in most countries. It does not correspond to the number of male/female graduates in these fields who are available in the labour market in this specific year. The levels and fields of education and training used follow the 1997 version of the International Standard Classification of Education (ISCED97) and the Eurostat Manual of fields of education and training (1999).

Although women are entering higher education in increasing numbers and there are more men than women in higher education in some countries, there continues to be differences in the subjects young men and women study and this has implications for the positions they can take up in the labour market. In all the new member states and candidate countries for which data is available a higher proportion of men take science, engineering and technology than women. The gender gap exists in all the countries but is greater in some than others and much the same in the EU 15.

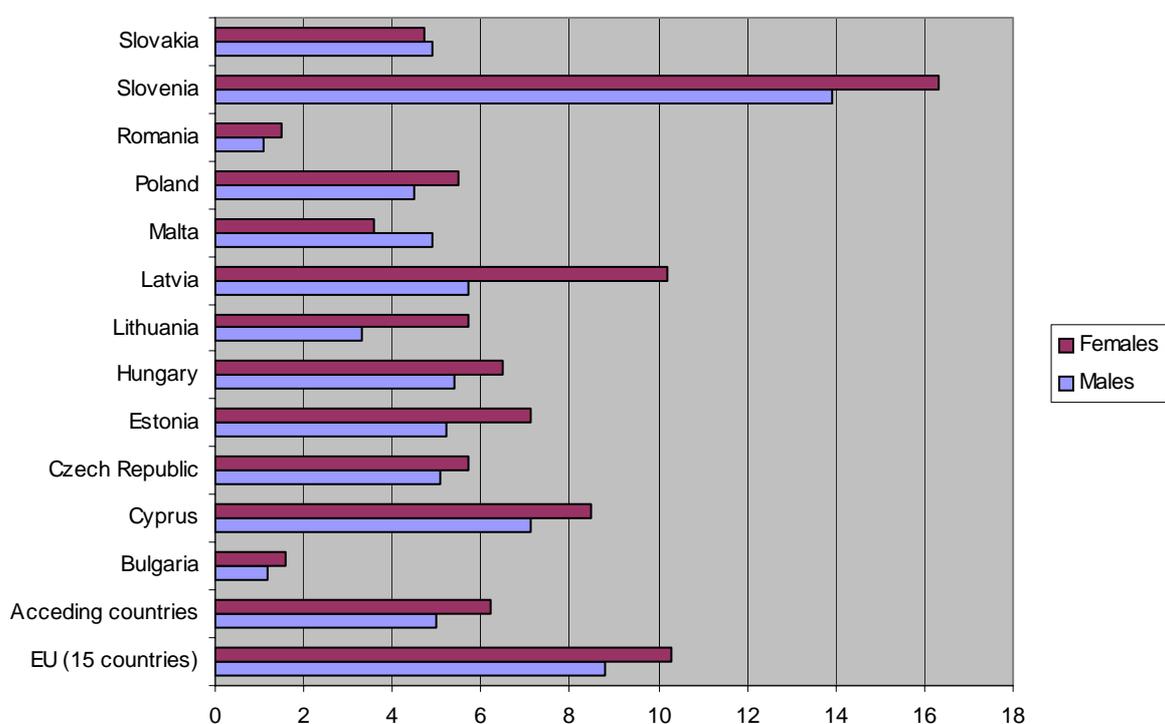
The development of the knowledge-based economy depends upon continuous technical development and innovation, with a highly skilled and flexible work force that it is ready to learn, train and re-qualify on a continuous basis. In this context, it is important that life-long learning is strongly supported by institutional structures and policies. Investment in human capital is becoming increasingly important, since it reflects the economic and social conditions in society¹⁹. The participation of women in life-long learning is of importance in the whole process of formation of human capital and knowledge base society and enabling

¹⁹ Continuing vocational training in enterprises in the European Union and Norway, CVTS2, Statistics in focus, Population and Social Conditions, Theme 3 – 3/2002, Eurostat, Luxembourg, 2002.

them to compete on an equal basis for employment and promotion with in employment and to develop their careers .

Encouraging lifelong learning and access to active labour market measures for women is one of the main objectives within the gender dimension of the European Employment Strategy a part of the Community Framework Strategy on gender equality²⁰. Women are better represented in life long learning than men in the EU 15 and in the Accessing countries as a whole and the gender gap is highest in Slovenia, the Baltic States and Cyprus. In Romania, Poland, Czech Republic, Hungary and Bulgaria women and men are more equally involved in life-long learning, although the participation of women is still higher than for men. In Slovakia women and men participate almost equally in life-long learning. Only in Malta do a higher proportion of men than women participate in life-long learning, due possibly to the relatively lower participation of women in tertiary education, in employment and because of the cultural stereotyping of women as belonging in the domestic sphere which reflect more the “Southern European” pattern (Graph III-5).

Graph III - 5: Life-long learning, 2003, percentage of the adult (25-64) population



Source: Eurostat, free data, March 2004, <http://europa.eu.int/eurostat>

(e) - Estimated value – Accession countries; (b) - Break in series – EU (15 countries), Cyprus, Hungary, Slovenia, Slovakia; (p) - Provisional value – Poland

3. The employment situation of women

The labour market participation of women is a key indicator of their changing roles. It is necessary not only to consider the extent to which they participate in paid employment but also the positions they occupy in the labour market. In the EU 15 the proportion of women in paid labour has increased since the 1950s – although there are variations between the countries. However in all the countries, despite equal opportunities and equal pay policies of

²⁰ Community Framework Strategy. Gender Equality, Op.cit.

relatively long standing, there continues to be labour market segregation and segmentation. Women tend to be concentrated at the lower levels within all occupational categories and also to be concentrated in certain sectors of the labour market. There persists both a glass ceiling and a glass wall as well as a substantial gender pay gap. In the countries of Eastern and Central Europe employment levels were high – women were expected to work full time as well as look after their husbands and children. Yet formal equality in the labour market was accompanied by both horizontal and vertical labour market segmentation as well as traditional attitudes to the role of women in the domestic sphere.

The general employment rates of women have fallen from initially high levels in the 1980s. The growth of the service sector has however lead to new opportunities being created for women and there is still the expectation that if they work, women will work full time, so there is little part time work available , Yet for many women in Central and Eastern European Countries (CEECs), western “liberation” was seen as gaining them the the option not to work, although economic necessity means that most families still need two or more incomes to survive even in the more prosperous transformation countries. Despite high general levels of education and the over-representation of women in professions such as medicine, women generally earn much less than men in the Accession/Candidate countries and are under-represented among the new professions such as entrepreneurs and the self-employed.

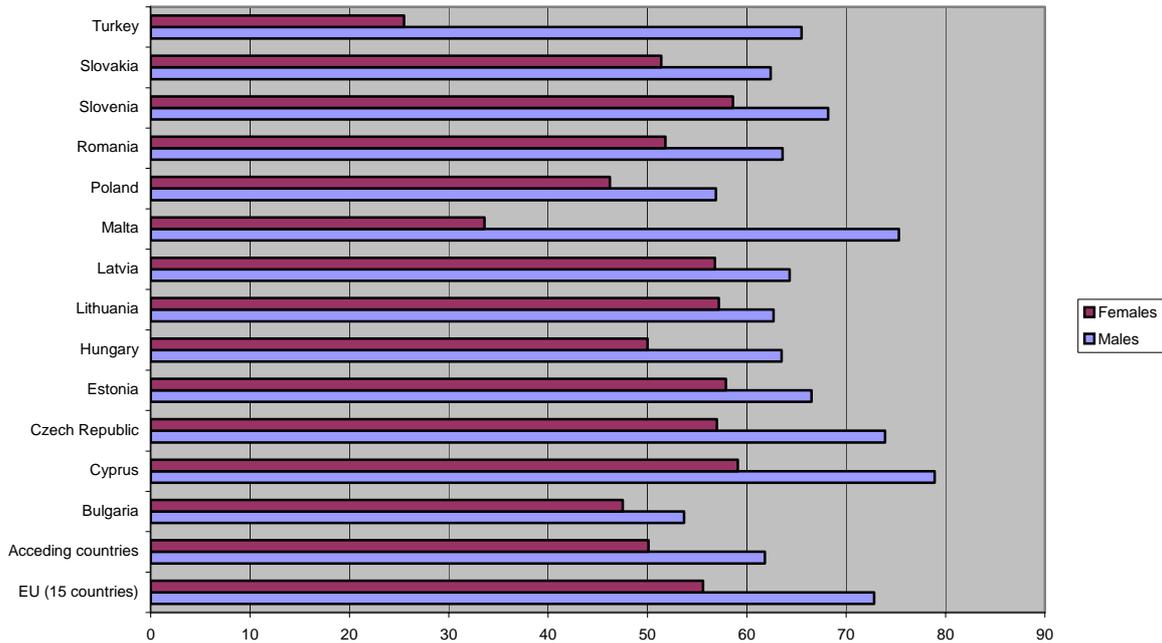
The male employment rate exceeds that of the female unemployment rate in all New Member States and Candidate countries (Graph III-6). However, the gap between the male and female employment rates is still smaller these countries as a whole than in the EU 15., The employment gap between genders exceeds the EU 15 average in Malta, Turkey and Cyprus, due mostly to the traditional family culture in these countries. In the Mediterranean countries - Cyprus and Turkey- the difference between men’s and women’s employment rate is decreasing, while in Malta the gap has remained almost constant throughout the 1990s. In these countries and especially in Turkey and Malta, where the gender gap in employment rates is large it will be important to address the issue of gender equality in employment..

In the countries of central and eastern Europe the gender gap in employment is smaller although there are some differences between them. The gender gap in employment is larger in the Czech Republic, Hungary, Romania, Slovakia, Poland and Slovenia than in the other countries. One possible reason for this in the Czech Republic and Hungary may be the relatively generous maternity leave that encourages women to stay at home rather than participate in the labour force after having children. In the reforming countries of Central and Eastern Europe, the gender gap in employment is generally stable although it has fluctuated in the 1990s (Table AIII-14; Table AIII-15; Table AIII-16 in the Annex).

The Lisbon European Council set as part of it’s strategy for achieving gender equality set a target pf increasing women’s employment rate from figure 51 % to more than 60% by 2010²¹. However, the EU 15 average in 2002 was 55.6%, i.e. over the 51%.. The Acceding countries as a whole had a female employment rate of 50.1% in 2002. Women’s employment rate is below 51% in Turkey (25.5%), Hungary (50.0%), Bulgaria (47.5), Poland (46.2%), Malta (33.6%). However, the EU 15 average is in 2002 (55.6%), i.e. over the 51%. In the other the New Member States and Candidate countries over 51% of women were in paid employment Moreover, some of the countries have nearly attained the 60% employment objective, - Cyprus - 59.1%, Slovenia - 58.6%, Latvia - 56.8%, Estonia - 57.9 %, Lithuania 57.2%, Czech Republic - 57.0% (Graph III-6).

²¹ Community Framework Strategy. Gender Equality. Op.cit.

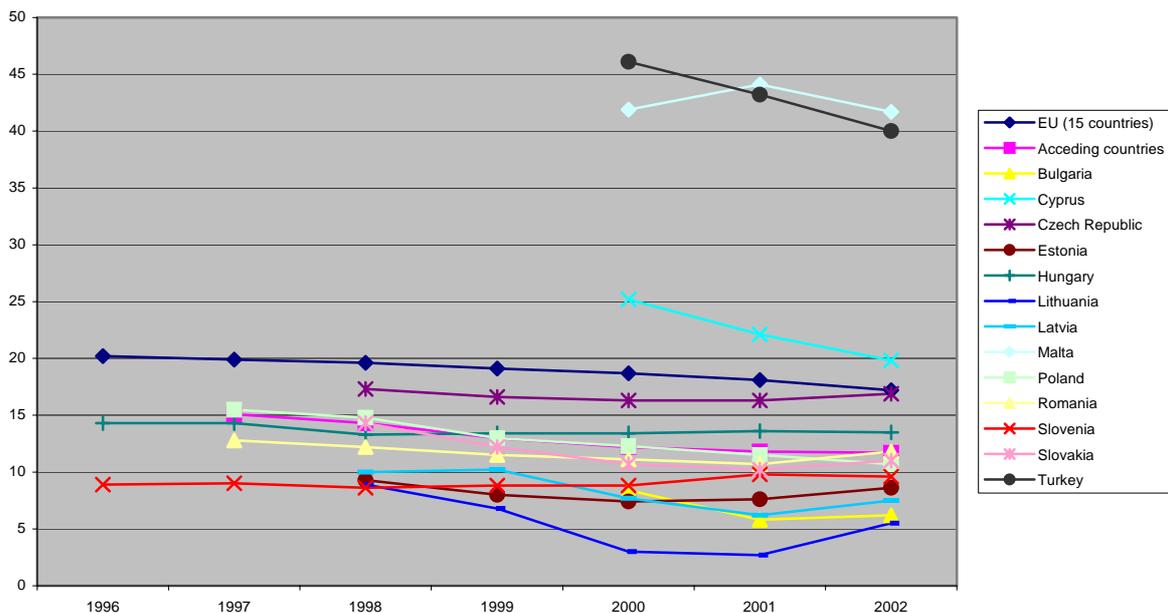
Graph III - 6: Employment rate, 2002, Males and Females



Source: Eurostat, free data, March 2004, <http://europa.eu.int/eurostat>

The employment rate of men and women in the New Member States as a whole has decreased after the reforms, i.e. the decline by men is from 67.8% in 1997 to 61.8% in 2002, while by women it is from 52.7% in 1997 to 50.1% in 2002. The gap in the employment rate between genders is decreasing during the period from 1996 to 2002 in the EU 15 as well as in the New Member States (Graph III-7).

Graph III - 7: Employment rates gap between gender



Source: Eurostat, free data, March 2004, <http://europa.eu.int/eurostat>

Although there are now more older workers in Europe, there has been a tendency towards early exit from the labour market, especially in the case of women. It was believed at first that this would improve unemployment statistics, but it only added to the crisis of the pensions system. This trend is even stronger in the ECE countries where pensions systems based on insurance have only just been developed and the age of retirement was traditionally low, especially for women. It has been part of the EU Employment Strategy to increase the participation among older workers. The total employment rate of male older workers is increasing in the EU 15 and very slowly decreasing in the New Member States (Table AIII-18 in the Annex). However, there has been an increase in the employment rates of older women workers in almost all of the New Member States - Bulgaria, Czech Republic, Estonia, Hungary, Lithuania, Latvia, Malta, Slovenia, and to a smaller extent in Slovakia and Turkey (Table AIII-19 in the Annex). Retirement ages are now being raised in these countries to relieve the burden on the pensions system.

At the other end of the working career, younger people also tend to be underrepresented, mainly because of high levels of youth unemployment, especially among young women. These young women are dependent upon extended family for their incomes since unemployment benefits are limited and have been successively reduced. This has been one of the factors making them vulnerable to sexual exploitation. Hence, raising the participation rate of younger women and should be seen as a priority in order to ease their entry into the labour market (Table III-1).

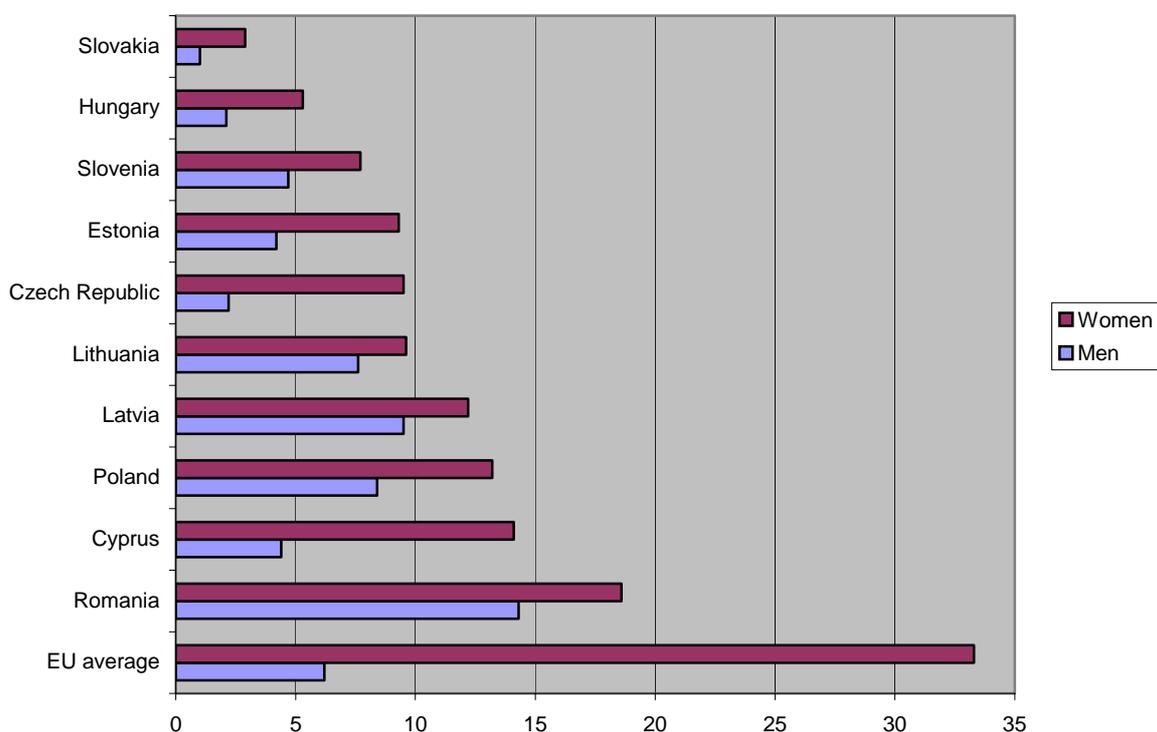
Table III - 1: Employment rate by gender - age structure, 2002

	Empl. rate (15-24 years)		Empl. rate (25-54 years)		Empl. rate (55-64 years)	
	Males	Females	Males	Females	Males	Females
EU 15	43.7	37.4	86.8	67.4	50.1	30.5
Bulgaria	20.4	18.4	69	66.1	37	18.2
Cyprus	38	36	93	72	67.3	32.2
Czech Republic	35.3	29.2	90.2	74.7	57.2	25.9
Estonia	34.6	21.6	80.3	73.6	58.4	46.5
Hungary	32.9	27.3	79.7	66.1	36.7	18.5
Lithuania	27.1	20.5	78	75.8	51.5	34.1
Latvia	36.4	25.4	78.1	74.3	50.5	35.2
Malta	52.5	49.4	89.2	33.4	50.4	11.8
Poland	24.2	19.3	73	61.9	34.5	18.9
Romania	31.4	26.1	79.6	65.9	42.7	32.6
Slovenia	34.4	26.5	86.7	80	35.4	14.2
Slovak Republic	28.7	25.3	79.5	70.6	39.1	9.5
Turkey	41	22.9	79.6	27.4	47.3	21

Source: Eurostat database, March 2004

A higher proportion of women in all the New Member States and Candidate countries are in part-time employment than men. However, in the EU 15 the difference between the share of part-time employment of women and men is much greater because part time employment hardly exists in the New Member States, where it is neither available nor desired. Relatively higher percentages of part-time employment as a proportion of total employment of women is found in Cyprus, Czech Republic and Estonia, while it is lowest in Slovakia, Lithuania and Latvia (Graph III-8). However, new opportunities for work flexibility and part-time employment for women are expanding in New Member States and Candidate countries partly as a response to high unemployment.

Graph III - 8: Part-time employment, 2000

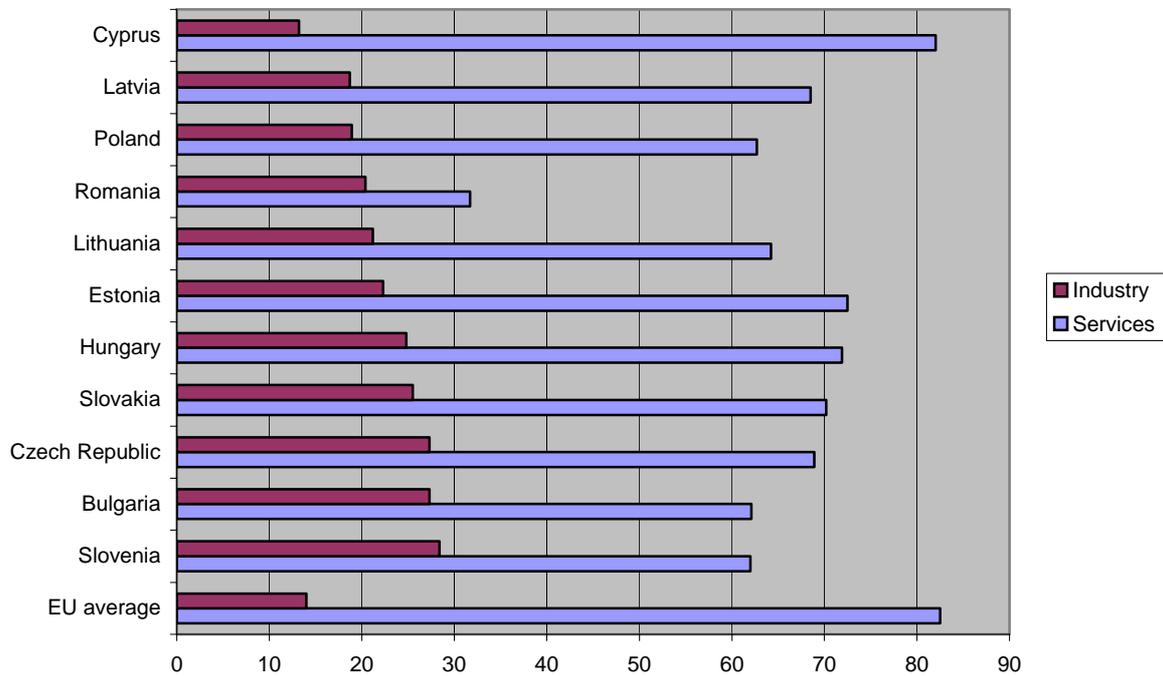


Source: Key employment indicators, DG Employment, http://europa.eu.int.employment_social

The reduction of occupational segregation is an important aspect of equal opportunities in employment policies in the EU 15 and the future EU Member States according to the European Council of Lisbon. Jobs as well as sectors of the labour market tend to be seen as either women's work or as men's work. With men's work tending on average to have higher status and higher remuneration.

If we turn now to the kinds of jobs that women do, we find that in the EU 15 as well as in the New Member States and Candidate countries, the percentage of women in the service sector is higher than the percentage of women in industry. The difference is the highest in Cyprus and the EU 15 as a whole. The proportion of women in the service sector in comparison with the proportion in industry is relatively high in Estonia, Latvia and Hungary. In Bulgaria, Slovenia and Romania the difference is relatively low (Graph III-9). The high participation of women in employment in the service sector may be partly due to the development of this sector from very low levels in the New Member States with corresponding employment opportunities for women. However we should note that a high proportion of women are employed in this sector in the EU 15 where service sector work is seen as women's work.

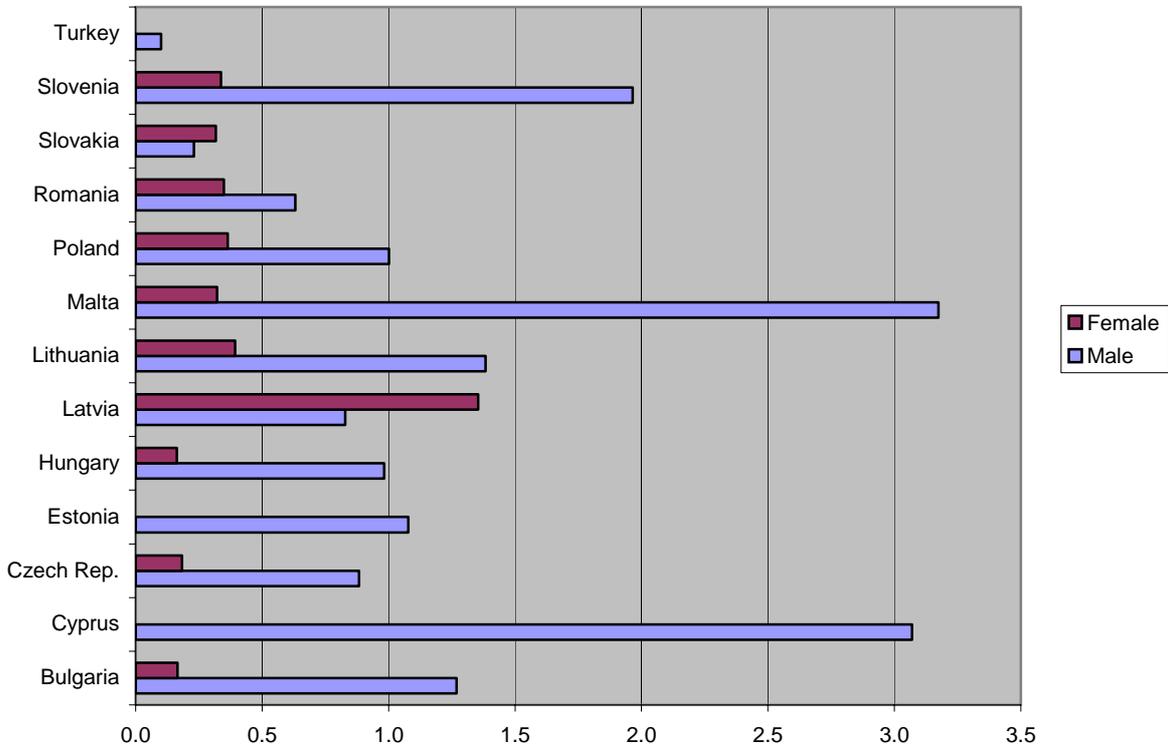
Graph III - 9: Gender Segregation in employment 2000, percentage of women in services and industry



Source: Key employment indicators, DG Employment, http://europa.eu.int.employment_social

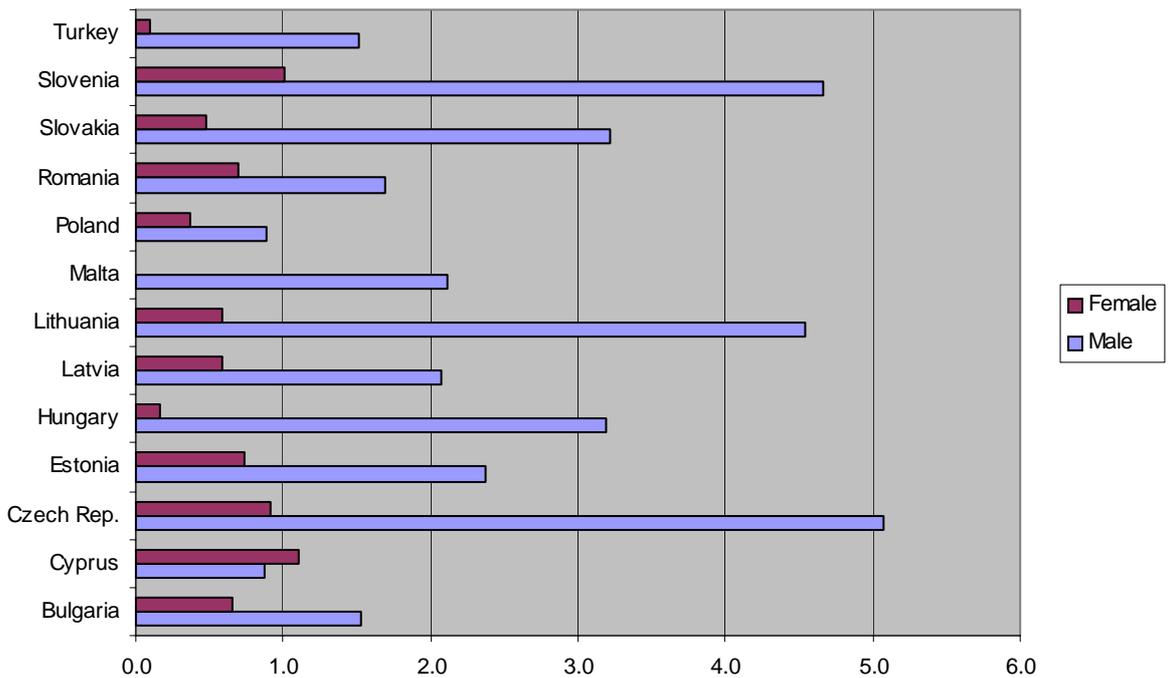
A more precise analysis of the women employment situation and of gendered labour market segregation requires us to look more closely at the occupational positions that women hold. Gender equality principles require that men and women are equally considered on merit for all types of employment. However there is evidence in the EU 15 states that women have been discriminated against in the labour market and are underrepresented in the higher status occupations. In order to consider in more detail the labour market situation of women in the new member states and candidate countries we will consider women's position with respect to the higher status occupational sectors. According to the data for the Candidate Countries of Central and Eastern Europe (Eurobarometer (CCEB), May 2002). Women are underrepresented as *general managers* and *business proprietor* in all countries (Graph III-10; Graph 11), with a few notable exceptions (Latvia and Cyprus). However, numbers are unreliable because they are so small and this would need to be verified on larger data sets.

Graph III - 10: General management, What is your current occupation ? * Sex of respondent * Country code Crosstabulation, % within Sex of respondent



Source: CCEB, May 2002

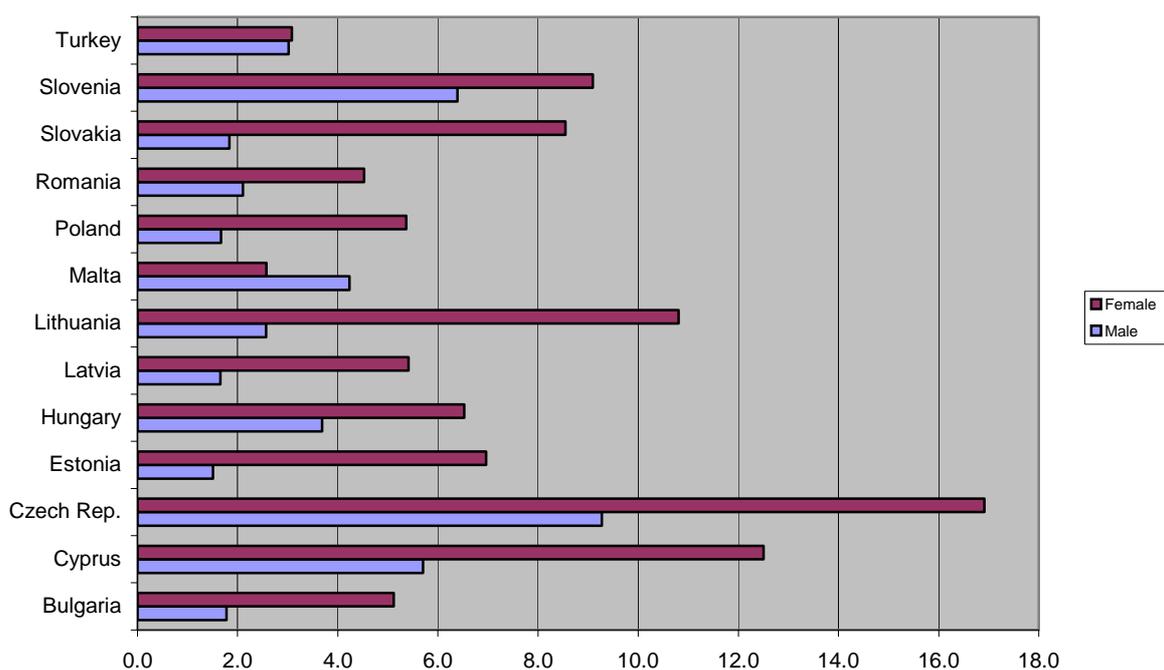
Graph III - 11: What is your current occupation ? * Sex of respondent * Country code Crosstabulation, Business proprietors, % within Sex of respondent



Source: CCEB, May 2002

In *clerical work* there are more women than men in all the countries under consideration, with the exception of Malta and Turkey, where the proportion of male and female clerical workers is almost identical. (Graphs III-12). However, we should note that women are more likely to occupy middle and lower positions in the public administration rather than the higher positions.

Graph III - 12: What is your current occupation ? * Sex of respondent * Country code Crosstabulation, clerical work % within Sex of respondent



Source: CCEB, May 2002

If we turn to Higher Education as one example of a labour market segment, we find women are severely under-represented at the higher levels, as they are in the EU 15. According to the DG Employment report²² the proportion of women full professors is much the same Eastern and Central European countries as in the EU 15 countries (Table III-2 and Table III-3): in all

²² "Panorama of the European Union, The life of women and men in Europe, A statistical portrait", Data 1980-2000, Eurostat, European Commission, 2002, p. 165, http://europa.eu.int/comm/eurostat/Public/datashop/print-catalogue/EN?catalogue=Eurostat&search=quick&sorted_by=date&query_string=The%20life%20of%20men%20and%20women%20in%20Europe.

countries women represent a very low proportion of professors but a slightly higher proportion in the more junior scientific positions.

The proportion of women full professors is highest in Bulgaria, the Baltic States, Hungary and Poland, but comparatively lower in Czech Republic, Slovakia, Cyprus and Malta. Gender segregation is lower in occupations such as researchers in the higher education sector as well as in the government sector in all countries than for full professors (Table III-2).

Table III - 2: Full professors and researchers in candidate countries, 1999 (head of counts), % of total

	Bulgaria	Cyprus	Czech Rep.	Estonia	Hungary	Lithuania	Latvia	Malta	Poland	Slovakia	Slovenia
Full professors (1)											
Men	81	95	93	82	87	89	80	98	84	93	88
Women	19	5	7	18	13	11	20	2	16	7	12
Researchers in higher education sector (2)											
Men	68	73	69	59	65	58	49			59	67
Women	32	27	31	41	35	42	51			41	33
Researchers in government sector (2)											
Men	51	69	69	49	63	54	48		68	55	57
Women	49	31	31	51	37	46	52		32	45	43

(1) - HU = 1998; CZ, EE, LV, PL = 2000; LT: full-time equivalent; (2) - HU, LT, LV, SK = 2000; LT, SK: full-time equivalent

Source: Research DG, WiS database; Report, cited from "The life of women and men in Europe. A statistical portrait. Data 1980-2000, European Commission, Eurostat, 2002, p. 165, <http://europa.eu.int>

Table III 3: Full professors and researchers in EU countries, 1999 (head of counts), % of total

	Belgium	Denmark	Germany	Greece	Spain	France	Ireland	Italy	Netherlands	Austria	Portugal	Finland	Sweden	UK
Full professors														
Men	92	92	93	90	85	86	95	88	94	94	83	82	88	88
Women	8	8	7	10	15	14	5	12	6	6	17	18	12	12
Associate professors														
Men	87	80	89	79	65	63	92	74	91	89	64	55	75	76
Women	13	20	11	21	35	37	8	26	9	11	36	45	25	24

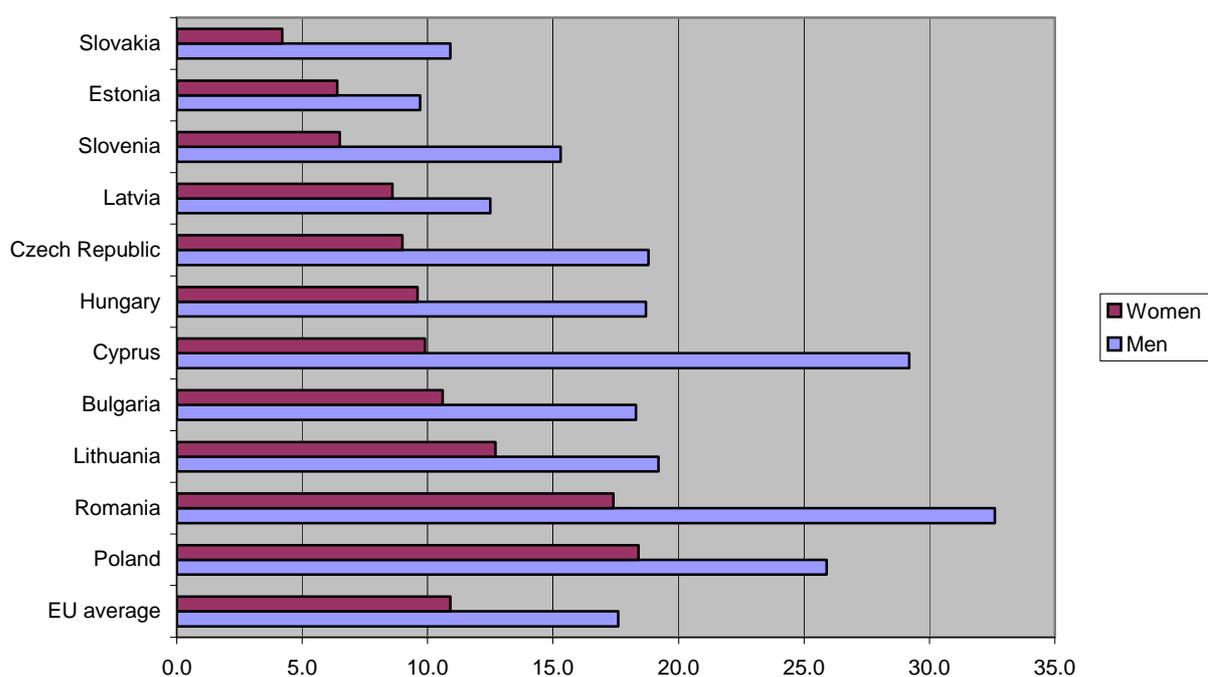
Belgium = estimated from Walonie 2000; Germany = 2000; Greece and Poland = 1997, Spain, Ireland and Austria = 1998;

Portugal: includes only academic staff in R&D activities and excludes those only involved with teaching duties.

Source: Research DG, WiS database; Report, cited from "The life of women and men in Europe. A statistical portrait. Data 1980-2000, European Commission, Eurostat, 2002, p. 165, <http://europa.eu.int>

The transition in Eastern and Central Europe has opened up opportunities for many new forms of employment, among them self-employment. However, men are more likely to be self-employed than are women. In the New Member States and Candidate countries the difference between male and female self-employment rates is greater than the EU 15 average, with the exception of Slovakia and the Baltic States (Graph III-13). In Romania and Poland the number of entrepreneurs is inflated by the inclusion of peasant farmers and as these are usually family enterprises, women may be included in other ways, for example as unpaid family workers on the farm or small holding.

Graph III - 13: Entrepreneurship in 2000, percentage of women and men who are self-employed



Source: Key employment indicators, DG Employment, http://europa.eu.int/employment_social

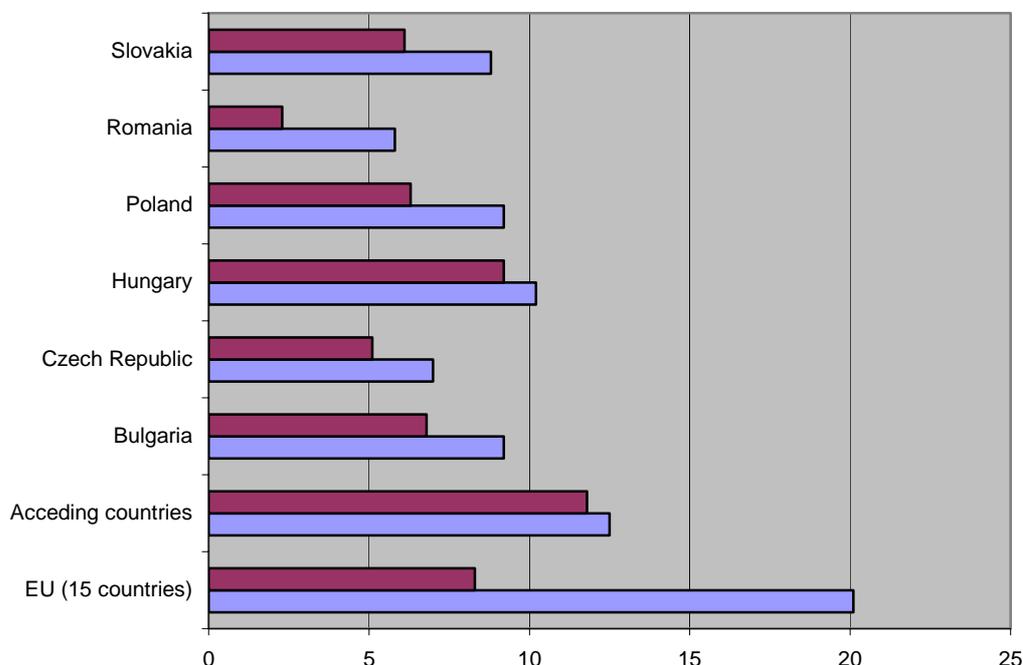
3.1. Regional trends in employment

The dispersion of regional employment rates of men and women is measured by the coefficient of variation calculated using employment rates at NUTS (Nomenclature of Territorial Units for Statistics) level 2. It is calculated for each country separately and gives a measure of the regional spread of employment rates. The dispersion of regional employment rates is bigger for males than for females in the EU 15, as well as in the countries we are investigating. However, the regional dispersion of male employment rate exceeds the extent of the regional dispersion of female employment rate in the EU 15 than in the Enlargement countries. Among the latter, in Romania, Poland and Slovakia the regional dispersion of male employment rate exceeds the regional dispersion of female employment rate to a relatively high extent (Graph III-14).

Thus, the employment rates of men than women are likely to be more affected by the structural changes appearing on the regional level during the course of transformation. Men are affected by the downsizing of large industrial plants such as steel or mining, and jobs

created are often in the service sector in other regions, especially large cities, creating centres of prosperity and peripheral regions.

Graph III - 14: Dispersion of regional employment rates, Males and Females



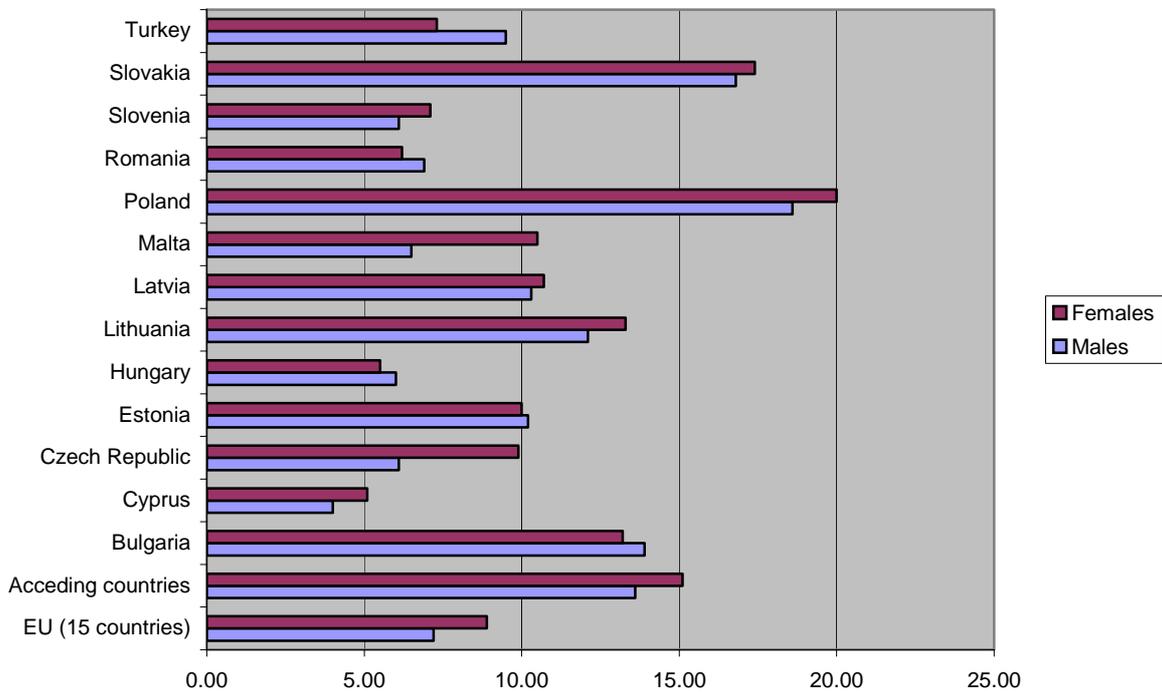
Source: Eurostat, free data, March 2004, <http://europa.eu.int/eurostat>

3.2. Unemployment

In Cyprus, the gender gap in the unemployment rate is closing because of a decrease in the female unemployment rate between 2000 to 2002. The female unemployment rate is higher than the male unemployment rate in Slovenia and Czech Republic (where the gender gap is increased in 2003), in Slovakia where it increased between 2002 and 2003, in Malta (where the female unemployment rate increased between 2001 to 2003 and the gender gap widened) and in Poland (where the gender gap is decreasing). The male unemployment rate exceeds the female unemployment rate in Slovakia (in 2000 and 2001), Lithuania (from 1999 to 2002), Bulgaria, Estonia, Latvia, Hungary and Romania. However, the gender gap tends to close in 2003 in these countries (Table AIII-26 and Table AIII-27 in the Annex).

The female unemployment rate is higher than that of males according to the recent data in both the EU 15 and the New Member States, although there are some exceptions (Graph III-15).

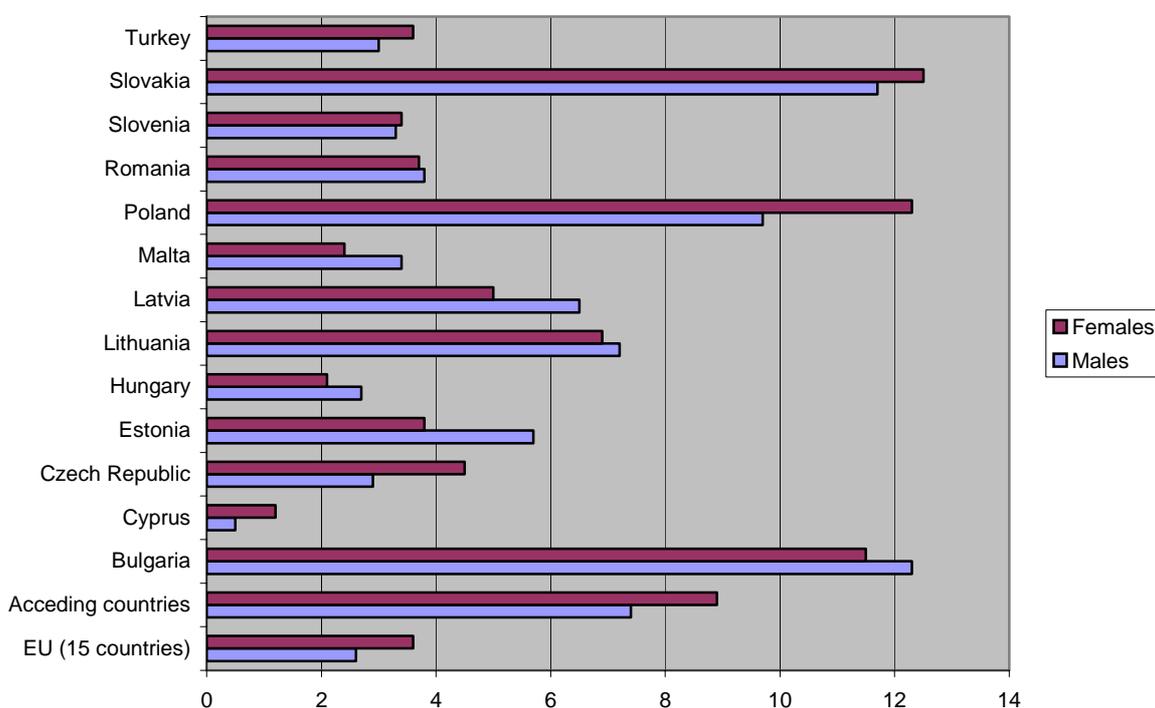
Graph III - 15: Unemployment rate, 2003



Source: Eurostat, free data, March 2004, <http://europa.eu.int/eurostat>

The long-term unemployment rate in the EU 15 and the Acceding countries as a whole is higher for women than for men, most strikingly in Poland and the Czech Republic. In Slovenia and Romania the long-term unemployment rates are roughly equal to that of men. In Bulgaria, the Baltic States and Malta the long-term unemployment of male exceeds those of female, although not to a big extent (Graph III-16). In Poland, Slovakia and Bulgaria the unemployment rate is relatively high.

Graph III - 16: Total long-term unemployment rate, males and females, Long-term unemployed (12 months and more) as a percentage of the total active population, 2002



Source: Eurostat, free data, March 2004, <http://europa.eu.int/eurostat>

3.3. Gender pay gap

The gender pay gap remains in all the countries. Closing this gap is the objective of policies at both national and an EU levels. In most of the New Member States and Candidate countries a higher than the EU average and this is the case in Cyprus, the Czech Republic, Estonia, Slovakia, Hungary and Romania. In Lithuania, Latvia and Poland the gender pay gap is similar to EU average and in Slovenia and Malta it is smaller (Graph III-17). We should note that Slovenia has exceptionally good support for working women – we might see it as the Sweden of the South. In the EU the gender pay gap remained almost constant during the period from 1994 to 2001. In Cyprus and the Baltic States the gender pay gap is slowly narrowing while in Malta and Poland it is stable (according to the available data). In the other countries, the gender pay gap is fluctuating. (Graph III-18).

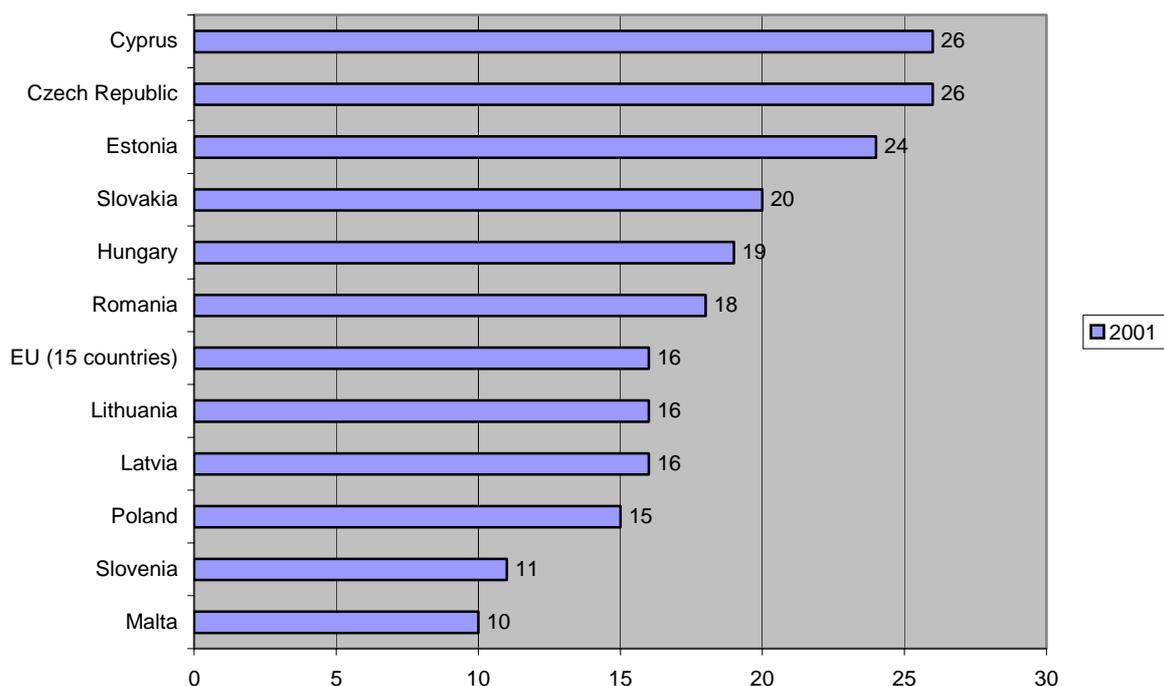
3.4. Women and Poverty

Given the tendency towards the disadvantage of women along with the changing demographic features of the Enlargement countries, we might expect poverty to have become feminised. A study carried out in the mid 1990s set out to investigate this assumption in some selected transition countries²³. It found that the causes of poverty were not the same as

²³ Domanski, H. (2002). "Is the Eastern European "underclass" feminised?" *Communist and Post-Communist Studies* 35: 383-394.

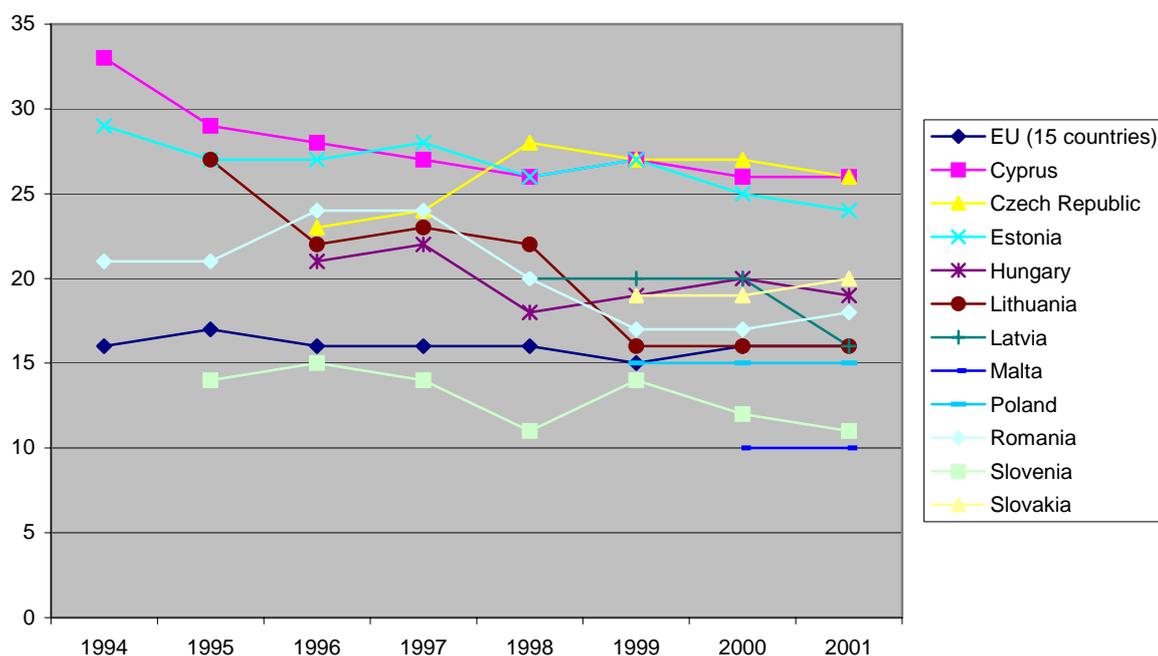
in Western countries because there were very few single parents and most women were in employment. Therefore, the usual characteristics of an “underclass” as in Western countries were not present and had not taken long enough to become self-reproducing. Female poverty was associated with living in a rural area, being old and having low education. Furthermore, whilst in some countries (Poland, Russia, Hungary and Romania), gender had an effect on poverty, in Bulgaria and Slovakia it did not.

Graph III - 17: Gender pay gap, 2001



Source: Eurostat, free data, March 2004, <http://europa.eu.int/eurostat>

Graph III - 18: Gender pay gap in unadjusted form



Source: Eurostat, free data, March 2004, <http://europa.eu.int/eurostat>

4. Conclusions

Within the period of socio-economic transformation the opportunities and requirements related to education and the labour market changed. This development has repercussions for the social participation of women. Moreover, the reduction of the social support helping the reconciliation of work and family life in many countries, makes it more difficult for women to participate in the labour market and creates the necessity to improve and create new policies and institutional mechanism in this field.

The involvement of women in upper secondary and tertiary education is rather high in the post-communist Enlargement countries, although not so much in the Mediterranean countries. Women are especially well represented in the upper secondary level of education. In tertiary education, the proportion of women even exceeds that of men, although the numbers fall away as we go up the educational hierarchy. Although, the share of women in science and technology is lower than the share of male graduates, it has tended to increase during the period 1997-2001.

Women are more involved in life long learning than men in the EU 15 and in the New Member States as a whole. Only in Malta did the number of the men exceed the number of women participating in life-long learning, due perhaps to the relatively lesser participation in tertiary education, in employment and the cultural stereotypes towards women involvement in the society reflecting generally the “Southern” model.

Despite these educational advantages, the number of women participating in the employment market is lower than that of men in the New Member States and Candidate countries, and in some cases lower than the EU 15. The employment gap between genders exceeds the EU 15 average in Malta, Turkey and Cyprus, due mostly to the traditional family culture in these

countries. Among the New Member States of Central and Eastern Europe, the gender difference in employment rates is not so big because of the social support that the women formerly enjoyed during socialism and the cultural expectation that should work full time in the labour market. A positive trend is that the gap in employment rates between genders is decreasing during the period from 1996 to 2002 in the EU 15 and the Acceding countries as a whole, although it is higher in many countries than the EU average.

Among the problems related to women employment is the ageing of the working age population in the Acceding and Candidate countries, which is more marked among the female population. Older women are more likely to be poor, so this could be an important source of disadvantage in the future, especially following reforms of the pension system that have eroded the value of state pensions.

As in the EU 15, women are more likely to work in services or in clerical jobs. They are less likely to be managers or self-employed. However, unlike in the EU 15, very few are working part time and this is on the whole not a desirable option.

Therefore, policies to promote women's participation in economic life and in science are required in order to allow the development of professional careers for women in this sphere. The reduction of occupational segregation is an important aspect of equal opportunities in employment policies in the EU 15 and the future EU Member States according to the European Council of Lisbon.

Unemployment is a key problem of the transition economies. The female unemployment rate is higher than those of men according to the recent data in both the EU 15 and the New Member States as a whole. Similar to the trend of unemployment rate, the long-term unemployment rate in the EU 15 and New Member States as a whole is higher for females than for males. Thus, the vulnerability to unemployment for women is greater than for men and measures overcoming the unemployment and especially the female unemployment should be undertaken.

In terms of gender mainstreaming in labour market the gender pay gap represents a problem disturbing the equal opportunities in employment. In most of the New Member States and Candidate countries, a higher than the EU average gender pay gap can be observed. Closing this gap should be the objective of policies on a national and an EU level.

CHAPTER IV: WOMEN AND HEALTH

1. Introduction

Health is important to women not only because health status is an important component of quality of life but also because women have to provide informal health care for family members. Poor health impacts on individuals ability to participate in social and economic activities including paid employment. Thus the assessment of health represents an important part of the analysis of the women's situation in the Member States and Candidate countries within the process of EU enlargement. The EU 15 and the member and candidate countries all have mortality and morbidity patterns typical of economically developed countries – comparatively low infant mortality rates, a long expectation of life at birth with women on average having a higher expectation of life than men. The main causes of death are non-infectious diseases such as coronary heart disease and cancers. Life expectancy is strongly related to economic factors – in the EU 15 the inequalities between countries in mortality are related to inequalities as measured by the Gini coefficient with more equal societies having not only longer life expectancy but also lower inequalities in health within their countries²⁴. Within countries there is a strong correlation between health and material circumstances with a health gradient so that life expectancy increases with material circumstances. The same pattern holds for men and women although on average women outlive men and report more ill health - physical and mild psycho- social. Women's psycho social health is generally poorer than that of men across the life course but the gap between male and female physical mortality grows with age and has been narrowing in younger age groups in more recent years so that it has now virtually disappeared in the under 65 age groups in at least some western countries²⁵. The pathways that link mortality and material circumstances suggest that the main factors are stress resulting from lack of control over their circumstances and unhealthy lifestyles including high alcohol consumption, binge drinking, tobacco consumption, a lack of recreational exercise and a diet high in saturated fats and low in fruit and vegetables²⁶.

Thus, health can be taken as a measure of *social quality* which takes into account not only the objective conditions of the population (income, diet etc.) but also their ability to act in their lives, the extent to which they are empowered to control the conditions affecting their health. However, in assessing women's health we should be careful to distinguish between mortality and morbidity. Although women are less likely to die early, they are more likely to be sick than men. Morbidity and mortality patterns are a good indicator of the health of a society.

In some of the countries of Central and Eastern Europe following the collapse of communism there was a dramatic increase in mortality, although the more prosperous countries showed a continuing improvement in health that began in the 1980s. The main increase was amongst men in midlife and the main causes of death was heart disease and external causes (accidents, suicide and murder) however as the economic situation improved from the mid 1990s the trend was reversed. In assessing women's health we should be careful to distinguish between mortality and morbidity. Although women are less likely to die early, they are more likely to be sick than men. At the same time there have been substantial changes in the health care systems of these countries. While the health care system has much less impact on mortality rates than economic circumstances a reduction in formal health care can both increase the

²⁴ Wilkinson, R., *Unhealthy Societies*. London and New York, Routledge, 1996.

²⁵ Abbott, P., *Gender Differences in Health in post-Soviet Societies*, Vienna, Institute for Advanced Studies, 2004.

²⁶ Cockerham, W.C., *Health and Social Change in Russia and Eastern Europe*, Routledge London and New York, 1999.

burden of disease for those with health problems and increase the burden on informal careers. Women are likely to be more adversely affected than men by the changes as they both suffer more ill health than men are provide the bulk of informal health care. Also as the main group of health care workers in the formal sector (as doctors and nurses) they have to deal with the shortages of equipment, drugs and other facilities and the low levels of pay typical in the sector.

In considering women's health we take into account both mortality and morbidity and objective measures (mortality statistics) and subjective indicators (satisfaction with health) in the New Member States and Candidate countries. This approach is based on the concept of *quality of life* representing a widely recognised framework for the analysis of the welfare development of society, combining objective living conditions and subjective well being²⁷.

We use the official statistics from World Health Organisation (WHO) - Regional office for Europe to examine mortality patterns. The Standard Death Rate (SDR) from selected diseases is analysed as an indicator of the health situation of men and women (because it is the only for this indicator for which data is available by gender). We use the 0 – 64 SDR so we can focus on premature mortality.

The study of mortality by gender is carried out in comparative perspective by clustering the countries²⁸ of New Member States and Candidate countries, i.e. countries from Central and Eastern Europe (CEE)²⁹, from South Eastern Europe (SEE)³⁰, from the Baltic States and from the Mediterranean countries³¹ (where data are available) in order to highlight more precisely the common patterns of mortality trends.

In order to consider subjective perceptions of health (itself a relatively reliable indicator of health status) we use data from Eurobarometer 2000 for the New Member States and the Candidate countries. In addition to considering male – female differences we look at the relationship between satisfaction with health and age and socio-economic factors.

2. The health situation of women in the New Member States and Candidate countries

2.1. Life expectancy at birth

Economically developed countries have low infant mortality rates and a high expectation of life at birth with a gendered mortality gap with men on average having a shorter life expectancy than women. Both male and female life expectancy at birth is below the EU 15 average in all the New Member States and Candidate countries from Central and Eastern Europe (CEECs). However, in Cyprus and Malta male life expectancy is higher than the EU 15 average (Graph IV-1) and in Slovenia it is not much different from the EU average. Thus, we can assume that the living conditions in the CEECs are less favourable and the quality of life is still not as high as in Western Europe, even if conditions have been improving.

²⁷ Christian Haerpfer, Claire Wallace, LLH research reports, HWF research reports.

²⁸ This classification is formulated in the report - Haerpfer Christian W., Claire Wallace, "The Social Situation in the Candidate Countries with Special Reference to Health in the Candidate Countries," (with L. Mateeva). Contribution to the European Commission, DG Employment and Social Affairs Annual Report, 2003.

²⁹ CEE – Czech Republic, Hungary, Poland, Slovakia, Slovenia

³⁰ SEE – Romania and Bulgaria

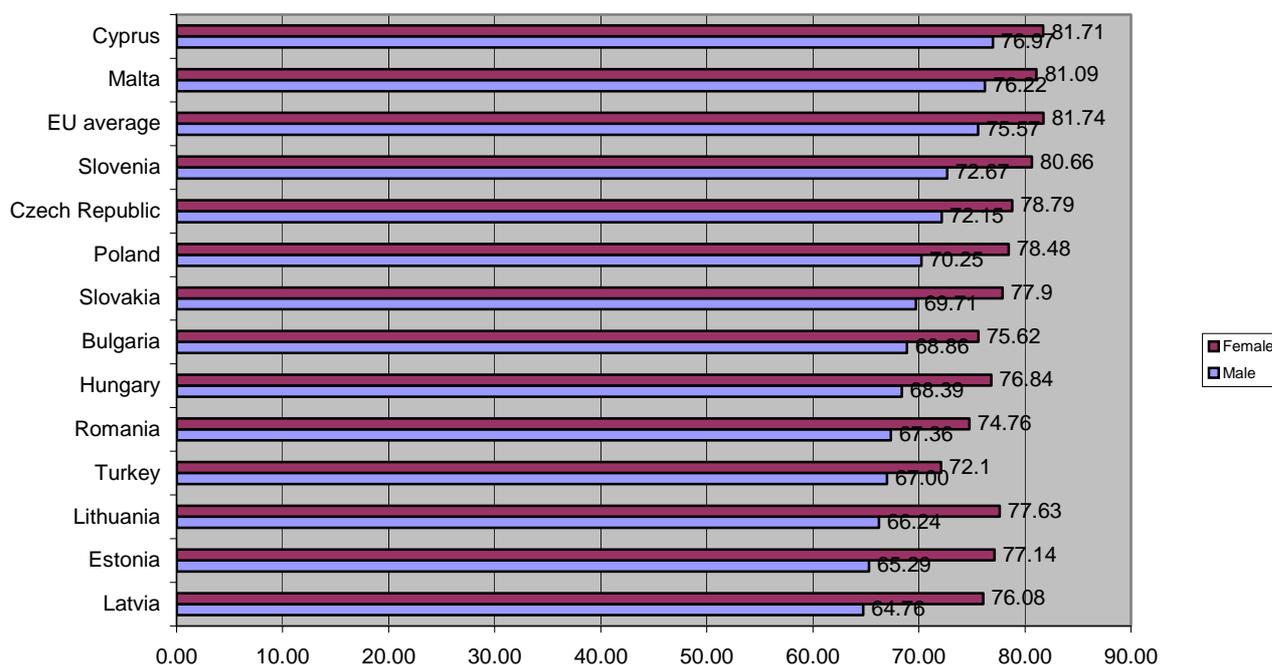
³¹ Mediterranean countries – Malta, Cyprus and Turkey

Generally life expectancy at birth increased over the course of the twentieth century except in times of war. There are two exceptions to this. The increase in mortality due to AIDS has resulted in a decline in life expectancy in many countries of the South most notably in Africa South of the Sahara. The other exception is the dramatic decline in life expectancy witnessed in the former USSR and some of the countries of Eastern and Central Europe post 1991. In fact while from the 1960s there was a steady increase in life expectancy in the countries of Western Europe including the EU 15 and this was the case in the Czech Republic, Hungary, Poland, Slovakia and Slovenia since 1980 as well as Malta and Cyprus. Life expectancy improved in the Baltic States only after 1995 and in Romania and Bulgaria only after 2000. Therefore the Baltic States, Romania and Bulgaria tend to reflect the post-Soviet pattern of decline after the transition but with a later recovery. Life expectancy does therefore tend to reflect the path of transition in different regions: the most successful countries have higher life expectancy.

Female life expectancy at birth is higher than that of men in all countries, (Graph IV – 1) and there is a gender gap in life expectancy in all the states. (Graph IV – 2). The EU 15 average life expectancy for women is 81.7 years and is much the same in Cyprus and Malta. Turkey has the lowest female life expectancy at 72.1 years. Female life expectancy in the New Member states of Central and Eastern Europe varies from 80.7 years in Slovenia to 74.8 years in Romania. Male mortality patterns are not dissimilar. Those of Malta and Cyprus are marginally higher than the EU 15 average and in Turkey male life expectancy is higher than for Lithuania, Estonia and Latvia. Male life expectancy ranges from a high in Cyprus of 77 years to a low of 64.75 years in Latvia. There is a wide variation in the gender mortality gap. The largest gender gap in mortality 15 years is found in the Russian Federation. The gender gap is 6.2 years in average in the EU 15. Among the New Member States the lowest life expectancy for males as well as the biggest gender gap is found in the Baltic States, the countries most similar to the post-Soviet pattern (and longest part of the Soviet system). In Slovenia, by contrast, life expectancy for women is not very different from the EU average. Therefore, where life expectancy is lowest, the gender gap is highest. This is because low life expectancy in transition countries affects especially men in mid life.³²

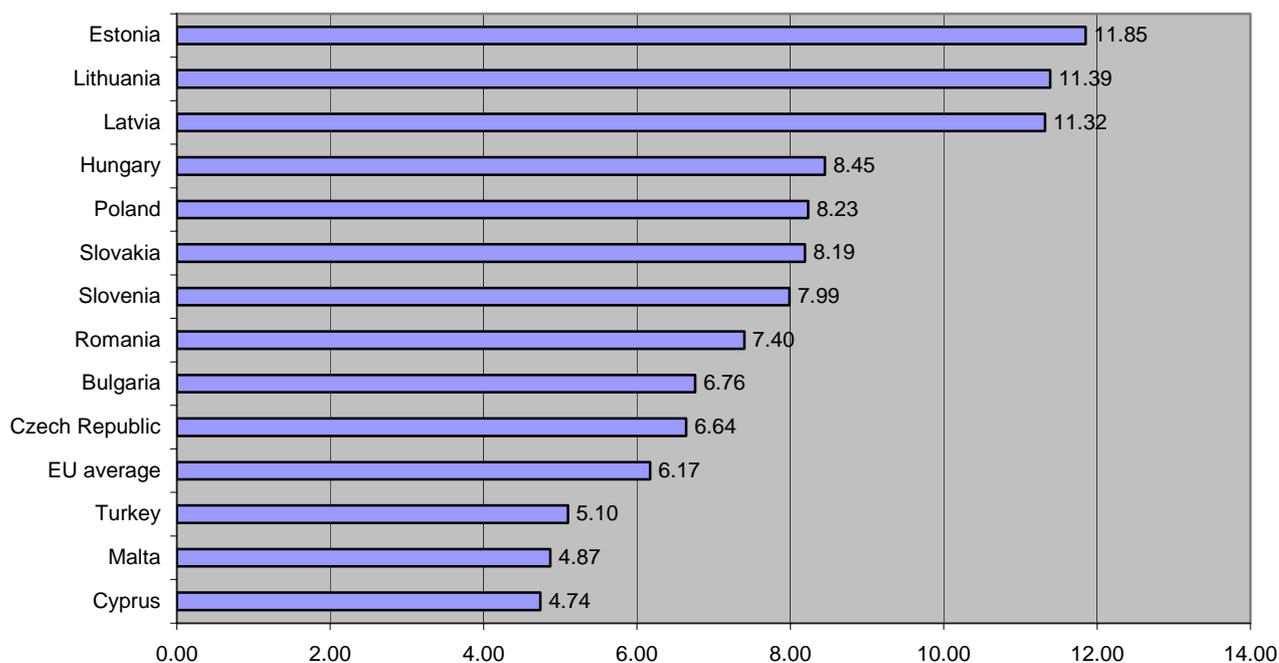
³² Watson, P., "Politics, policy and identity: EU eastern enlargement and East-West differences." *Journal of European Public Policy* 7(3), 2000, p. 369-84.

Graph IV - 1: Life expectancy at birth, 2002 or the latest available



Source: WHO, Regional Office for Europe, March 2004; <http://hfadb.who.dk/>
 EU average = 2000, male and female; Turkey = 1999, male and female; Cyprus =2001, male and female; Poland =2001, male and female; Slovakia =2001, male and female

Graph IV - 2: Difference between female and male life expectancy, 2002 or latest available (+ for women)



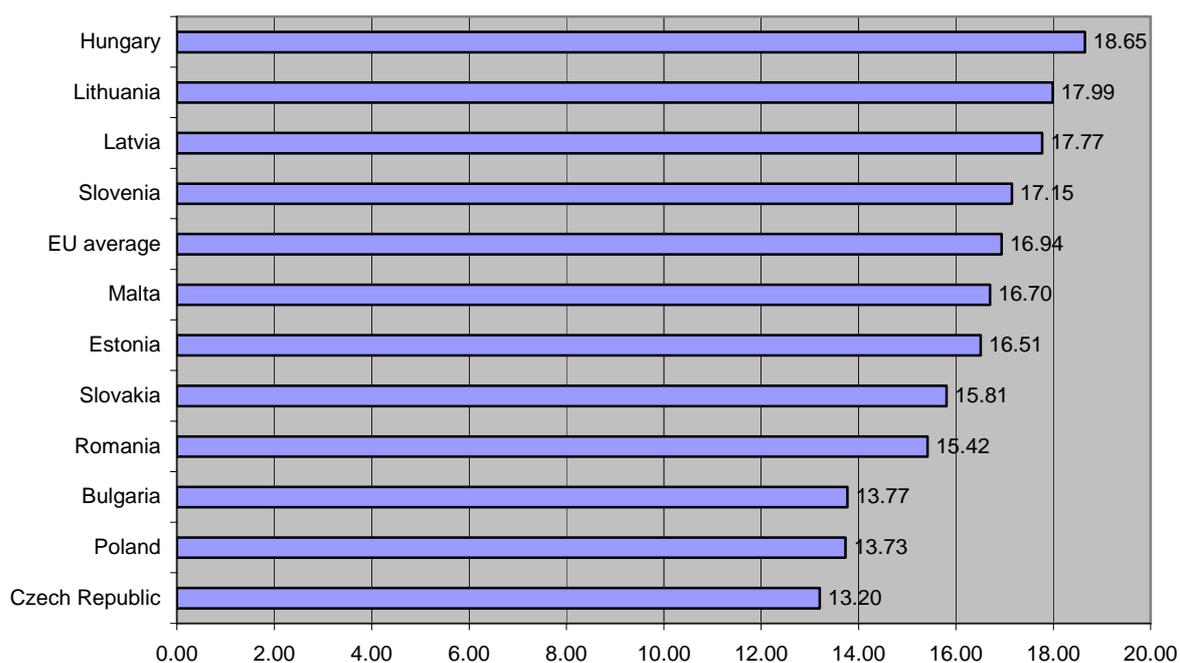
Source: WHO, Regional Office for Europe, March 2004; <http://hfadb.who.dk/>
 EU average = 2000, male and female; Turkey = 1999, male and female; Cyprus =2001, male and female; Poland =2001, male and female; Slovakia =2001, male and female

2.2. Non-infectious diseases

The main killers in developed countries are non-infectious diseases. Most of these are not gender specific and the major killers of both men and women are cancers and heart disease, although on average men die at a younger age. There are however some causes of mortality which are higher for one sex than the other. The main example is death from external causes (accidents, suicide and murder) where men are significantly more likely to die from these causes than women. Finally there are some gender specific diseases – which are confined or virtually confined to one sex. The main ones in advanced countries for women are breast cancer and cancer of the cervix.

Standardised mortality data for women 0-60 indicates that premature mortality caused by breast cancer is higher than EU 15 average in Slovenia, Latvia, Lithuania and Hungary, but is lower in Bulgaria, Poland and Czech Republic (Graph IV-3). When we consider trends in SDR caused by female breast cancer, we find that it is decreasing in the EU 15 as a whole, whilst it is relatively constant or fluctuating in the New Member States and Candidate countries (Graph AIV-9, AIV-10 and AIV-11 in the Annex).

Graph IV - 3: SDR, malignant neoplasm female breast, 0-64 per 100000 - Female, 2002 or the latest available data



Source: WHO, Regional Office for Europe, March 2004; <http://hfadb.who.dk/>
Poland = 2001; Slovakia = 2001; EU 15 average = 2000

The SDR 0-64 from cancer of the cervix exceeds the EU average in all the New Member States and Candidate countries, and is highest in Romania and Lithuania (Graph IV-4).

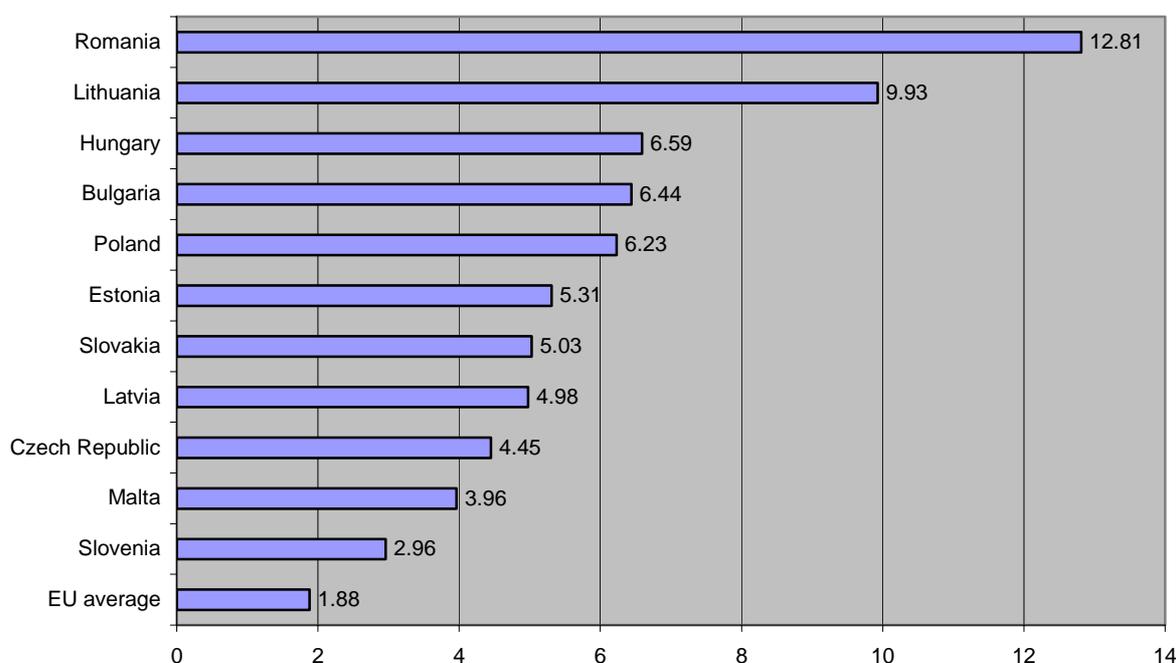
Premature mortality from cancer of the cervix decreased in the EU 15 during the period 1980-2002 (Graph AIV-12 in the Annex). Similar trends are also observed in Poland and in Hungary until 2000. In the other CEE countries and Malta the SDR 0-64 from cancer of the cervix is higher than the EU average and the trends suggest that it is increasing although the

rates have fluctuated over the 1990s. (Graph AIV-12 in the Annex). In Latvia and Estonia the SDR 0-64 from cancer of the cervix exceeds the EU 15 average but shows no clear upward or downward trend.(Graph AIV-14 in the Annex).

In Bulgaria and Romania the premature mortality rate significantly exceeding the EU 15 average and was rising over the period 1980-2002, (Graph AIV-13 in the Annex).A comparable negative trend is found also in Lithuania.. These countries deserve special treatment with regard to women's health.

A comparison of the premature mortality rates for breast cancer and cancer of the cervix indicates that there is a need to improve health education, screening and treatment regimes for these diseases in the New Member States and the Candidate Countries. Women are dying from illness where preventative measures and improved treatment regimes has resulted in a decline in premature mortality rates in the EU 15.

Graph IV - 4: SDR, cancer of the cervix, 0-64, per 100000 - Female



Source: WHO, Regional Office for Europe, March 2004; <http://hfadb.who.dk/>
Poland = 2001; Slovakia = 2001; EU 15 average = 2000

The male SDR 0 – 64 from non-infectious diseases is higher than that for females. We are referring here to premature mortality – that is death before 65 years. Ultimately the differences in the diseases that men and women die from are slight with heart disease being the major cause of death for both men and women but men are significantly more likely to die before they are 65 years than women – and the major causes of male premature mortality with a significant gender difference are heart disease and external causes. We illustrate the differences between the premature male and female mortality rates for men and women in the New Member States and the Candidate Countries and between these countries and the EU 15 by looking at mortality rates for diabetes' and related disease, diseases of the circulatory system including heart disease, suicides and accidents and mental health problems.

The main cause of premature mortality in the EU 15 and the New Member States and the Candidate Countries are diseases of the circulatory system.. The premature mortality rate is much higher for men than women in all the countries but the gender gap is larger in the countries of Central and Eastern Europe than in the EU 15 or Malta. The SDR 0 – 64 varies for women from the EU 15 rate of 67 per 1000000 to 88 per 100000 in Bulgaria and the male rate varies from 66 per 1000000 in Malta to 288 per 1000000 in Latvia. The female premature mortality rate from diseases of the circulatory system are higher in Latvia, Bulgaria and Estonia than the male rates in Malta and the EU 15. (Graph IV-6).

In general premature mortality from disease of the circulatory system is declining in all the countries.

The male and female SDR 0 – 64 caused by diseases of the circulatory system declined has declined in the EU 15 since 1980. In the most of the CEE region the male and female SDR 0 – 64 is also declining. The male SDR 0 – 64 caused by diseases of the circulatory system declined after 1990 in the Czech Republic, Slovakia, Hungary, Poland and the female rate in Poland and Slovakia (Graph AIV-33 and Graph AIV-34 in the Annex). In the Baltic States premature mortality from these diseases increased dramatically between 1990 and 1995 and since declined to almost to the previous levels (Graph AIV-37 and Graph AIV 38 in the Annex).

The high rate of ischaemic heart disease is one of the main reasons for low life expectancy in the New Member States and Candidate countries . All the New Member States and Candidate countries for which we have data have a higher SDR 0 – 64 for ischaemic heart disease than in the EU 15, with the exception of Slovenia. The highest rates of male SDR 0 – 64 were are in the Baltic States. The female SDR is the highest also in the Baltic States and in Romania. The lowest rates of ischaemic heart diseases are found in Slovenia, (Graph IV-7). While there is considerable differences in the rates of premature mortality from ischaemic heart disease for men in the transition countries, it affects men especially. Nevertheless, the premature mortality rates for women from ischaemic heart disease is higher than the EU average in every country except Slovenia.

Premature mortality rates from suicide and self-inflicted injury are much higher in the New Member States and Candidate countries than in the EU 15 except for Malta, for both men and women. The highest rate is for men in Lithuania where the SDR 0 – 64 is 81.5 per 1000,000 and the lowest is for women in Malta – 4.9 per 100000. Men are much more likely to die from prematurely from suicide than are women in all the countries (Graph AIV-9). The rate varies for men from 81.5 in Lithuania to low of 4.9 in Malta. The female rate varies from 9.5 in Lithuania to a low of 2.3 in Malta. The gender gap varies from a high of 72 in Lithuania to a low of 2.5 in Malta with the gap being nine in the EU 15. Premature mortality rates from suicides have been declining for both men and women in the EU 15 since at least the 1980s. (Graph AIV-51 and AIV-52 in the Annex). The picture is more complex and less clear in the New Member States and the Candidate Countries. In Malta which has a very low rate of premature mortality from suicide for both men and women the rate increased in the 1990s but now seems to be declining. The overall trend in the CEE region is for the rates for both men and women to a decline but with some fluctuations in some of the countries. In the Baltic States the rates for both men and women increased significantly post 1991 and but in declined after 1995.

While the decline post 1995 has continued in Lithuania for women otherwise the post 1995 rates for both men and women in the Baltic countries have fluctuated since 2000. The premature mortality rate from suicide increased between 1990 and 2002 in Romania and increased between 1990 and 2000 in Romania but now seems to have stabilized. In Bulgaria the overall trend for women is a decline in premature mortality from suicide and the situation

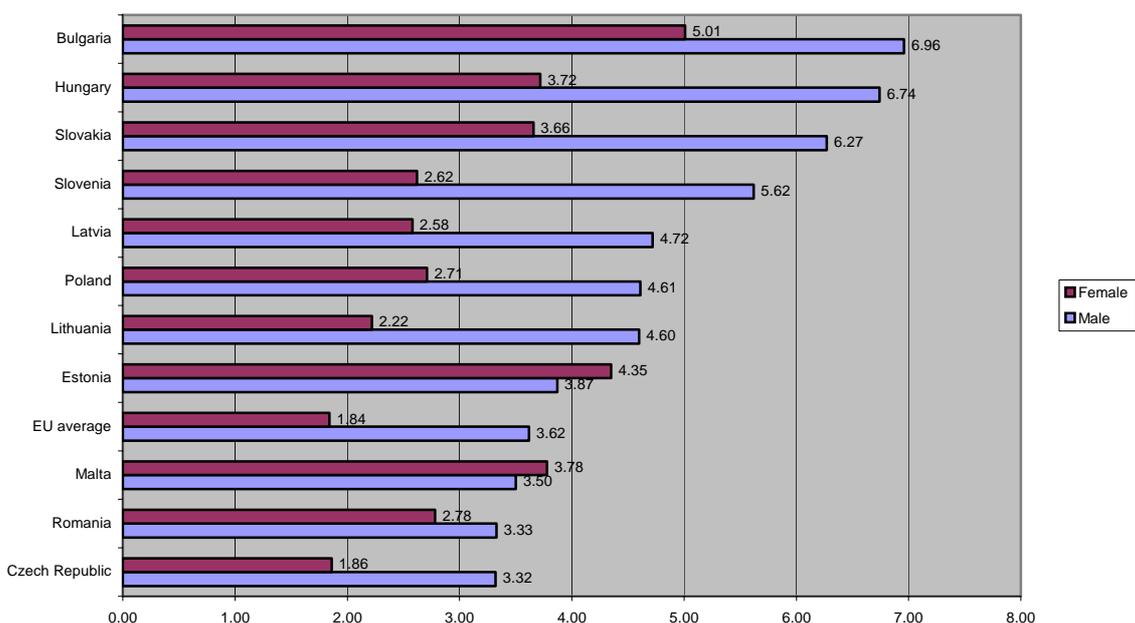
ids much the same for women although there is some indication of an upward trend post 2001 (Graph AIV-53 and AIV-54; Graph AIV-55; AIV-56 in the Annex).

The statistics on premature mortality from suicide should be interpreted with caution when comparing rates between countries and when considering trends in female mortality. There is evidence for example that courts are more likely to define some deaths as suicide than others and that deaths in Catholic countries are less likely to record deaths as due to suicide than in Protestant countries. The premature mortality rates from suicide are low for women and a small increase in the numbers of deaths recoded as due to suicide can result in what appears to be a large increase in the rate or to the rate fluctuating. However trends within countries over time are likely to indicate 'real' changes in the rate especially for men. However it is probably safe to conclude that the changes in the rates in the countries of Central and Eastern Europe since 1990 are related to changes in the numbers of people taking their own lives and that in particular there has been an increase in premature mortality caused by suicide and self-inflicted injury in the Baltic States.

The gender difference (+ for men) of the SDR 0-64 caused by diabetes, endocrine & metabolic disease and disorder involving immune mechanism are smaller than the mortality rates caused by disease of the heart and circulatory system. However the gender difference in premature mortality from diabetes is larger than the EU average in most of the New Member States and Candidate countries. In the Czech Republic and Romania the gender differences are large and in Malta and Estonia the female SDR 0 – 64 from diabetes exceeds the male rate. Also female SDR 0 – 64 from diabetes exceeds the EU 15 average in all the New Member States and Candidate countries, while the male premature mortality rate from diabetes is lower than the EU 15 average in Malta, Romania and Czech Republic (Graph IV-5).

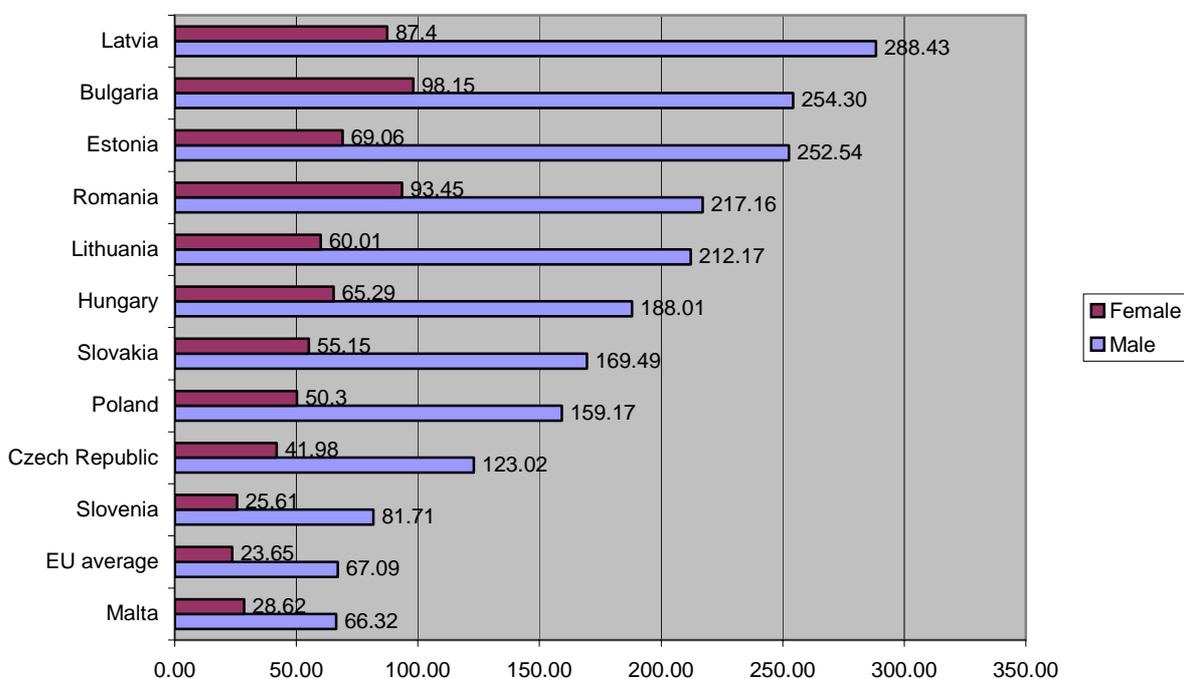
The New Member States and Candidate countries do not follow the trends towards a decline in premature from diabetes observed in the EU 15 for the period However, in some countries a there is decrease after 1995, especially for women. This would appear to follow economic trends and the progress of the transition in different countries (Graphs: AIV-15 to Graph AIV-20 in the Annex).

Graph IV - 5: SDR, diabetes, 0-64 years, per 100000, 2002 or latest available

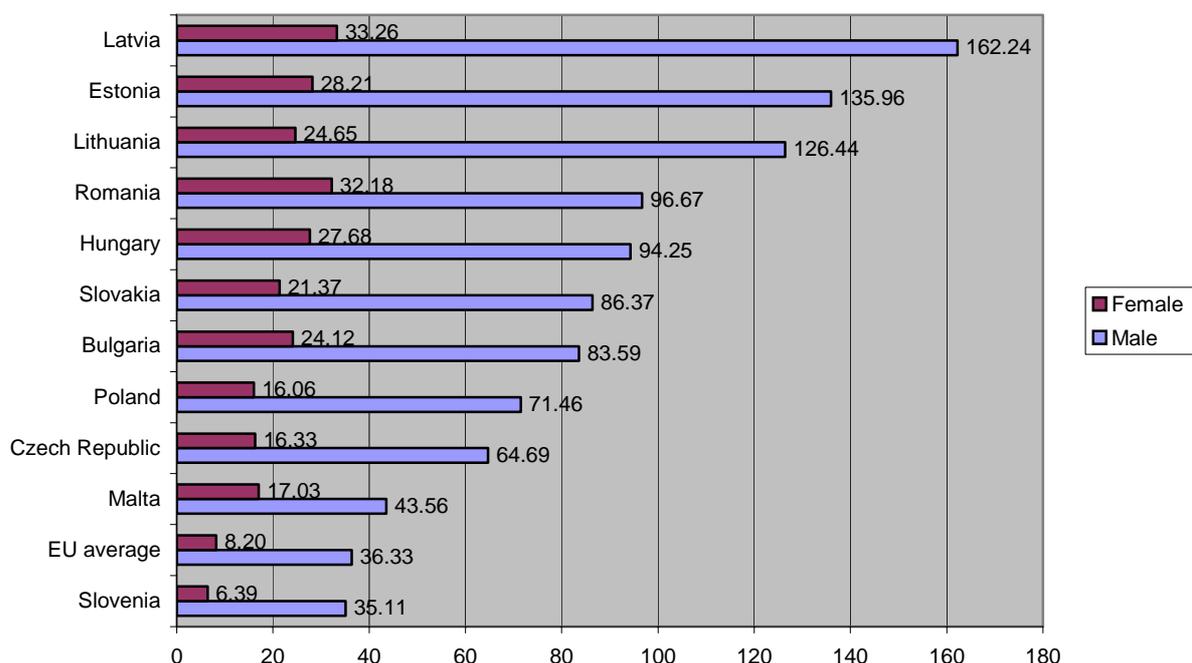


Source: WHO, Regional Office for Europe, March 2004; <http://hfadb.who.dk/>
 Poland = 2001 for male and female; Slovakia = 2001 for male and female; EU 15 average = 2000 for male and female

Graph IV - 6: SDR, diseases of circulatory system, 0-64 per 100000, 2002 or the latest available



Source: WHO, Regional Office for Europe, March 2004; <http://hfadb.who.dk/>
 Poland=2001 for male and female; Slovakia =2001 for male and female; EU 15 average = 2000 for male and female

Graph IV - 7: SDR, ischaemic heart disease, 0-64 per 100000, 2002 or latest available

Source: WHO, Regional Office for Europe, March 2004; <http://hfadb.who.dk/>

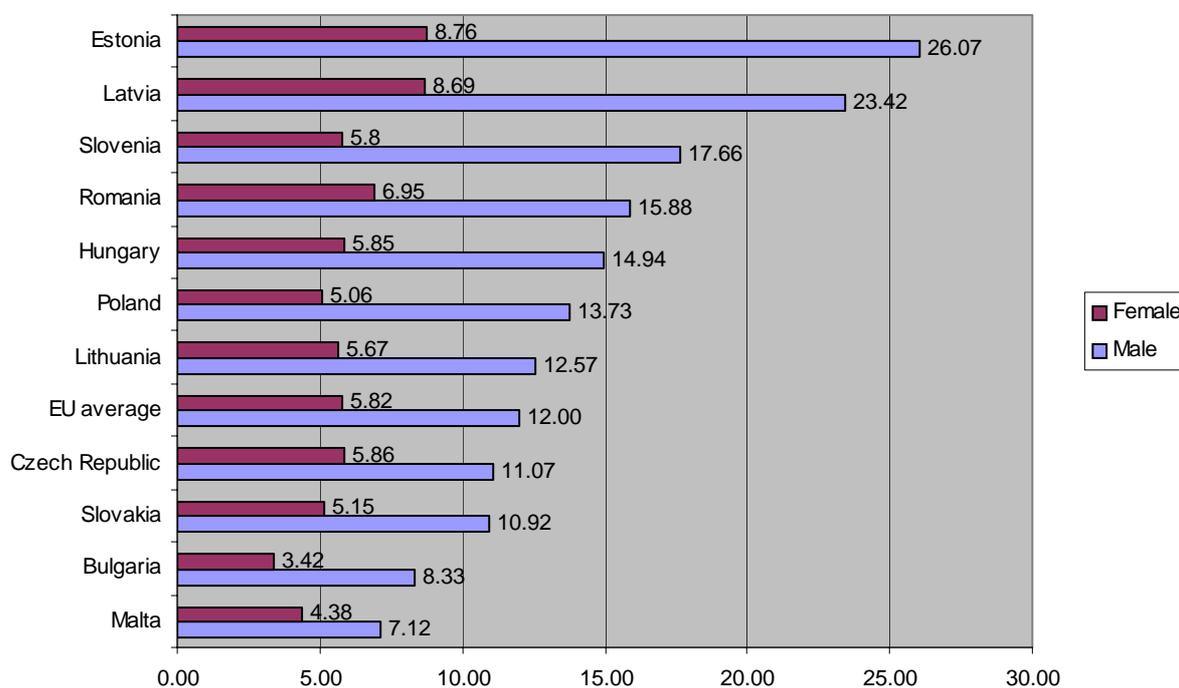
Poland = 2001 for male and female; Slovakia = 2001 for male and female; EU 15 average = 2000 for male and female

The premature mortality rate from mental disorder and diseases of the nervous system is higher in many New Member States and Candidate countries than the EU 15 average. The male premature mortality caused from mental disorder is higher than the EU average in most of the New Member States and Candidate countries. The female SDR 0 – 64 is higher than the EU average only in Estonia, Latvia, Romania, Czech Republic and Hungary (Graph IV-8).

Men are more likely to die prematurely from mental disorder and diseases of the nervous system and the sense organs than women. The male SDR 0 – 64 from these diseases is higher than the female one in all the countries. The highest rate of premature mortality from mental disorder is in Estonia and Latvia for both for men and women. The male and female SDR 0 – 64 is also comparatively high in Romania.

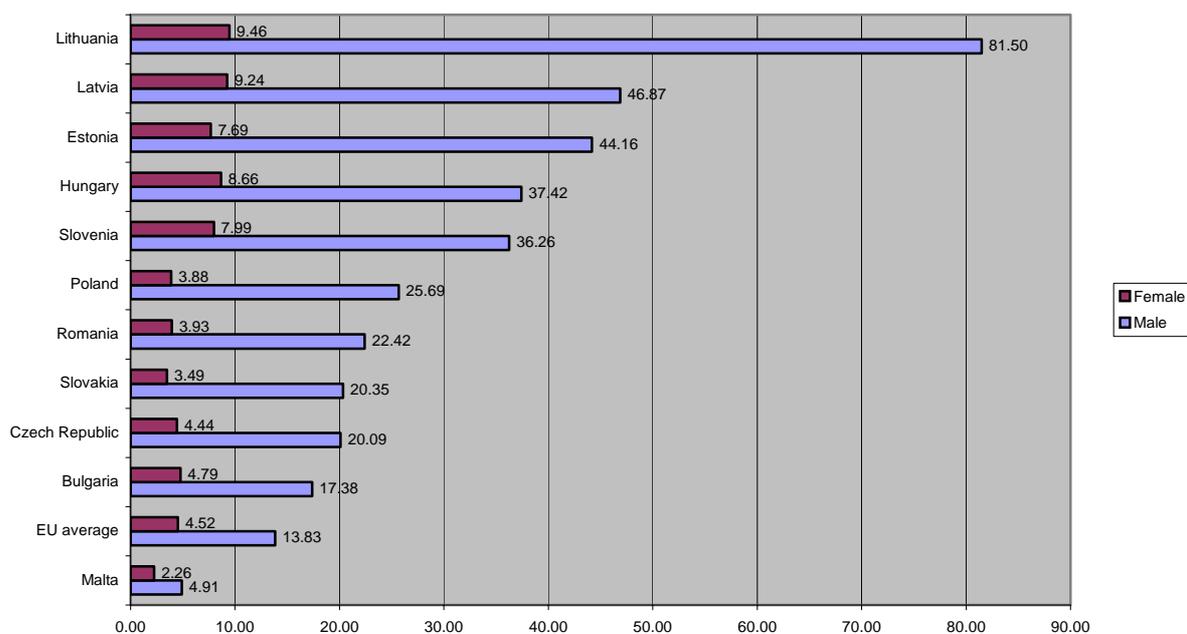
The trends in this indicator show that in many countries premature mortality from mental disorders increased at the beginning of the socio-economic reforms in Eastern and Central Europe (from 1990 to 1995) and after that it decreases. However, in many countries the level is still higher than in the 1980s. The increase in premature mortality from mental disorder and diseases of the nervous system and the sense organs from 1990 to 1995 was especially high in the Baltic States and higher for men than women in all countries (Graph AIV-49 and Graph AIV-50 in the Annex).

Graph IV - 8: SDR, mental disorder and disease of the nervous system and the sense organ, 0-64 per 100000, 2002 or latest available



Source: WHO, Regional Office for Europe, March 2004; <http://hfadb.who.dk/>
 Poland = 2001 for male and female; Slovakia = 2001 for male and female; EU 15 average = 2000 for male and female

Graph IV - 9: SDR, suicide and selfinflicted injury, 0-64 per 100000, 2002 or latest available



Source: WHO, Regional Office for Europe, March 2004; <http://hfadb.who.dk/>
 Poland = 2001 for male and female; Slovakia = 2001 for male and female; EU 15 average = 2000 for male and female

2.3. Infectious diseases

Infectious diseases are no longer major causes of premature mortality in any of the countries. Mortality from infectious diseases including tuberculosis declines as living standards improve. However there has been an increase in tuberculosis and parasitic diseases in some of the countries of East and Central Europe, which is post 1991 related.

The male and female SDR 0 – 64 from tuberculosis is much higher in most of the New Member States and Candidate countries than in the EU 15. The exceptions are the Czech Republic and Malta for men and the Czech Republic and Slovenia for women. Especially high levels of male and female premature mortality from tuberculosis are found in the Baltic States and in Romania (Graph AIV-10). Men are much more likely to die from tuberculosis than women. This is the case especially in those countries with high rates of infection - Latvia, Lithuania, Romania and Estonia.

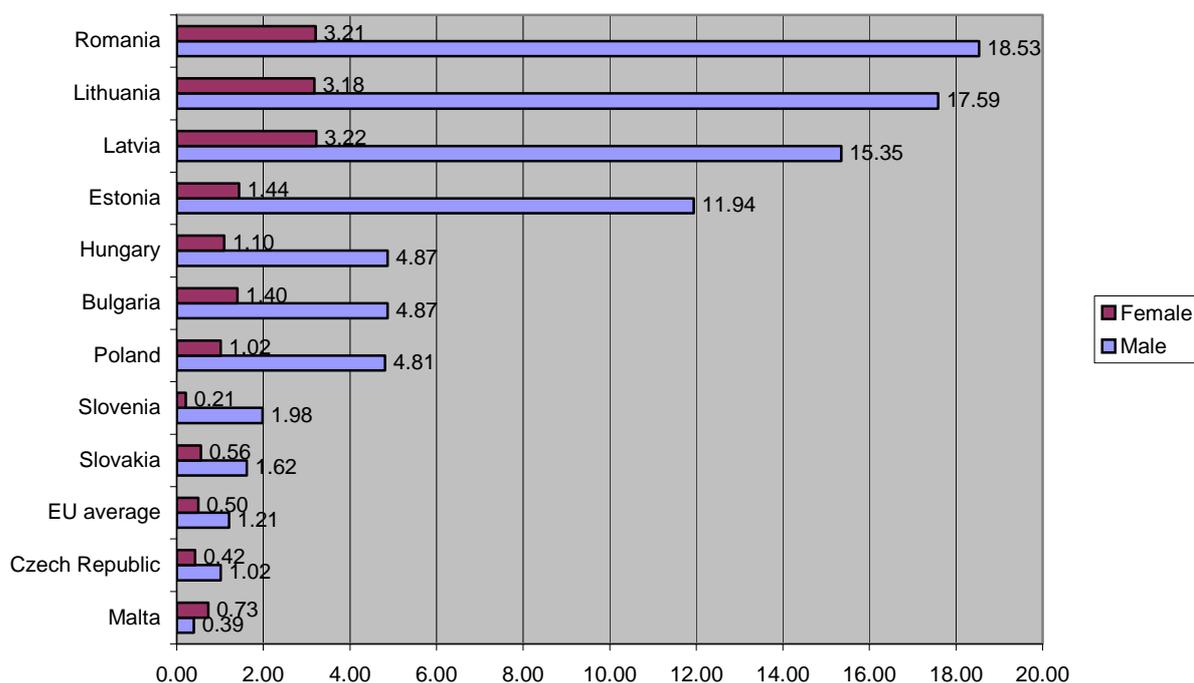
Male premature mortality from tuberculosis decreased in the EU 15 and in the most of the CEE region between 1990 and 2002 and for women the rate declined in EU 15 and in all the CEE countries.. (Graph AIV-57 and Graph AIV-58 in the Annex).

In Romania there was a very high increase in premature mortality from tuberculosis occurred between 1985 and 1995. but there was a decrease between 1995 and 2000 for men and a marginal increase for women. In Bulgaria the male premature mortality rate increased from 1985 to 1995 and then decreased. The female rate increased from the from 1991 to 1995 and then decreased gradually (Graph AIV-59 and Graph AIV-60 in the Annex).

In Estonia there was a significant increase in premature mortality from tuberculosis post 1990 for men and for women. After 1995 there was a significant decrease in the male rate and a slower decline in the female rate (Graph AIV-61 and Graph AIV-62 in the Annex).

We can conclude that as in the EU 15 men are more likely to die prematurely than women. Also men are more likely to die prematurely in the New Member States and candidate countries of Central and Eastern Europe and Turkey than are women in the EU 15, Malta and Cyprus. The premature gender mortality gap is higher in the countries of Eastern and Central Europe than in the EU 15, Malta and Cyprus. The main causes of premature mortality are diseases of the circulatory system, cancers and external causes. Improving living conditions, health promotion and improving screening and treatment regimes would all contribute to reducing premature mortality for men and women. Specifically female premature mortality could be reduced by improving health promotion, screening and treatment regimes for breast and cervical cancer.

Graph IV - 10: SDR, tuberculosis, per 100000



Source: WHO, Regional Office for Europe, March 2004; <http://hfadb.who.dk/>

Poland = 2001 for male and female; Slovakia = 2001 for male and female; EU 15 average = 2000 for male and female

3. Satisfaction with health and the social situation of women

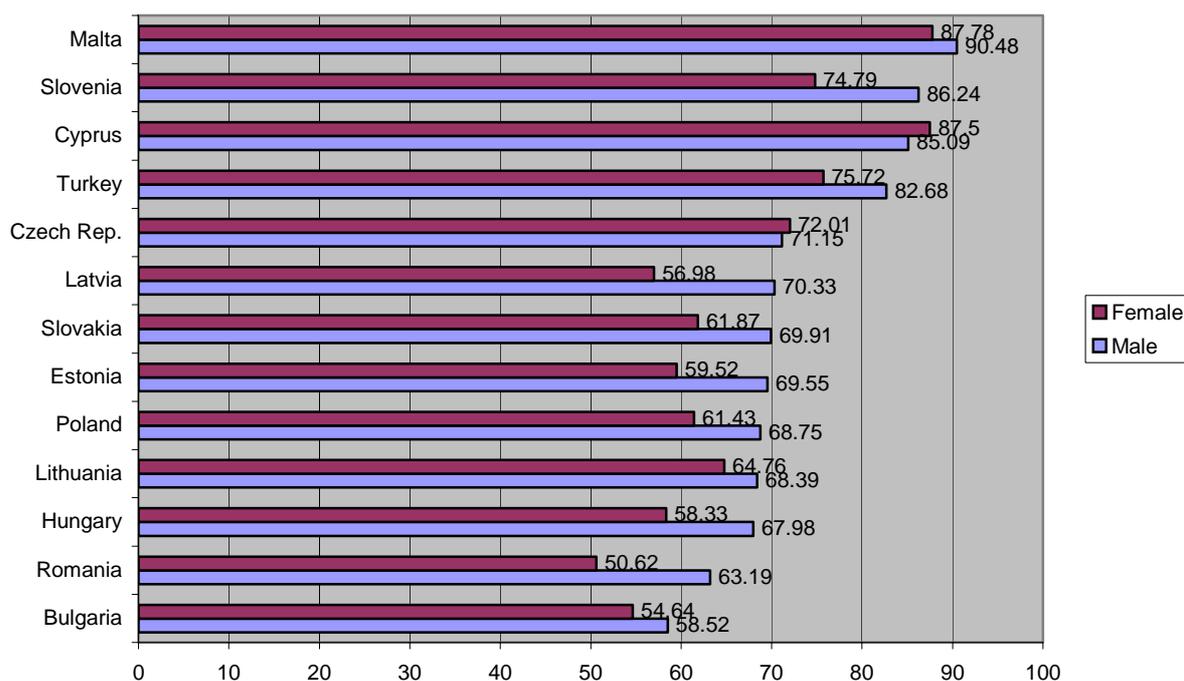
We have demonstrated from an analysis of selected premature mortality statistics that men and women are at greater risk of dying prematurely in the New Member States and Candidate Countries of Eastern and Central Europe and Turkey than in the EU 15, Cyprus and Malta. However, in order to understand the health experience of citizens, it is also important to consider morbidity and general well-being. A common method for considering health experience is to use the response to questions on self-rated health asked in surveys. This has been shown to be a good indicator of respondents' state of health. In this section, we examine responses to the health question on the Candidate Countries Eurobarometer 2000.

In health research, women generally report poorer health and less satisfaction with their health than men, and we find that this is the case for the New Member States and the Candidate Countries. In all the countries except Cyprus and the Czech Republic, men are more likely to report being satisfied with their health than women. However, there are significant differences between the countries and in the size of the gender gap. The highest levels of male satisfaction with health are reported in Malta (90.48%), Slovenia (86.2%), Cyprus (85%) and Turkey (82.68%), and the lowest levels in Bulgaria (58.52%), Romania (63.19%), Hungary (67.39%) and Lithuania (68.75%). Women report the highest levels of satisfaction with health in the same countries as men – Malta (87.78%), Slovenia

(74.78%, Cyprus (87.5%) and Turkey (76.72%) and least satisfaction in three of the countries where men reported the lowest levels of satisfaction – Bulgaria (54.64%), Romania (50.62%) and Hungary (58.33%). Low levels of satisfaction with health were also reported by women in Latvia (56.98%). The largest gender gaps in satisfaction with health are found

in Latvia where 15.5 percent more men than women report satisfaction with health and Romania where 13.8 percent more men report satisfaction with health than women. The lowest difference are found in the Czech Republic where just under one percent more women than men report satisfaction with health, Cyprus where 2.66 percent more women report satisfaction with health than men and Malta where 2.86% more of men report satisfaction with health than women (Graph IV-11).

Graph IV - 11: Sat. - Your own health - Satisfied (very and fairly), * Sex of respondent * Country code Crosstabulation, % within Sex of respondent

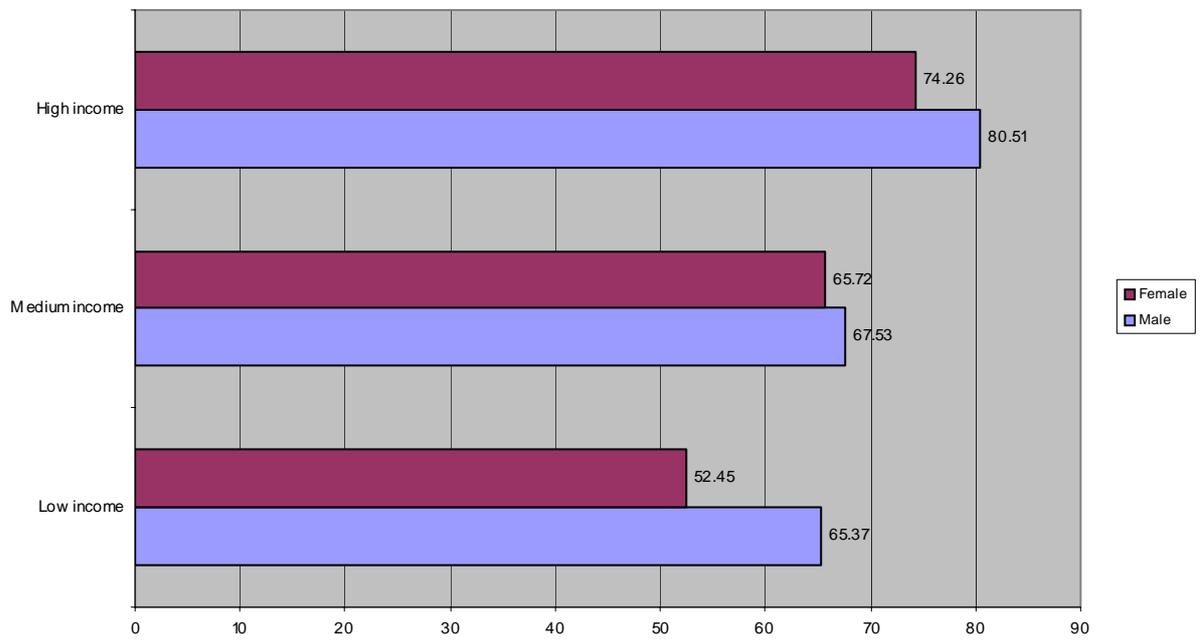


Source: CCEB, May 2002

Age is an important demographic characteristic influencing the health status – health tends to get poorer as people get older. . With ageing satisfaction with health decreases in the New Member States and Candidate countries as a whole both for men and women. Dissatisfaction with health increases more with age for women than for men (Graph IV-13; Table AIV-4 in the Annex).

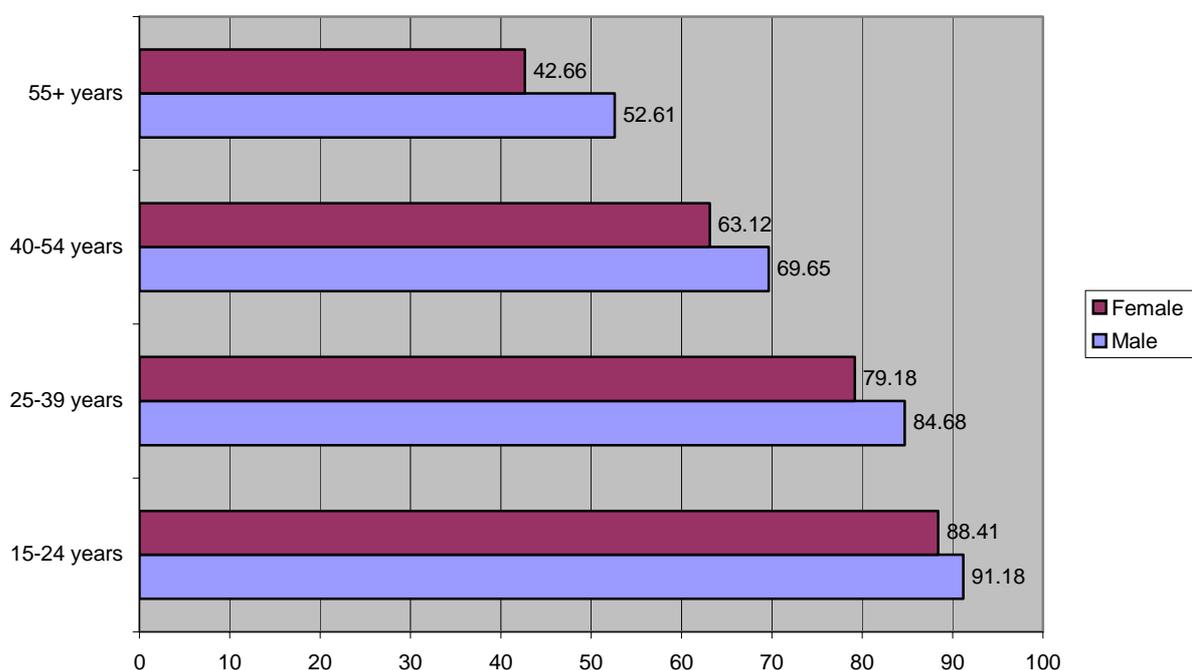
Material circumstances correlate highly with health and research has consistently demonstrated a health gradient – with health status improving as material circumstances increase. Reported satisfaction with health varied according to household income in the New Member States and Candidate Countries as a whole. Men and women in high income households reported the highest levels of satisfaction with health and those in low income households reported the least satisfaction. The difference between men and women were largest in low income households and lowest in middle income households (Graph IV-12; Table AIV-3 in the Annex).

Graph IV - 12: Sat. - Your own health - Satisfied (very and fairly), * Sex of respondent * Household Income Groups (Q29 REC:), Crosstabulation, % within Sex of respondent



Source: CCEB, May 2002

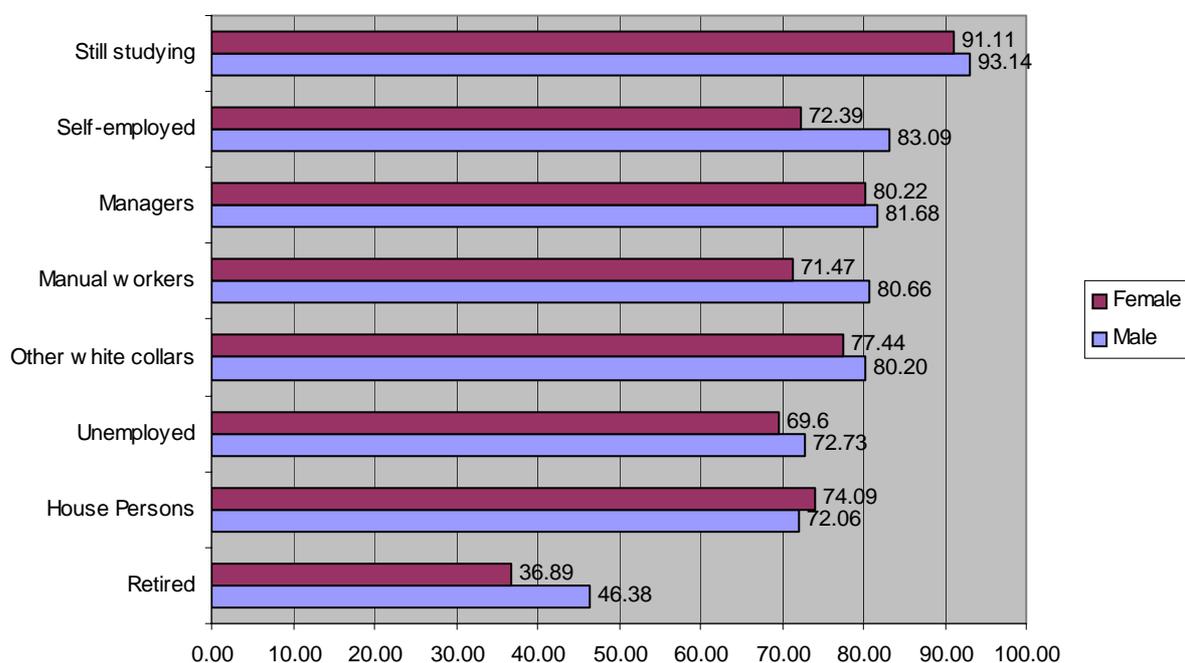
Graph IV - 13: Sat. - Your own health - Satisfied (very and fairly), * Sex of respondent * Age, Crosstabulation, % within Sex of respondent



Source: CCEB, May 2002

The satisfaction with their own health is different for men and for women also varies by occupational status. The highest levels of satisfaction are reported by men who are managers, self-employed or still studying. The lowest satisfaction is reported by men who are retired, house persons or unemployed. For women the highest levels of satisfaction with health are reported by women who are managers, other non-manual or are still studying. Women reporting the lowest levels of satisfaction are the retired, unemployed and manual workers. Men and women in higher level occupations report higher satisfaction with their health. High reported levels of satisfaction with health by those still in education is not surprising, nor is the narrow difference between men and women as they are mainly young people. The low levels of satisfaction with health reported by the retired and the larger gender gap is because the retired are generally older people and satisfaction with health declines with age and gender differences increase (Graph IV-14; Table AIV-5 in the Annex).

Graph IV - 14: Sat. - Your own health - Satisfied (very and fairly), * Sex of respondent * Occupation, Crosstabulation, % within Sex of respondent



Source: CCEB, May 2002

4. Conclusions

In this section we have analysed the health situation in the New Member States and Candidate countries in terms of mortality data as well as subjective satisfaction with health. We have shown that male life expectancy is lower for men than women in all the new Member States and Candidate Countries but that on the whole women are less satisfied with their health than men. Women's health as measured by mortality data and reported satisfaction is poorer in the New Member States and Candidate Countries of Eastern and Central Europe and Turkey than in the EU 15, Cyprus and Malta and the same is the case for men. The health patterns in the New Member States and Candidate Countries of Eastern and Central Europe and Turkey have a number of implications for women. Women in these countries are more likely to suffer from debilitating chronic health problems and to have to provide informal health care for members of their households than women in the EU 15, Malta and Cyprus. They are also more likely to die prematurely from preventable / treatable female health problems such as breast cancer and cervical cancer. Women in all the countries are likely to live longer than their male partners and have to cope, often in poverty on their own in old age but the years a women can expect to outlive her partner varies and is longest in the Baltic Countries.

CHAPTER V: WOMEN IN POLITICS IN THE NEW MEMBER STATES AND CANDIDATE COUNTRIES

1. Introduction

In this chapter we consider the participation of women in decision making, especially in terms of national governments and national Parliaments. The representation of women following the transition fell dramatically, by as much as 75% in these bodies.³³ At present, women are under-represented in decision-making bodies and in Parliaments in all countries. Often this is thought to reflect the extent of modernization and democratization of a country, although in practice there is a mixed pattern³⁴. Ronald Inglehart, in his study of World Values, identified a shift in values from “materialist” to “post materialist” or even “post modern” concerns of which gender equality was one important factor a societies became more affluent³⁵ The post-communist countries however, represent a special case because of the gender ideologies that they represent. Although women were apparently active in the dissident movements, their influence disappeared after the transition³⁶. Some have argued that in post-communist countries women might be under-represented in conventional forms of political action (political parties, parliaments etc.) they may be more active in other types of political participation such as consumer politics and green politics in local government or NGOs.³⁷

The post-communist countries are in a particular situation in this respect because the token representation of women, which was an institutionalized part of the former regimes, was abolished once the transition began. In these countries, democratization brought a dream of prosperity and a return to “normal” family life, which was for the most part one based upon conservative principles.^{38,39} Thus, growing affluence post transition has often encouraged conservative political movements with respect to gender rather than the opposite. The absence of a “bottom up” feminist movement in these countries meant that there were no alternative models to challenge the “top down” form of forced political egalitarianism. However, some have argued that this is not necessarily a disadvantage for women in the New Member States. Participating in politics was regarded as a degraded pursuit and women instead wield power in the more valued sphere of the family⁴⁰. Others have argued that

³³ Ragulska, J., 'The political' and its meaning for women: transition politics in Poland. Theorising Transition. J. Pickles and A. Smith. London and New York, Routledge, 1998.

³⁴ Inglehart, R. and P. Norris, Rising Tide: Gender Equality and Cultural Change around the World. Cambridge, Cambridge University Press, 2003.

³⁵ Inglehart, R., Culture Shift in Advanced Industrial Society. New Jersey, Princeton University Press, 1990.
Inglehart, R., Modernization and Postmodernization. Cultural, Political and Economic Change in 43 Societies. Princeton, Princeton University Press, 1997.

³⁶ Brown, B., The Private Revolution. London, Hera Trust, 2003.

³⁷ Wallace, C., R. Spannring, et al. (2004, forthcoming). "Youth and Politics in Eastern and Western Europe."

³⁸ Sieminska, R., Reconciliation of family and work in Poland. Factors shaping conceptions of women's and men's roles. Reconciliation of family and work in Eastern European Countries. M. E. Domsch and D. H. Ladwig, Peter Lang, 2000.

³⁹ Sieminska, R., "Values." Current Sociology 52(3), 2004, p. 429-458.

⁴⁰ Brown, B., The Private Revolution. London, Hera Trust, 2003.

women are more likely to be active in politics at a regional level or in NGOs rather than in national politics.⁴¹

The participation of women (or lack of it) has been variously attributed to modernization, the role of the feminist movement and religion. Hence, according to Inglehart's most recent analysis, religion is one of the most important factors for understanding value patterns⁴². Such a clustering is applied in the UNESCO report on the childcare systems in the New Member States and candidate countries⁴³. According to this analysis, Protestant countries have the highest participation of women, followed by Catholic secular countries and Catholic religious countries. Orthodox and Muslim countries have the lowest levels of female participation because of their dominant gender ideologies. However, it is more difficult to classify post-communist countries where religion was suppressed for many years and has enjoyed a variable revival.

An alternative approach is to look at the different welfare and family regimes across Europe and the strength of the different women's movements in influencing policies⁴⁴. The weakness of the feminist movement in Eastern and Central Europe as well as the Mediterranean countries we are considering would lead us to expect less representation of women.

2. Comparative study on political participation of women

In this chapter we look at the numbers of women in politics at a national and European level, including those in leading positions. In general, the representation of women in New Member States and Candidate countries is lower than in the EU as a whole (Table V-1; Table V-2). The dominant religion does not seem to explain much variation in the women's share in national government positions, but does seem to explain more in terms of representation in national parliaments with Protestant countries having the most, followed by Catholic and then Orthodox and Muslim countries.

⁴¹ Sieminska, R., Reconciliation of family and work in Poland. Factors shaping conceptions of women's and men's roles. Reconciliation of family and work in Eastern European Countries. M. E. Domsch and D. H. Ladwig, Peter Lang, 2000.

⁴² Inglehart, R. and P. Norris, Rising Tide: Gender Equality and Cultural Change around the World. Cambridge, Cambridge University Press, 2003.

⁴³ Tine Rostgaard, "Family Support Policy in Central and Eastern Europe – A Decade and a Half of Transition", Early Childhood and Family Policy Series, No 8, Unesco Education Sector, 2004, p. 7.

⁴⁴ Sieminska, R., "Values." Current Sociology 52(3), 2004, p. 429-458.

Table V - 1: Percentage of women in national government positions

Religion	Country	Women's share in national government positions (%)
	EU av (nat + reg)	23
Catholic religious	Poland	21
Predominately Christian Orthodox	Romania	20
Catholic secularized	Slovenia	20
Predominately Christian Orthodox	Bulgaria	19
Predominately Protestant	Estonia	13
Catholic religious	Slovakia	10
Catholic religious	Lithuania	8
Catholic	Malta	7
Catholic secularized	Hungary	6
Predominately Protestant	Latvia	5
Muslim	Turkey	5
Predominately Christian Orthodox,	Cyprus	0
Catholic secularized	Czech Republic	0

Source: "Women in Politics in the Council of Europe Member States" Council of Europe 2001, cited from http://europa.eu.int/comm/employment_social/equ_opp/statistics/governmentcc.pdf

Table V - 2: Percentage of women in national parliaments

Religion	Country	Women's share in national parliaments (%)
	EU average	20,5
Predominately Protestant	Estonia	18
Predominately Protestant	Latvia	17
Catholic religious	Slovakia	14
Catholic secularized	Czech Republic	13,5
Catholic secularized	Slovenia	13
Catholic religious	Poland	12
Predominately Christian Orthodox	Bulgaria	11
Catholic religious	Lithuania	11
Catholic	Malta	9
Predominately Christian Orthodox	Romania	9
Catholic secularized	Hungary	8,5
Predominately Christian Orthodox, Moslem	Cyprus	7
Moslem	Turkey	4

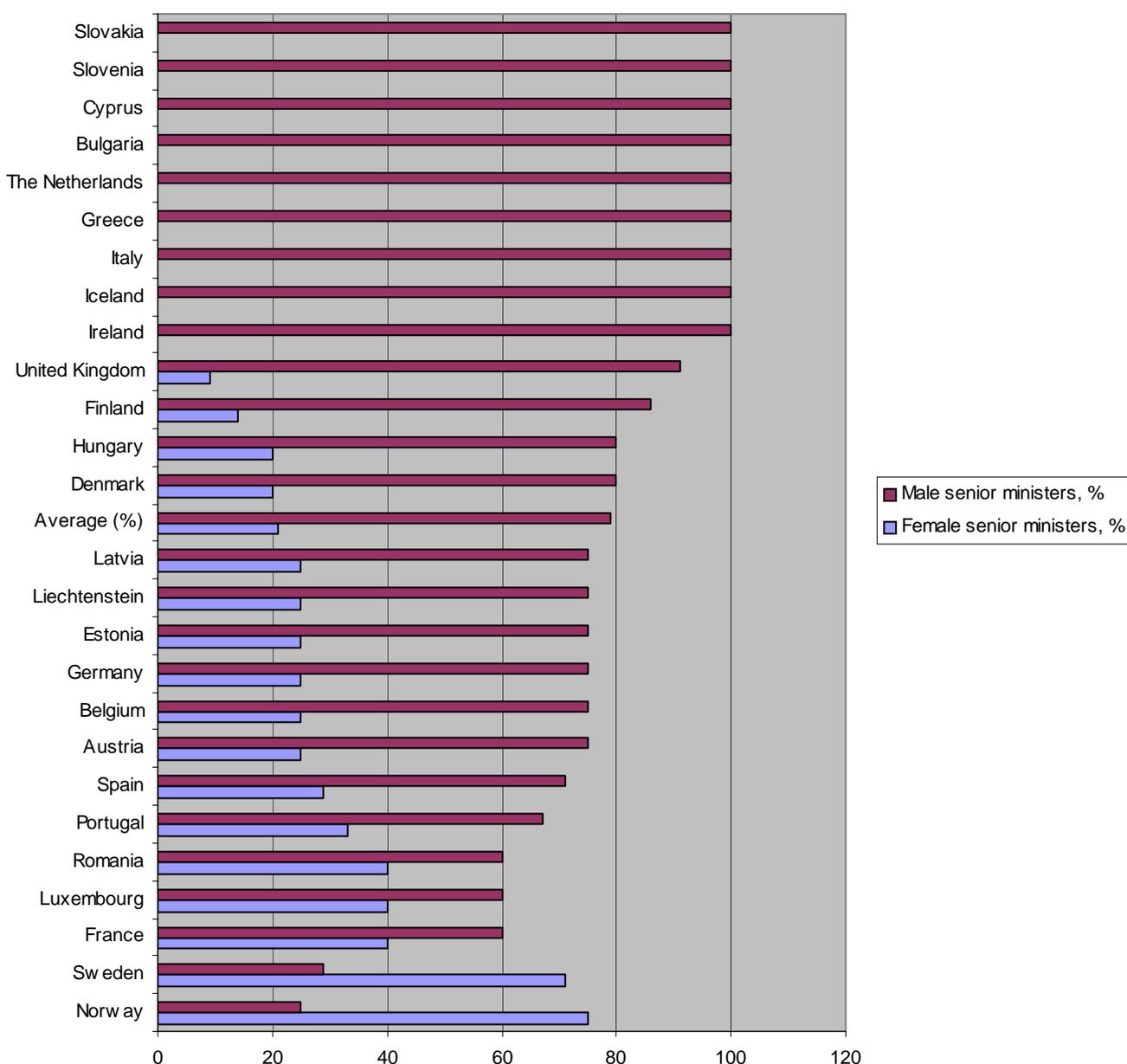
Source: "Women in Politics in the Council of Europe Member States" Council of Europe 2001, cited from http://europa.eu.int/comm/employment_social/equ_opp/statistics/governmentcc.pdf

We can also look at the political position of women in terms of the different functions occupied by women in the national government positions in the national parliaments. Here we compare the New Member States with old EU countries. In terms of basic functions, we find that on average, women make up only 21% of senior ministers. However, their numbers are very high in Norway and Sweden, where their numbers overtake that of men. In France, Luxembourg and Romania, their numbers are also relatively high at around 40%. In Latvia, Liechtenstein, Estonia, Germany, Belgium, Austria, Spain and Portugal, they represent below 40% but above 20% of all senior positions. In Denmark, Finland, Hungary and the United Kingdom, their proportion is below the average, whilst in the remaining countries, many of them CEE countries, there are no women in senior positions. Hence, neither the religious

clustering nor the level of modernisation really explains this pattern, although the strength of the women's movement might have some influence.

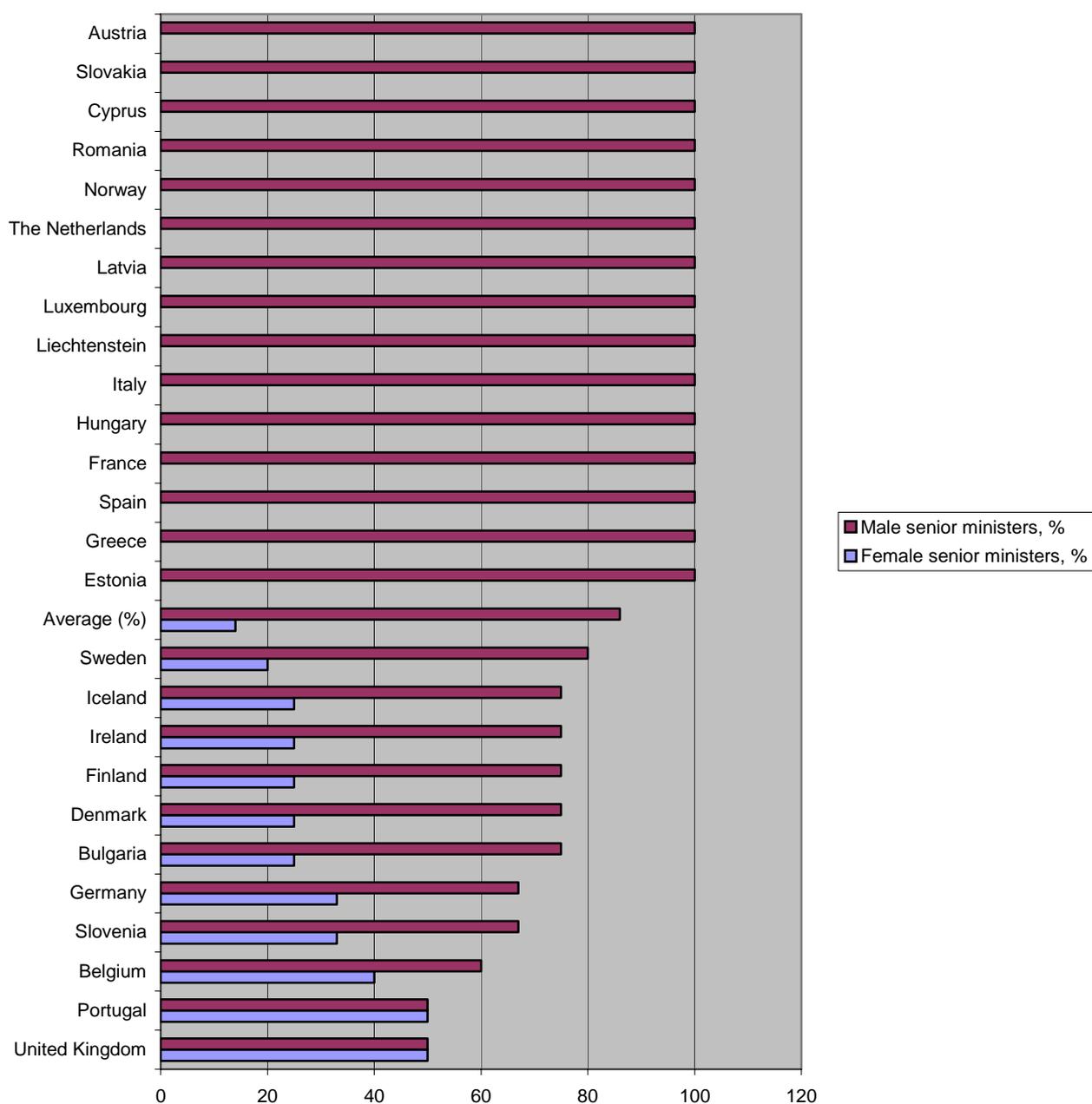
If we turn now to representation in different fields of decision making, we find that there are even fewer as senior ministers in national decision making on the economy (Graph V-2). Here we find about equal representation in the UK and Portugal, whilst the Nordic countries along with Germany, Bulgaria and Slovenia are in the group with between 40% and 20%. In most countries, including nearly all the New Member States, there are no female senior ministers in the field of economy. However, women are more present in the fields of infrastructure and socio-cultural functions with around 25% on average (Tables: AIV-1 to Table AIV-6 in the Annex).

Graph V - 1: Database - political domain, Decision-making in the national government, Basic functions



Source: http://europa.eu.int/comm/employment_social/women_men_stats/out/measures_out4171_en.htm
Data as of 24.03.2004

Graph V - 2: Database - political domain, Decision-making in the national government, Economy



Source: http://europa.eu.int/comm/employment_social/women_men_stats/out/measures_out4172_en.htm
 Data as of 24.03.2004

3. Country overview

In the following section we consider each country in turn in terms of the representation of women and local and national level and programmes to improve women's participation. There is not always data for local level participation and information in general is very uneven as we see the countries' overviews below⁴⁵.

3.1. Bulgaria - Women in government

There are 3 women ministers out of a total of 16, which represents 19%.

Percentage of women in elected positions

There are 63 women deputies out of a total of 240 Members of Parliament (26%) (11% in 2000). No woman has yet held the office of President of Parliament, but several have held the post of Vice-President. At local level, 8% of mayors of municipal communities are women and 15% of mayors of small-inhabited districts. A total of 20% of municipal councillors are women.

Measures to increase women's participation in political life

The practice of quotas in Parliament and the bodies of local self-government was in force until 1990 but was abolished after that time. However, the promotion of equal access of women to decision-making positions is among the priorities of the National Plan for Action elaborated and adopted after the 4th World Conference on Women.

3.2. Cyprus - Women in government

There are no women ministers out of a total of 11.

Percentage of women in elected positions

Parliamentary elections 2001

There are 6 women members of the National Parliament out of a total of 56 (11%), compared to 3 women in the previous elections in 1996. No woman has yet held the office of President of Parliament.

Local elections 2001

At the local level there are 79 women municipal councillors out of a total of 398 (20%) compared to 65 women out of 384 (17%) in the previous local elections in 1996. There is one woman mayor out of a total of 33 (3%), compared to 4 in 1996.

Measures to increase women's participation in political and public life

a) by Government/National Machinery for Women's Rights

Besides the various specialised training programmes to encourage women to become more involved in politics which took place since 1998, the National Machinery for Women's Rights (NMWR), in view of the May 2001 Parliamentary elections, launched a public campaign to support women candidates. The campaign included:

- Strong political statements by the Minister of Justice and Public Order, (President of the NMWR), during various public events to support women's elections.

⁴⁵ The Council of Europe, Directorate General of Human Rights, Women in politics in the Council of Europe Member States, Information document, EG (2002) 06, Strasbourg, May 2002, Source: [http://www.coe.int/T/E/Human%5FRights/Equality/03%2E%5FWomen%5Fand%5Fdecision%2Dmaking/098_EG\(2002\)06.asp#P136_3778](http://www.coe.int/T/E/Human%5FRights/Equality/03%2E%5FWomen%5Fand%5Fdecision%2Dmaking/098_EG(2002)06.asp#P136_3778).

- Contacts with the Leaders of political parties requesting their full and practical support to increase the number of women in the candidate lists and also for their election.
- Contacts with mass media to give equal opportunities to women candidates during the pre-election period.
- Posters and advertisements with the slogan "Give Voice and Power to Women".
- A broad circulation of a booklet presenting all women candidates (their CVs and political aspirations).
- Organisation of a special event under the auspices of the Minister of Justice and Public Order to honour all women candidates in the presence of mass media representatives, during the course of which a special film was shown.
- Preparation and wide distribution of the lists with names, addresses and other details on all candidates aiming to facilitate contacts and networking.
- Collaboration with the radio station of pan Cyprian coverage (Radio Athina) through a daily programme "Women in Political Life", where all women candidates had an opportunity to present themselves to the public.

The fact that all political parties have increased the number of women candidates, which reached 86 (compared to 32 in 1991 and 55 in 1996), as well as the fact that the 27th of May 2001 elections resulted in 100% increase (from 3 to 6) in Women MPs elected, have justified the efforts of the National Machinery of Women's Rights.

b) by political parties

Two of the major political parties have introduced a quota system in order to promote the participation of women in parties' decision-making bodies and candidate lists. More specifically, in the 1999 Statutes of the Democratic Rally Party, the following provision was introduced:

"In all collective bodies of the Party that are elected by a single vote, women participate in numbers proportionate to the number of women members of the party, both on regional and national level, provided that this number is not less than 20% of the total number of the members of the respective body.

The minimum participation percentage also applies to the participation of women candidates on all party ballot papers for local, regional and national elections, provided there are interested candidates. The Council of the Party will revise the minimum representation percentage from time to time, to reach 30% by 2005."

A similar provision exists in the Statutes of the Social Democrats Movement, where the quota system of a minimum participation rate of 25% for women, in all its decision-making bodies, has been introduced.

3.3. Czech Republic - Women in government

There is no woman minister out of a total of 19.

Percentage of women in elected positions

There are 30 women Members of Parliament out of a total of 200 (15%) and 10 women Members of Senate out of a total of 81 (12%). No woman has yet held the office of President of Parliament. The President of Senate is at present a woman, and the Vice-Presidency of the House of Representatives is held by a woman.

3.4. Estonia - Women in government

There are 2 women ministers, out of a total of 15, which represents 13%.

Percentage of women in elected positions

There are 18 women members of the State Assembly out of a total of 101 (18%). No woman has yet held the office of President of Parliament, but one of the Vice-Presidents is a woman.

3.5. Hungary - Women in government

There is one women minister (Minister of Justice) out of 16 posts (6%). In addition, the following women state secretaries are in office: 4 Political State Secretaries, 2 State Secretaries and 9 Deputy State Secretaries.

Percentage of women in elected positions

Parliament

There are 33 women representatives in the National Assembly out of a total of 386, which represents 8.5%. Voters' increasing confidence in women MPs is shown by the fact that in the 1990 elections hardly one-fifth (18.5%), in 1994 one-third (34.9%), in 1998 already more than one-third (37.5%) of the MPs got into Parliament from constituencies, that is not through party lists or national lists.

There is one woman Vice-President of Parliament. No woman has yet held the office of President of Parliament.

Women's representation in parliamentary committees is 7.3%, i.e. lower than the percentage of women members of Parliament. They chair one and are vice-chair of four of 22 committees. Six of 63 sub-committees are presided by women, which is slightly higher than average (9,5%).

Local government

Women's participation increased between 1990 and 1998 both among candidates and elected members of the councils of representatives. In smaller communities, women's representation in local governments is higher than in large cities. Women are mayors of 3 of the 23 districts of the capital (13%). In the cities with a population of over 10,000, 5.1% of mayors are women, while in the communities under 10,000 this rate is higher: 12.8% on average. Women's participation among members of the capital and county assemblies is 9.1%, though the dispersion is considerable - between 2.5 and 17.5%.

3.6. Latvia - Women in government

There is one woman minister out of a total of 19 (5%).

Percentage of women in elected positions

There are 17 women Members of Parliament out of a total of 100 (17%). In 1997, this figure was 9% (9 women). No woman has yet held the office of President of Parliament.

3.7. Lithuania - women in government

There are 3 women ministers (Social Security and Labour, Finance, Culture) out of a total of 13, which represents 23%. Two of the Prime Minister's advisers out of 8 are women (25%).

Percentage of women in elected positions

There are 15 women Members of Parliament (Seimas) out of a total of 141 (11%) since the elections of 2000. This figure was 18% in 1999. No women at present head any of the 14 Seimas Committees, and there are 6 women out of 14 chairpersons on the Seimas Commissions (43%).

21.4% of women were elected at the local elections of 19 March 2000. There are 3 women mayors of municipalities out of total 60 (5%). There is one women county governor out of total 10 (10%).

Measures to increase women's participation in political life

In order to promote women's participation in politics, a two-year project "More women in politics", supported by SIDA, started in March 2002. This project was initiated during the Reykjavik follow-up conference "WoMen and democracy" held in Vilnius on 15-17 June 2001.

3.8. Malta - women in government

Following the elections of September 1998, there is one woman minister out of a total of 14, which represents 7%.

Percentage of women in elected positions

There are 6 women parliamentarians in the House of Representatives out of a total of 65 (9%). Before the 1998 elections, there were 4 women parliamentarians. One woman held the office of President of Parliament between October 1996 and August 1998. One woman held the office of President of the Republic from 1982 to 1987.

Since 1999, a women parliamentarian has been chairing the Committee on Social Policy, whilst another has been chairing the Committee on Foreign Affairs. Both structures are Standing Committees of the House of Representatives.

Following local council elections in March 2002, there are 87 women councillors out of a total of 431 (20.2%). As a result of these elections, 2 women were elected mayors (8.7%) and 6 were elected deputy mayors (26.1%). Thus overall, there are 5 women mayors (7.6%) and 15 women deputy mayors (22.7%) on Malta's local councils.

Measures to increase women's participation in political life

In order to increase the number of women in political life, central Government organises:

- media campaigns to raise awareness among the electorate regarding the need for a balanced gender representation and to encourage more women to stand for local and national elections
- training courses for women candidates.

The Malta Labour Party has adopted:

a quota system in favour of women in the number of delegates participating in the General Conference: 1999: 25% quota; 2000: 30% quota; 2001: 35% quota; 2002: 40% quota;

a quota system in favour of women in the number of members on the National Executive of the Party - 20% of official and ordinary members appointed annually by the General Conference is in force.

Within the Nationalist Party:

- at local committee level, women occupy 30% of the seats and 19% female counsellors represent the Nationalist Party in local councils;
- female membership as a proportion of total party membership stands at 47%;
- the autonomous Women's Movement with the party, MNPN, that was set up in 1975 and is open to all female members of the party and is represented at all party levels, has the objective to help women achieve their rights democratically in every sphere of society, and to encourage women to take a more active part in public life.

3.9. Poland - women in government

There are 15 women ministers out of a total of 70, which represents 21%.

Percentage of women in elected positions

93 women are represented in the Sejm (Parliament), out of a total of 460 (20%). There are 23 women Senators out of a total of 100 (23%). In 2000, these figures were 13% and 11% respectively. Since 1997, a woman has occupied the function of President of the Senate.

At local level, there are 6.846 women councillors out of a total of 51.919, which represents 13% and 132 women mayors/president of towns and heads of communities (gmina) out of 2.465, which represents 5%.

Measures to increase women's participation in political life

The major political parties recognise the necessity of greater participation of women in political life, however there are no specific measures used by them in this respect.

3.10. Romania - women in government

There are 5 women among the 25 ministers (20%); out of 100 deputies having the rank of secretary of state there are 7 women (7%). There were no women ministers in 2000.

Percentage of women in elected positions

There are 10 women Senators out of a total of 140 (7%) and 40 Members of Parliament out of a total of 345 (12%). In 1999, these figures were 1% and 7% respectively. No woman has yet held either the office as President of the Senate or of the Parliament.

At the level of local administration, 101 women mayors were elected out of a total of 2,954 (3%).

Measures to increase women's participation in political life

Special measures that have been adopted by the political parties to promote the access of women to decision-making levels in political life are little known. But the political will of the parties that won the necessary percentage to be represented in Parliament is obvious: 22% of PDSR parliamentarians are women, 11% of PRM, 4% of PD, 3% of UDMR and 2% of PNL (the same rank as the parties who won seats in the two chambers).

3.11. Slovakia - women in government

Of the 20 members in the government there is one women minister and one Vice Prime Minister, which represents 10%.

Women department heads at the government ministries make up 35%, section heads 28%, chairs of regional state administration 0%, chairs of district state administration 11%, and heads of social affairs departments 66%.

Percentage of women in elected positions

Following the last elections in 1998, there are 20 women Members of Parliament out of a total of 150, which represents 13.3%. In the preparatory process to these elections, only 274 women candidates out of the national total of 1,618 (17%) found their names on their respective political party tickets. The number of female members of political parties in Parliament range between 25% (Slovak National Party - the only party with a women chair) to 56% (Christian Democrat Party).

At local level, there are 484 women mayors (17%) out of a total of 2,867 (14% in 1998). There are 6 women mayors in cities and towns (4%) and 478 women mayors in smaller communities (17.5%).

Measures to increase women's participation in political life

The next parliamentary and local elections will be held in 2002. As there are only two political parties that have special measures to support women's access to political functions (the Party of Social Democratic Left and Movement for Democratic Slovakia - 25% quota system for women in political structures), the chair of CCWI met chairs of important Slovak political parties to discuss the promotion of women in politics, the increase of women candidates in candidate lists of political parties - not only the number, but the order as well.

In March 2001 the Slovak Government approved a document "Concept of equal opportunities for women and men" which includes a measure "To support the modification of the law on political parties and the electoral law by increasing the number of women in politics and political parties, for instance by using quota systems or other short-term measures." The Ministry of the Interior, in co-operation with both parts of the Slovak National Machinery (Co-ordination Committee on Women's Issues and Department for Equal Opportunities) prepared in January 2002 the draft of new electoral law, which proposes: "The list of candidates has to be prepared by respective political parties or coalitions in such a way that every third candidate has to be of the opposite sex to the two preceding candidates". Financial penalties are proposed if this regulation is not followed. This proposal is not yet on the agenda of the Government and Parliament and has not yet been agreed. There are lively discussions on the proposal and many political parties are not willing to agree with it.

In 2000, the NGO network "Women's Forum 2000" (more than 50 NGOs, supported by the Co-ordinating Committee on Women's Issues) was created and is becoming more and more active with the forthcoming elections in 2002. A Platform of VIP personalities was created that supports the increasing number of women entering the politics. It also supports the new proposal to modify the electoral law (see above).

At regional level, "regional platforms" are under preparation to support women who decide to enter active politics. They will also work with the women's electorate, to be more active and forward-looking.

3.12. Slovenia - women in government

There are 3 women ministers out of a total of 15 ministers (20%).

Percentage of women in elected positions

There are 12 women Members of the National Assembly out of a total of 90 (elections in November 2000), which represents 13%. This figure was 8% in 1999. One woman holds the office of Vice-President of Parliament.

At local level, there are 8 women mayors out of a total of 192 (4%). There are 302 local councillors out of a total of 2,484 (12%) (last local elections in 1998).

Measures to increase women's participation in political life

A 10-year history of struggle for increased participation of women in political decision-making in Slovenia is a history of defeat. All activities and initiatives in the National Assembly to increase women's participation have been rejected. In view of this fact, a Coalition for balanced participation of women and men in public decision-making was founded in February 2001. The main aim of the Coalition is to introduce legally binding measures to get more women into decision-making.

3.13. Turkey - women in government

There are 2 women ministers out of a total of 39, which represents 5%.

Percentage of women in elected positions

There are 23 women Members of Parliament out of a total of 550 (4%). In 1995, this figure was 2% (13 women out of 450). No woman has yet held the office of President of Parliament. There are 33 women members of Provincial Councils out of a total of 3,122 (0.96%). The number of women mayors is 12 out of a total of 3,215 (0.37%).

Measures to increase women's participation in political life

In 1989, one political party introduced a system whereby in the provincial and district councils and top-level administrative organs of the party, a minimum of 25% representation of either men or women would be guaranteed. Another party adopted a 10% quota system in 1996. Yet another party is currently implementing a 20% quota system.

4. Conclusions

The representation of women in national politics in the New Member States and Candidate Countries is generally lower than in the EU 15 countries and has fallen dramatically since the transition. However, in many countries it appears to be increasing over the 1990s and 2000s, although small numbers and limited time horizons make it difficult to draw firm conclusions. Various explanations have been put forward, including religion, levels of modernisation and the strength of the women's movement, which is generally weak in the countries we are considering. None of these seem to be very adequate for explaining the representation of women in senior political positions, although they are better in explaining the representation of women in parliament in general. Women are especially under-represented in senior decision making on the economy, but are better represented in basic government functions, infrastructure and socio-cultural fields. Considering the situation country-by-country we find that women are no more likely to be active in local level politics than in national level politics, although there are some exceptions (Malta, Hungary, Slovenia). In many countries the promotion of women's representation is being addressed and although a quota system is seen as the solution in Malta and in Cyprus, this is not proposed in CEE countries because of the associations with the past.

CHAPTER VI: GENDER ROLES IN THE NEW MEMBER STATES AND CANDIDATE COUNTRIES

1. Introduction

In this chapter we consider the attitudes to gender roles, since these attitudinal questions can give us an idea of the underlying values and culture with respect to women in Enlargement countries. The observation of the gender roles in selected EU Member States representative for the different welfare regimes, in the new Member States and Candidate countries is based on the information from the World Value Survey.

The World Value Survey (WVS)⁴⁶ is a worldwide investigation of sociocultural and political change. It has carried out representative national surveys of the basic values and beliefs of publics in more than 65 societies on all six inhabited continents, containing almost 80 percent of the world's population. It builds on the European Values Surveys, first carried out in 1981. A second wave of surveys, designed for global use, was completed in 1990-1991, a third wave was carried out in 1995-1996 and a fourth wave took place in 1999-2001. This investigation has produced evidence of gradual but pervasive changes in what people want out of life, and the basic direction of these changes is, to some extent, predictable.

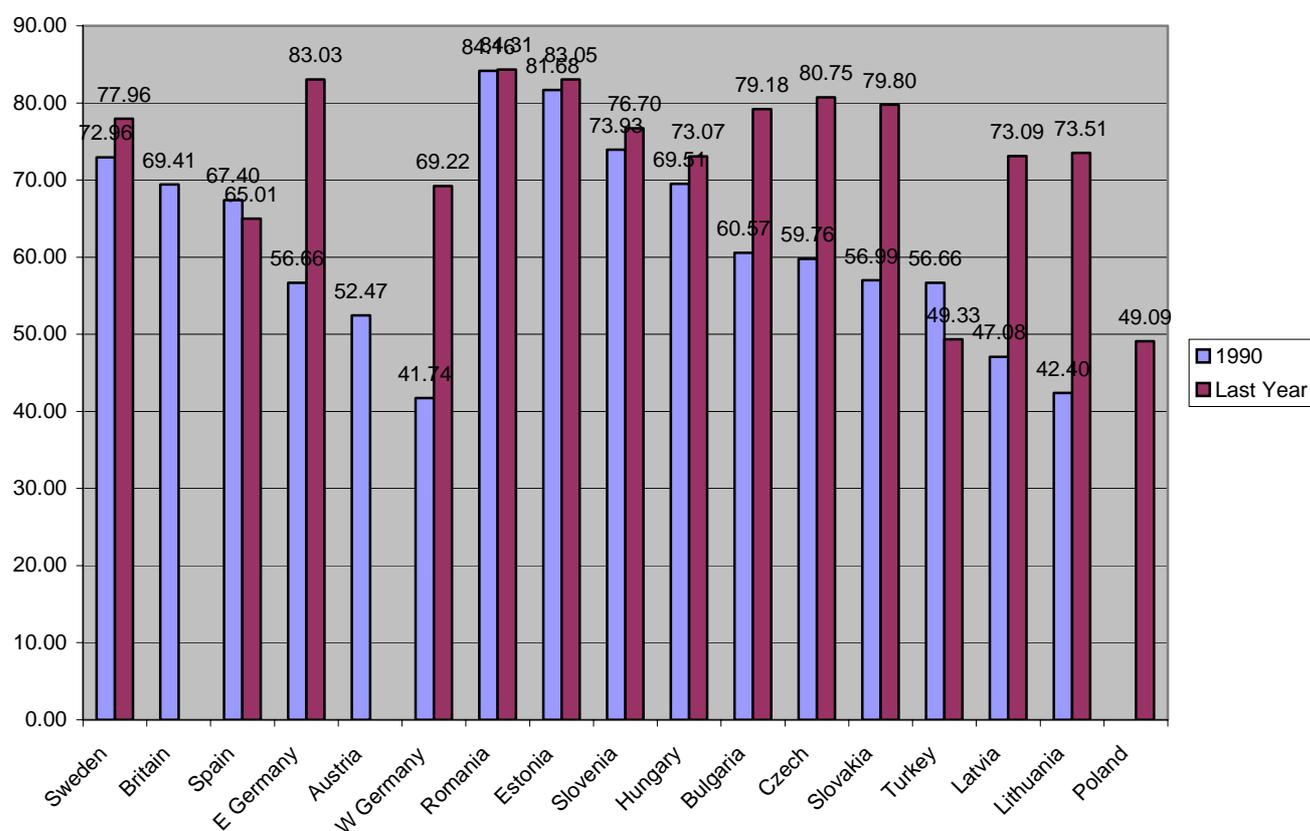
The representative national sample is of at least 1,000 people in the observed societies. We begin by looking at family roles and then turn to gender roles more generally. We have taken some western countries as sources of comparison: Sweden, because it represents the Nordic group of countries; the UK which represents the Anglo group of countries, Spain as representative of the Southern group of countries and Austria/Germany as representative of continental European countries. Germany is divided according to East and West.

2. Family Roles

We begin with the question of whether working mothers are as good at mothering as non-working mothers. For this question we can compare 1990 with the more recent period (1995-2001). We can see that most of the CEE countries think that this is the case with more than 80% answering positively in Romania, Estonia, the Czech Republic and Eastern Germany. In Poland, Latvia, Slovakia, Hungary and Slovenia, more than 70% of people agree. The only Western European country with such high scores is Sweden, where there has been a tradition of dual earner households strongly supported by the state. In Turkey there is rather less support for this idea, but Turkey represents a quite different family system to CEE countries. Rather surprisingly, Poland has a very low number of people (49%) who agree with this question. In this respect Poland more resembles Austria or Western Germany 15 years ago (Graph VI-1).

Turning now to changes over time, we find that in most countries the support for working mothers has grown. West Germany shows a particularly dramatic trend, but so does Latvia and Lithuania where the numbers rose from less than half supporting working mothers to about three quarters. However, in Bulgaria, Czech Republic, Eastern Germany and Slovakia there was also a rather steep increase in the numbers of people in support of working mothers. Hence, there is a trend towards accepting the role of working mothers and seeing their mothering as just as good as non-working mothers in both Eastern and Western Europe.

⁴⁶ <http://wvs.isr.umich.edu/>

Graph VI - 1: Working mother can establish just as warm and secure a relationship with her children as a mother who does not work – strongly agree and agree, Country, Crosstable, % within nation and wave

Source: WVS, second wave – 1990; third wave – 1995-1997

Case Processing Summary

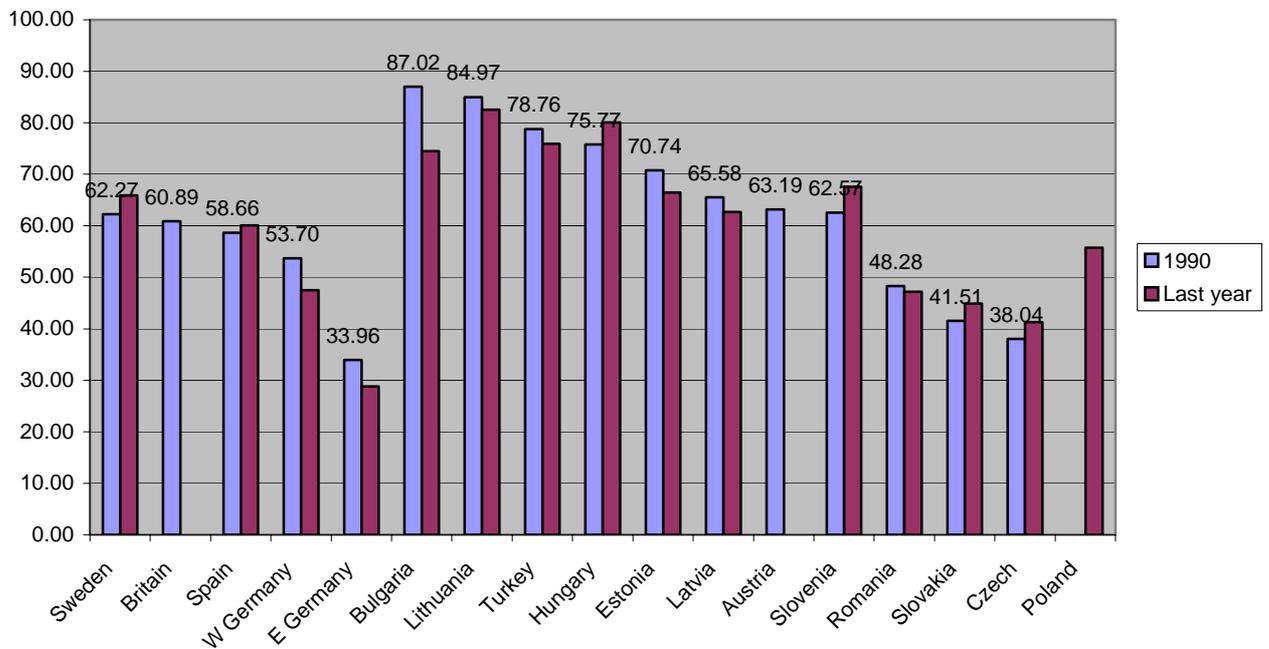
Valid cases		Missing cases		Total cases	
N	Percent	N	Percent	N	Percent
129272	74.1%	45117	25.9%	174389	100.0%

Note: First year is 1990 – second wave; the last year, i.e. the third wave is presented for the different countries in the table below:

	Last Year
W Germany	1997
Spain	1996
Sweden	1996
Hungary	1996
Poland	1996
Czech	1996
E Germany	1997
Slovenia	1995
Bulgaria	1998
Romania	1996
Turkey	1996
Lithuania	1996
Latvia	1996
Estonia	1996
Slovakia	1996

The next question we looked at is whether being a housewife is as fulfilling a job as paid work. Here we find that most of the Eastern European countries agree more than the Western European countries (although women were not usually full time housewives in those countries, so perhaps this is just an aspiration). In Hungary, Lithuania, Bulgaria and Estonia, more than 70% of people agreed with this question. Turkey also had rather high levels of agreement, but this is based on a traditional family system. Agreement to this question was low in Eastern Germany, the Czech Republic, Slovakia and Romania. Other Western European countries were in between. There was not much differences between the two time points for this question: in some countries the tendency to agree had fallen slightly and in others it had risen (Graph VI-2).

Graph VI - 2: Being a housewife is just as fulfilling as working for pay – strongly agree and agree, nation and wave, % within the nation and wave



Source: WVS, second wave – 1990; third wave – 1995-1997

Case Processing Summary

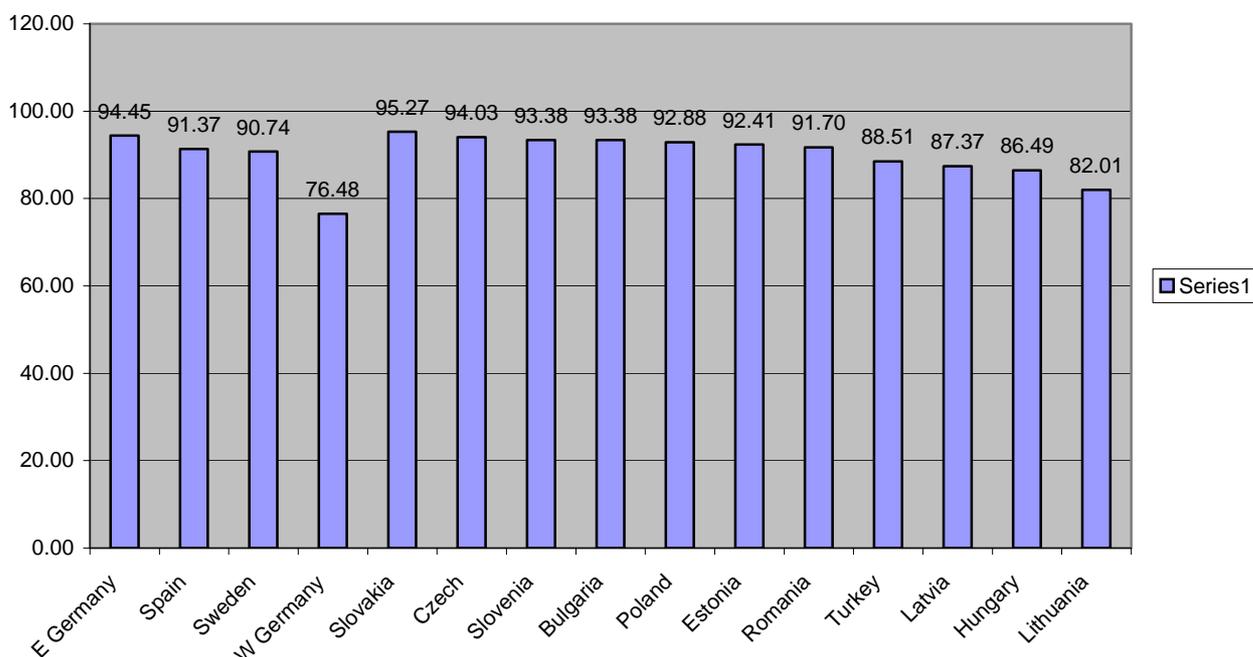
Valid cases		Missing cases		Total cases	
N	Percent	N	Percent	N	Percent
124344	71.3%	50045	28.7%	174389	100.0%

Note: First year is 1990 – second wave; the last year, i.e. the third wave is presented for the different countries in the table below:

	Last year
W Germany	1997
Spain	1996
Hungary	1996
Sweden	1996
Poland	1996
Czech	1996
E Germany	1997
Slovenia	1995
Bulgaria	1998
Romania	1996
Turkey	1996
Lithuania	1996
Latvia	1996
Estonia	1996
Slovakia	1996

Turning now to our next question, that both the husband and wife should contribute to household income, we find very high levels of agreement in all countries. Only in Western Germany did one quarter of the respondents not agree with this question. In Western Germany there was a tradition of a “male breadwinner” family (Graph VI-3).

Graph VI - 3: Both the husband and the wife should contribute to household income, nation and wave crosstable, % within the nation and wave crosstable



Source: WVS, third wave – 1995-1997

Case Processing Summary

Valid cases		Missing cases		Total cases	
N	Percent	N	Percent	N	Percent
76841	44.1%	97548	55.9%	174389	100.0%

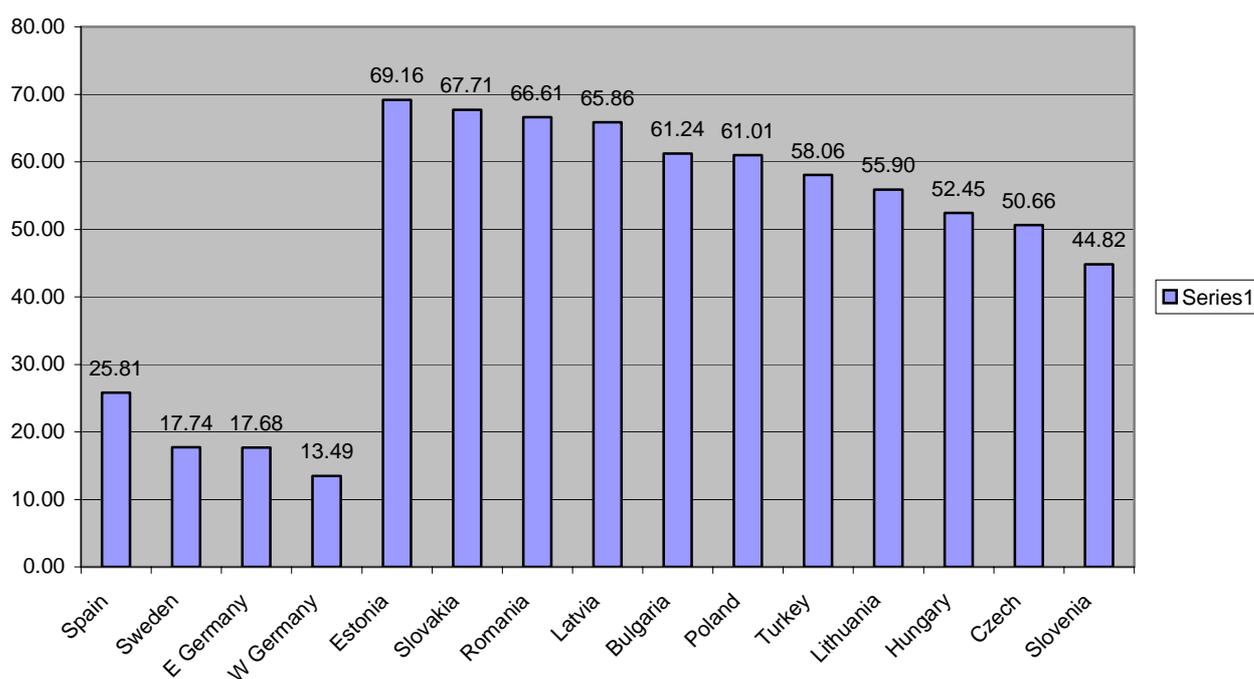
Note: the year used, i.e. the third wave is presented for the different countries in the table below:

W Germany	1997
Spain	1996
Hungary	1996
Sweden	1996
Poland	1996
Czech	1996
E Germany	1997
Slovenia	1995
Bulgaria	1998
Romania	1996
Turkey	1996
Lithuania	1996
Latvia	1996
Estonia	1996
Slovakia	1996

3. Gender Equality

We have already observed the low participation of women in politics in CEE countries. Despite decades of gender egalitarian politics, the majority of respondents in CEE countries thought that men made better political leaders than women. The numbers were overwhelmingly higher than any Western European country, even the rather conservative Western Germany. The more modernised and advanced CEE countries of Slovenia, Czech Republic and Hungary were the least likely to agree with this statement (Graph VI-4).

Graph VI - 4: On the whole, men make better political leaders than women do, Nation and wave, % within Nation and wave



Source: WVS, third wave – 1995-1997

Case Processing Summary

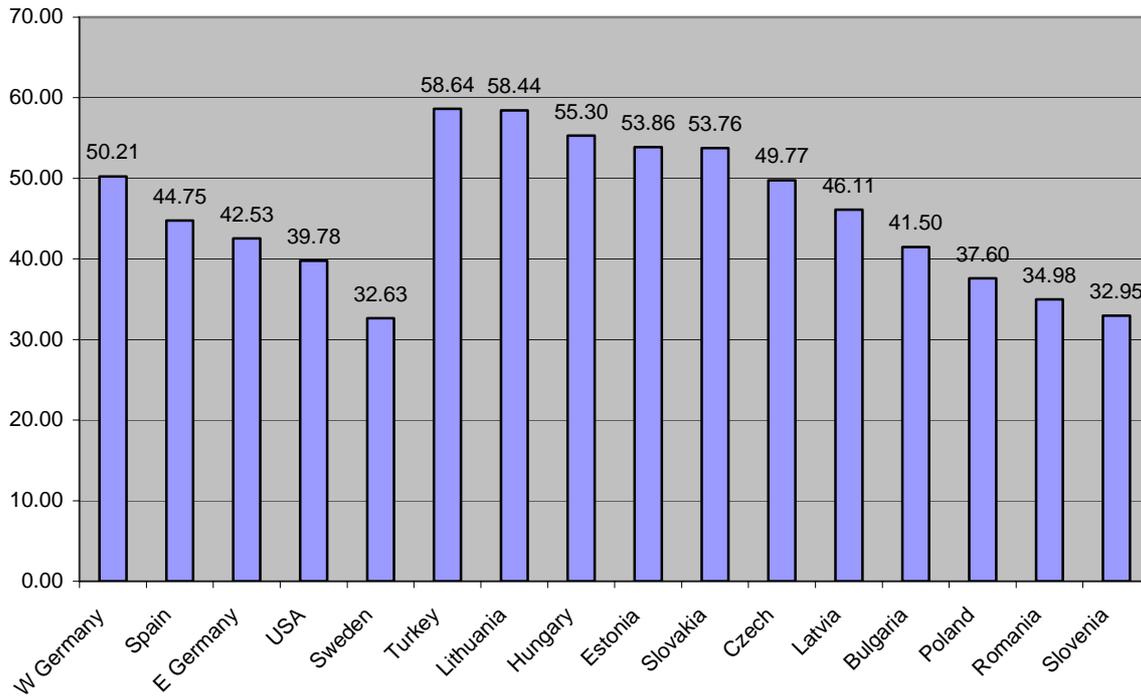
Valid cases		Missing cases		Total cases	
N	Percent	N	Percent	N	Percent
71573	41.0%	102816	59.0%	174389	100.0%

Note: the year used, i.e. the third wave is presented for the different countries in the table below:

	Year
W Germany	1997
Spain	1996
Hungary	1996
Sweden	1996
Poland	1996
Czech	1996
E Germany	1997
Slovenia	1995
Bulgaria	1998
Romania	1996
Turkey	1996
Lithuania	1996
Latvia	1996
Estonia	1996
Slovakia	1996

Despite the tradition of dual earner families in ECE countries, we find that many still think that men should earn more than women in the family. The highest score was in Turkey, but there were also high numbers in Lithuania, Hungary, Estonia, Slovakia and the Czech Republic. The most gender egalitarian countries in this respect were Slovenia and Sweden, both notable for their strong support of policies supporting dual earner families (Graph VI-5).

Graph VI - 5: If a women earns more money than her husband, it's almost certain to cause problems



Source: WVS, third wave – 1995-1997

Case Processing Summary

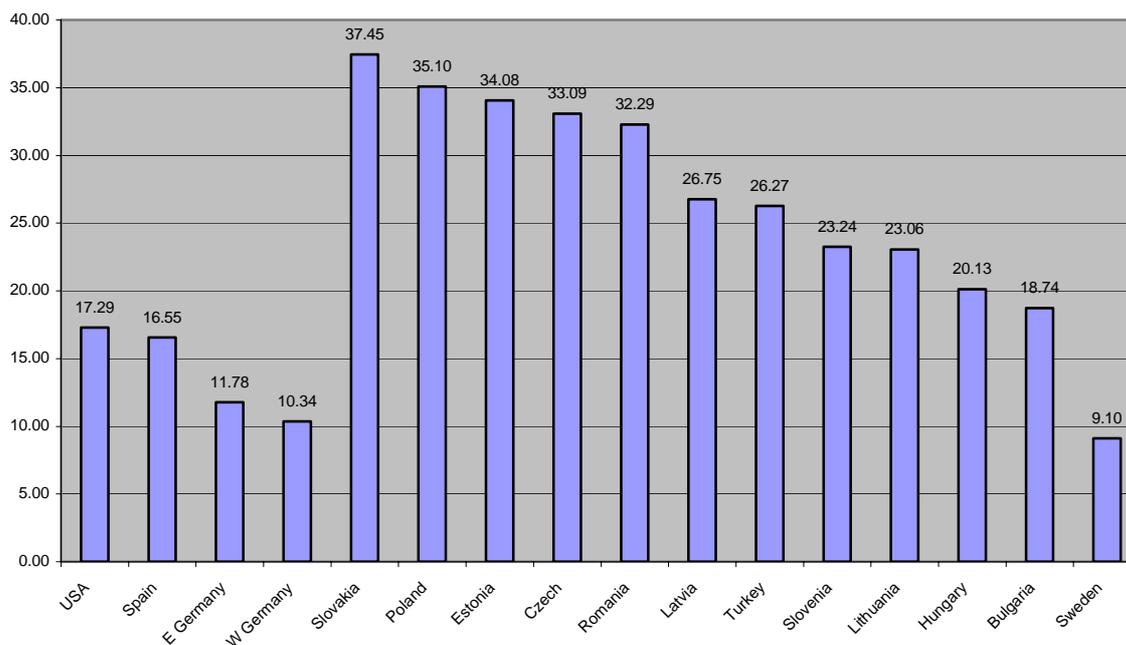
Valid cases		Missing cases		Total cases	
N	Percent	N	Percent	N	Percent
73416	42.1%	100973	57.9%	174389	100.0%

Note: the year used, i.e. the third wave is presented for the different countries in the table below:

W Germany	1997
Spain	1996
Hungary	1996
Sweden 96	1996
Poland 96	1996
Czech 96	1996
E Germany 97	1997
Slovenia 95	1995
Bulgaria 98	1998
Romania 96	1996
Turkey 96	1996
Lithuania 96	1996
Latvia 96	1996
Estonia 96	1996
Slovakia 96	1996

The last question that we took as indicative of attitudes towards gender, was whether a University education was more important for a boy or a girl. On the whole, most people in all countries did not agree with this question. However, all the ECE countries (apart from Eastern Germany) were more likely to agree than the Western countries. Especially anti-egalitarian attitudes could be found in Slovakia, Poland, Estonia, the Czech Republic and Romania. This may reflect that a University education will cost the parents financial outlays and boys are more likely to earn more later (Graph VI-6).

Graph VI - 6: A university education is more important for a boy than for a girl



Source: WVS, third wave – 1995-1997

Case Processing Summary

Valid cases		Missing cases		Total cases	
N	Percent	N	Percent	N	Percent
75138	43.1%	99251	56.9%	174389	100.0%

Note: the year used, i.e. the third wave is presented for the different countries in the table below:

W Germany	1997
Spain	1996
Hungary	1996
Sweden	1996
Poland	1996
Czech	1996
E Germany	1997
Slovenia	1995
Bulgaria	1998
Romania	1996
Turkey	1996
Lithuania	1996
Latvia	1996
Estonia	1996
Slovakia	1996

4. Conclusions

The evidence suggests that people in CEE countries are more conservative and anti-egalitarian in their attitudes to gender roles than those in Western Europe. In Annex we have included some multi-variate analysis to try to explain this phenomenon. This is goes against the experience of decades of egalitarian labour market and education policies and quota systems of political representation to ensure the participation of women. Intellectuals in Central and Eastern Europe are not strongly concerned about this situation, seeing it instead as sign that women can more easily choose their roles and there has been a rise of political parties and political rhetoric expressing a “masuclinist” ethic. The gender role attitudes may reflect unreconstructed values that have persisted from an earlier time or they may represent a reaction to the forced gender egalitarianism of the previous epoch. They point to an underlying value system that was at odds with the dominant communist ideology, but also more “old fashioned” than that prevailing in Western Europe. However, those questions which tapped the attitudes to working mothers and spouses found more sympathy in CEE countries, where there was a tradition of dual earner families. The support for working mothers however, seems to have grown over the last ten years quite substantially in both Eastern and Western Europe.

CHAPTER VII: SOCIAL SECURITY SYSTEM AND WOMEN

1. Introduction

The link between social protection and gender has been analysed for some years in the EU 15 countries⁴⁷. Women and men are unequally situated with regard to social protection in countries where the social policy is geared to a “male breadwinner” model – that is, where it is assumed that there is a male head of household who will pay welfare contributions to cover his all the members of his household. Women are further excluded from direct access to many benefits on account of their interrupted work careers, if they have children, or on account of the fact that they receive lower incomes, work part time etc. They are less likely to get access to health and pensions schemes on account of their lower positions in the labour market. However, the dominant model of the “male breadwinner” is in decline in the EU 15 countries, and its demise is hastened by European social policies encouraging the labour force participation of women. It is generally assumed to be replaced by an “adult worker model” where every worker is treated differently with respect to welfare, in their own right. This still disadvantages women on account of their interrupted labour market careers, lower rewards, part time status etc., but not so much as the “male breadwinner model”. It is also more realistic given the growing diversity in family forms.

In Central and Eastern Europe, the former Communist regimes spent a relatively high proportion of their GDP on welfare which was provided on an “adult worker” model. Men and women had access to welfare based upon their participation in the labour market and indeed many welfare services were provided through enterprises themselves, including crèches and kindergartens. Maternity leave was paid as much as 100% of former wages and could extend for long periods. Thus, women and families were rather well protected, but this was partly a compensation for the universally low wages they received.

In the post-communist welfare system, the “adult worker” principle has been maintained and the citizens of Eastern and Central Europe still have high expectations of the welfare state⁴⁸. However, enterprises have cut their welfare functions in the context of rationalisation and the state has difficulties to maintain high levels of welfare in the face of fiscal crisis. Many services for families and children have been devolved to local authorities, although they often do not have the funds or the experience to implement programmes. Reforms at first favoured the Anglo-Saxon minimalist/liberal welfare state approach with social policies being means tested and targeted to those most in need.

This was partly the consequence of advice, loans and subsidies provided by the World Bank, IMF etc. which reflected the “Washington Consensus” in the early 1990s⁴⁹. However, this

⁴⁷ Lewis, J., "Gender and the development of welfare regimes." *Journal of European Social Policy* 2(3), 1992, p. 159-173.

Orloff, A. S., "Gender and the social rights of citizenship: the comparative analysis of gender relations and welfare states." *American Sociological Review* 58, 1993, p. 303-328.

Sainsbury, D., Ed., *Gendering Welfare States*. London, Thousand Oaks, New Delhi, Sage, 1994.

⁴⁸ Ferge, Z., "Social Values and the Evolution of Regime Change." *Innovation* 9(3), 1996, p. 261-277.

Vecernik, J., "Markets and People. The Czech Reform Experience in a Comparative Perspective", Aldershot, Brookfield USA, Hong Kong, Singapore, Sydney, Avebury, 1996.

⁴⁹ Standing, G., "Social protection in Central and Eastern Europe: a tale of slipping anchors and torn safety nets. *Welfare States in Transition. National Adaptations to Global Economics*". G. Esping-Andersen. London, Thousand Oaks, New Delhi, Sage, 1996.

Daecon, B., "Eastern European welfare states. The impact of the politics of globalisation." *Journal of European Social Policy* 10, 2000, p. 146-161.

often provoked electoral reactions with new socialist-type post-communist governments being elected who favoured different approaches, or putting the brakes on these neo-liberal initiatives. New reforms in health, disability and employment from the mid-1990s onwards tended to reflect more the evolution towards the Bismarckian model of social insurance divided between different funds, along with some aspects of universal welfare provision (as in the Nordic countries), especially with respect to family benefits, whereas World Bank advice was more likely to be followed with respect to pension reforms and the introduction of “three pillar” systems. Therefore what we tend to find is a mixture of various welfare models, but a generally high commitment to the welfare state, with different tendencies in different countries.

In order to understand the progress of these reforms we need to identify distinct clusters of countries. The “Mediterranean” countries (Malta, Cyprus and to some extent Turkey) reflect more the Southern European welfare model of sub-institutional coverage and strong family orientation. However, Malta and Cyprus were also strongly influenced by the British welfare state⁵⁰.

Secondly, there are the Central European countries – Czech Republic, Hungary, Slovakia, Slovenia and Poland – where the welfare state has remained universal in its coverage in principle with strong tendencies towards social insurance on the grounds that this reflected the traditions of those countries prior to the communist take over. The third group is represented by the Baltic States where the problems of welfare reform were exacerbated by substantial economic and political transition problems and difficulties in extricating themselves from the Soviet model in which they were much more deeply embedded. The final group of countries is represented by Romania and Bulgaria. These two countries have had substantial economic transition problems, culminating in Bulgaria in the formation of a Monetary Board in 1998. In these two countries, unemployment is very high (though hidden in Romania by the return to subsistence style agriculture) and much of the population fall out of coverage of the welfare system. They are neither covered by social insurance (which has yet to be fully implemented) nor by social assistance, which is administered by local authorities with few funds. The result has been widespread poverty, begging, and emigration. These could be said to reflect more the pattern of the “Southern welfare states” in Western Europe.

A number of the countries under consideration have either advantaged or disadvantaged minorities. An example of the former is the Hungarian minority in Romania which was able to benefit from the “Status Law” introduced recently that gave them access to the Hungarian welfare system. The situation of the Russian minorities in the Baltic states is still problematical. An example of this is the substantial Roma population living in some countries where at least some of them have traditions of large families, casual employment and live in extreme poverty. These minorities pose challenges for the social protection reforms and for women within these reforms.

The social protection system in New Member States and Candidate Countries has been little researched until now, still less the gender implications⁵¹. The gender inequality in different social spheres, especially those in the labour market affects the position of women in social protection, i.e. in pension and health insurance. Generally, women are more often excluded

⁵⁰ Gesellschaft für Versicherungswissenschaft und Gestalt e.V (GVG), “Study on the social protection systems in the 13 CC, Conclusion and outlook”, 2003, p. 233, 235, http://europa.eu.int/comm/employment_social/news/2003/jan/report_05_en.pdf.

⁵¹ Pascall, G. and N. Manning, "Gender and social policy: comparing welfare states in Central and Eastern Europe and the former Soviet Union." *Journal of European Social Policy* 10(3), 2000, p. 240-266.

from these schemes than men, because of lower positions, or insufficient years of service, or part time work. On the other hand the social protection measures (i.e. survivors pensions, personable age, pension credits for persons with caring responsibilities, sex-differentiated annuity rates, parental leave and benefits and childcare services, child benefit) could be used to promote gender equality⁵². At the same time the problems of gender equality in social security vary from region to region or from country to country. Within the context of enlarged European Union and the future integration of the Candidate countries the reform of their social protection systems represent key issue of the European social policy development, especially given the fear of “social dumping” or firms seeking out the states with the lowest social costs. The reforming process of social protection systems began with transition of the New Member and Candidate Countries to market economy along with the huge changes in the socio-economic conditions, as well as the contemporary negative demographic trends in these countries. The experimentation in social protection has lead to many changes in the different schemes, but generally there has been a tendency to cut back benefits and to make them more targeted. Since benefits are often based upon a fund, in some countries people can get no benefits once the fund dries up. A research and policy question is if a common social protection model in the new EU Member States and Candidate countries could be identified and how it influences the European Social policy⁵³. A key aspect are the gender dimensions of social security reform in the New Member States and Candidate Countries⁵⁴. The situation of women in the EU new Member States and Candidate countries is closely related to the social protection systems reforms, especially in regard to the ability to reconcile work and family life. In this respect the character and the reforms of social protection system and their repercussions on the women and family.

For the purpose of analyzing the general framework of the social protection systems in the studied countries the welfare regimes typology could be applied. In applying the gender perspective, we partially follow the framework set out by Pascall and Manning (2001), who consider the role of women as workers, as parents and as citizens. It is our argument that underlying the apparent equality embodied in the “adult worker model” are various forms of inequality that relate to women’s role.

2. General characteristics and trends of the social protection systems

In the new Member States and Candidate countries a lower the EU 15 share of social expenditure in GDP as one indicator of the role and extent of the welfare state is observed. The lower overall level of social expenditures is basically caused by a comparatively low share of spending on health care, whereas the spending on pensions is quite comparable to those of the EU 15 (Table VII-1)⁵⁵. Social protection expenditures in EU member states in 1998 amounted on average to 27,7%, an average which covers countries with low shares such as Ireland (16,1 %) and shares of about 30 per cent (such as Germany, France and Denmark (statistical pocket yearbook of the German Federal Ministry of Labour and Social Affairs (2001) - data from Eurostat)⁵⁶.

⁵² International Labour Organisation (ILO), “Social Security: issues, challenges and prospects”, p. 71-73.

⁵³ Gesellschaft für Versicherungswissenschaft und Gestalt e.V (GVG), “Study on the social protection systems in the 13 CC, Conclusion and outlook”, 2003, p. 233,

http://europa.eu.int/comm/employment_social/news/2003/jan/report_05_en.pdf.

⁵⁴ Fultz E., Ruck M. at. all ed. “The Gender Dimensions of Social Security Reform in the Czech Republic, Hungary and Poland”, International Labour Organisation, Subregional Office for Central and Eastern Europe Budapest, 2003, www.ilo.org/publns.

⁵⁵ GVG “Conclusion and outlook”, 2003, Op.cit., p. 234.

⁵⁶ GVG Synthesis report, 2002, Op.cit., p.23.

Table VII - 1: Social expenditures as percentage of GDP (Important note: this table is still a ‘working’ table - Definition of social expenditures varies across countries)⁵⁷

	1996	1998	2000
BG (1)	12.10	14.90	17.90
CY (2)	11.90	12.80	-
CZ (3)	17.40	18.10	19.50
EE (4)	-	14.74	15.20
HU (5)	24.80	24.20	23.20
LV (6)	17.50	17.60	17.80
LT (7)	14.20	15.80	15.80
MT (8)	19.30	19.60	19.80
PL (9)	25.50	23.90	24.00
SK (10)	23.28	21.88	21.70
SL (11)	25.50	26.10	-
RO (12)	10.60	13.80	13.90
TR (13)	-	10.41	11.59

1) Country report – health care, pensions, social benefits, other social expenditures, source fiscal budget figures; 2) Country report – education, public and private health care, pensions; 3) Country report – pensions including private social expenditure on pension funds, sickness cash benefits, social support and social care, health care, employment policy: source of data on the total social expenditure is the Ministry of Labour and Social Security and for the GDP Ministry of Finance (Predikce vývoje základních makroekonomických indikátorů = Forecast of development of macroeconomic indicators); 4) State pensions, health insurance, family benefits, social assistance and social services; 5) Country report: Health Care, Pensions, Education, Other (p.10) 6) Social Insurance, social assistance, health care, employment 7) Country report, consolidated social expenditures, source department of statistics; 8) Country report: social security benefits, social welfare, health care. 9) Consolidated according to IMF approach, social insurance and health care; 10) Health Care, Education, Social security and welfare. World Bank estimates, much lower level in SOCX!; 11) Unemployment, family benefits, social assistance, pensions, sickness benefits, educational grants no health insurance; 12) source: country report – state social insurance budget; 13) OECD SOCX database, excluding education, administrative costs

The observed level of social expenditure in GDP is due to a great extent to the reforms of the social protection system in the new Member States and Candidate countries. Within the socialist regime in the Eastern and Central European the pre-transition state expropriated social security funds and provided income security principally through guaranteed employment, and cash transfers for dependent groups, such as children, old age and disabled⁵⁸. Since the start of the socio-economic transition the number of social insurance programs increased. Moreover, due to the negative demographic change (the ageing of population) and the economic crises provoking unemployment and poverty the social protection system faces new challenges. These developments are reflected in financial problems of the systems. New reforms have had to be introduced whilst the number of problems to be addressed (rising unemployment, poverty etc.) have increased. Furthermore, social policy was not seen as a priority in the reform agenda, at least in the early stages of transition so reforms are often late in arriving, contradictory and not implemented.

New social protection schemes, such as means-tested social assistance, to help households cope with the unpredicted shocks of poverty, have been implemented.

⁵⁷ Gesellschaft für Versicherungswissenschaft und Gestalt e.V (GVG), “Study on the Social Protection Systems in the 13 Applicant Countries”, Synthesis Report, Second Draft, November 2002, p. 22, http://europa.eu.int/comm/employment_social/news/2003/jan/report_01_en.pdf.

⁵⁸ Teodora Noncheva, Denitsa Satcheva, “Study on the Social Protection Systems in the 13 Applicant Countries, Bulgaria”, Country Study, January 2003, Study financed by the European Commission – Employment, and Social Affairs DG, p. 38.

In Bulgaria a means-tested social assistance has been introduced⁵⁹. In Hungary the social protection is a collection of measures to improve or protect human capital, ranging from labor market interventions, publicly mandated unemployment or old-age insurance to targeted (means-tested or group targeted) income support⁶⁰. In Latvia the inhabitants-centred approach is realised to a much lesser extent (universal family benefits, means-tested social assistance benefits)⁶¹. In Cyprus most benefits are either means-tested or paid to those who do not or cannot work or have other poverty related characteristics (widows, orphans etc.). Thus, the social protection in Cyprus helps towards reducing poverty and income inequality⁶².

The dynamics in the last years indicate a decrease in the number of insured persons in the social security system due to the unemployment and worsening age structure of population. Thus, a key aim of the new insurance legislation in Bulgaria is to enlarge the coverage of the self-employed persons and to improve compliance in contribution collection⁶³. In Czech Republic⁶⁴ the social protection is universal and complex. Social insurance is employment-centered, which include also the self-employment.

In terms of eligibility, social security and social assistance rights in Estonia are primarily residence-based. The only exception relates to the unemployment insurance scheme, where self-employed persons are excluded from the scope. The main financing source for social protection is a social tax, which is paid by employers and self-employed persons, and is earmarked to finance pension and health insurance. The direct participation of employees in the financing of social security was introduced only very recently, and the 1% unemployment insurance contribution is currently their only direct share⁶⁵.

Another current trend is the unfavorable ratio between pensioners and active contributors, and pensioners and active population. Replacement rates have been changed linking more closely the insurance contribution of the persons and their benefits in Bulgaria. This provides incentives for longer participation in the insurance system as every additional year of service has a direct influence on the amount of benefits⁶⁶. In the Czech Republic under the present budgetary constraints the scope of protection is becoming unsustainable in the mid- to long-term. Moreover, the population is quickly ageing and the income span is widening. More targeting of old age and family benefits and of solidarity transfers between generations and rich and poor families will be needed⁶⁷.

⁵⁹ Teodora Noncheva, Denitsa Satcheva, Bulgaria, 2003, Op.cit., p. 38.

⁶⁰ Róbert I. Gál, Zsolt Mogyorósy et al., “Study on the Social Protection Systems in the 13 Applicant Countries, Hungary”, Country Study, January 2003, Study financed by the European Commission – Employment and Social Affairs DG, p. 26.

⁶¹ Inara Bite, Valdis Zagorskis, “Study on the Social Protection Systems in the 13 Applicant Countries Latvia”, Country Study, January 2003, Study financed by the European Commission – Employment and Social Affairs DG, p. 37.

⁶² Prof. Panos Pashardes, “Study on the Social Protection Systems in the 13 Applicant Countries, Cyprus”, Country Study, January 2003, Study financed by the European Commission – Employment and Social Affairs DG, p. 29.

⁶³ Teodora Noncheva, Denitsa Satcheva, Bulgaria, 2003, Op.cit., p. 38

⁶⁴ Prof. Dr. Igor Tomeš at all., “Study on the Social Protection Systems in the 13 Applicant Countries Czech Republic”, Country Study, January 2003, Study financed by the European Commission – Employment and Social Affairs DG, p. 29.

⁶⁵ Lauri Leppik (Chapters 1 – 4), “Study on the Social Protection Systems, in the 13 Applicant Countries Estonia”, Country Study, January 2003, Study financed by the European Commission – Employment and Social Affairs DG, p. 39.

⁶⁶ Teodora Noncheva, Denitsa Satcheva, Bulgaria, 2003, Op.cit., p. 39.

⁶⁷ Prof. Dr. Igor Tomeš at all., Czech Republic, 2003, Op.cit., p. 29.

The new Member States and Candidate countries are in process of introducing the three-pillar pension system. For example in Romania in the field of social insurance, the main objective is to reach the three pillar system, by complementing the existing 1st Pillar – Public old age insurance, by the 2nd Pillar – Universal retirement pensions (by funding and private administration) and the 3rd Pillar – encouraging the accumulation of the personal savings for supplementary pension⁶⁸.

Furthermore, a guarantee for the sustainable development of the pension system is the involvement of private social security institutions and the redistribution of risk between mandatory pay-as you-go and supplementary fully funded systems of pension insurance. A favourable legal regulation and tax exemptions for voluntary social insurance was introduced in Bulgaria⁶⁹. In Estonia the administration of social assistance and social services relies on local municipalities, who may sub-contract the provision of services from NGOs or private bodies⁷⁰. In Cyprus a striking feature of the social protection system is the very large private/public mix in health care: whereas the overall expenditure on health represents nearly 6% of GDP, a figure close to the EU average, around 70% of this expenditure is for private health care, as opposed to around 25% in EU countries. This feature of the system, however, is likely to disappear when the new National Health Insurance Scheme recently approved by Parliament is in place in 2006⁷¹.

3. Gender dimensions of the social security policy

The reforms of social security systems in the transition economies during the 1990s affect women and men in different ways. Diverse benefits were altered and respectively the domains of social and professional life – work, unemployment, child bearing, parenthood, sickness, disability or retirement have been affected by the reforms. A study in this respect is done for the Czech Republic, Hungary and Poland⁷². This analysis could be enlarged with the similar experience of the other New Member States and Candidate Countries. A range of issues related to gender equality regarding the social security system is outlined below.

3.1. Women as workers

One of the difficulties in addressing the role of women as workers is the role of employment based versus income based family benefits. The channel through which family benefits for childcare is made available is of importance in relation to women's attachment to the labour force. In national contexts, where childcare is provided by women, making such benefits available through the work place or contingent on employment creates incentives and rewards for labour force participation. Conversely, if childcare benefits are restricted to those with low income or limited means, mothers who stay at home to care for young children may become isolated from the world of work and find their integration or subsequent reintegration into the labour market in later years more difficult⁷³.

⁶⁸ Mihai Vilnoiu, Cristina Abagiu, "Study on the Social Protection Systems in the 13 Applicant Countries, Romania", Country Study, January 2003 Study financed by the European Commission – Employment and Social, Affairs DG, p. 50.

⁶⁹ Teodora Noncheva, Denitsa Satcheva, Bulgaria, 2003, Op.cit., p. 39.

⁷⁰ Lauri Leppik (Chapters 1 – 4), Estonia, 2003, Op.cit., p. 41.

⁷¹ Prof. Panos Pashardes, Cyprus, 2003, Op.cit., p. 29.

⁷² Fultz E., Ruck M. at. all ed., 2003, Op.cit.

⁷³ Fultz E., Ruck M. at. all ed., 2003, Op.cit., p.16.

According to ILO definition, the family benefits are payment in cash or in kind to support parents in bearing and raising children. They include general allowances, paid to supplement wages according to the number of children in the family, as well as two benefits that are contingent on specific actions: giving birth (maternity benefits) and withdrawing temporary from the work force to care for a young child (child care benefits)⁷⁴.

A reform that took place in some of the New Member States and Candidate Countries after the socio-economic transition is the decoupling of family benefits from employment status. A shift to income testing of benefits occurs because of the worsening of economic condition, i.e. the increasing of inflation, unemployment, and the impoverishment of the population. Some benefits were targeting to family with low income or limited resources⁷⁵.

According to the data on family allowances of the Social Security online and the MISSOC data base in Europe (the official website of the U.S. Social Security Administration) in many of the New Member States and Candidate countries changed the laws concerning the family allowances during the period of transformation (Table 2 in the Annex). An universal system was adopted by most of the countries. The means-tested allowances and the dependence of the allowances on the income, is implemented in Poland, in Czech Republic, in Slovak Republic (concerning family allowance – child allowances), in Slovenia (with the exemption of special child-care allowance), in Lithuania (with the exemption of some small grants), in Bulgaria and in Malta⁷⁶.

The assumption mentioned above in regard to gender equality is that the employment related family benefits for childcare more reliable condition for the further integration of women in the work life than the income related family benefits. Therefore, there exists a trade-off between the preserving the population from social risk of poverty and unemployment and the policy measures ensuring the reintegration of the women in the working life after birth. However, a large number of family benefits are not income dependent and a tendency to limit the number of income dependent benefits to the necessary extent in regard to the prevention from social tensions.

3.2. Women as parents

Benefits to women as parents take a number of forms, the main ones being maternity benefits, child benefits and child raising allowances, the latter being rather distinctive in comparison with other European countries.

Maternity benefits are part of the sickness insurance and are covered by the social insurance system in the New Member States and Candidate countries. Maternity benefits are in fact rather generous in comparison with many countries in Western Europe, commensurate with the view that women are primarily workers rather than carers. In Czech Republic the type of the program is social insurance system and public health insurance system. In Lithuania dual insurance and social assistance systems for cash benefits and universal system for medical care are implemented. In Cyprus dual social insurance for cash benefits and national health

⁷⁴ ILO, introduction to Social Security, Chapter 11, Family benefit, Geneva, Switzerland, 1984.

⁷⁵ Fultz E., Ruck M. at. all ed., 2003, Op.cit., p.19.

⁷⁶ <http://www.ssa.gov>.

service for medical care are implemented⁷⁷. In Estonia the maternity benefit is financed by the health insurance budget through the Estonian Health Insurance Fund⁷⁸.

The length of maternity leave and the amount of maternity benefits differ among the countries, but not to an important extent, because of the specific nature of these benefits. For women who are students or for disabled children there are special conditions. In the different countries there are different requirements for the insured period and consequently various dependence from the employment status.

Moreover, the benefits are adapted to the needs of women in case of job change during pregnancy in some countries. In this respect the system responds to the flexibility of the labour market and facilitate the reconciliation of work life and motherhood of women.

In the Annex of the present chapter is presented a comparative observation of the maternity and child care benefits in the New Member States and Candidate countries on the basis of the GVG countries reports on the social protection system⁷⁹.

Child care benefits have had an important impact on keeping children out of poverty at least in the Central European countries (Förster and Toth 2001). Child benefits can be shown to have gone up during the 1990s and even increased in coverage in these countries (Rostgaard 2004). However, in what matters is the declining real value of the benefit, which in some cases was de-indexed.

Concern with the falling birth rates have lead to social policies with pro-natalist tendencies in Central European including the introduction of the Child Raising Allowances. Similar to controversial Austrian idea of “Kindergeld”, this provides an income for parents (usually women) who stay at home full time to care for children. The length of time is for between 2 and 8 years and is often conditional on not putting the child into a crèche or the parent not going to work. The level of benefit is linked to the minimum wage or the pension and in some countries it is means tested, but in others it is more or less universal. This has implications for women because it encourages them to leave the labour market altogether for long periods of time rather than to combine mother hood with work. Creche facilities have been consequently cut back for this period of childcare, although pre-school kindergartens are almost universally available provided by local authorities in Slovenia, Hungary and the Czech Republic at least⁸⁰. In several countries this benefit is targeted at larger families. The Table VII-2 below, (as well as Table AVI-1 in the Annex) set out the different conditions for this benefit:

⁷⁷ <http://www.ssa.gov>.

⁷⁸ http://www.vm.ee/estonia/kat_399/pea_172/4262.html.

⁷⁹ http://europa.eu.int/comm/employment_social/soc-prot/social/index_en.htm.

⁸⁰ Medgyesi, M., “Hungary. Critical Review of Literature and Discourses about Flexibility” in. C. Wallace ed., Institute for Advanced Studies, Vienna, 2002.

Sicherl, P., T. Stanovnik, et al. “Slovenia. Country Contextual Reports”, in. C. Wallace ed., Institute for Advanced Studies, Vienna, “Household, Work and Flexibility (HWF) Project, 2003.

Vecernik, J., “The Czech Republic. Country Contextual Reports”, in. C. Wallace ed., Institute for Advanced Studies, Vienna, HWF Project, 2003.

Table VII - 2: Benefits: type, level and length of entitlement

	Type of benefit	Level of benefit	Length of entitlement
Bulgaria	Means tested schemes for poor families only	Lump sum benefit to mother	
Czech Republic	Universal system for parents who raise children full time Social allowance for poorer families Parent must not work	Personal Needs Allowance multiplied by 1.1 more under special conditions	Up to 4 years (in some cases 7 years)
Estonia	Universal Child Care allowance	Half of child care allowance rate (1200 EEK in 2002)	3-8 years. Longer for large families
Hungary	Universal tax based benefit Additional benefit for families with 3 or more children of which the youngest 3-8 years	Current minimum old age pension	3 years, more for large families
Latvia	Parent must work less than 20 hours if child is less than 18 months and less than 34 hours per week if child is less than 3 years	30 LVL up to 18 months and 7.5 LVL up to 3 years	3 years
Slovakia	Means tested scheme earnings replacement only if child not in kindergarten and parent not employed	2740 SKK per month	3 years
Lithuania	No scheme	No scheme	
Poland	Means tested scheme for low income families only	380,98 PLN per month 491 PLN for single parents	24 months
Romania	Earnings replacement benefit for parent who interrupts career	85% of previous average monthly income	
Slovenia	No scheme		

Source: MISSEC data base.

Most of the New Member States and Candidate Countries have introduced some kind of paternity leave. In recognition of the role of the extended family, maternity leave can also be taken by grandparents or other caring relatives as an alternative in many countries. A second important issue regarding the gender equality arises as to what policies permit or promote more equal sharing of family caring responsibilities between women and men. It seems clear that women as a group cannot, as a matter of simple arithmetic, gain greater freedom to seek more diverse forms of income and fulfillment until men and women share the tasks of caring for family members more equally⁸¹. In the course of the 1990s, the Czech Republic, Hungary and Poland made child care benefits available to men and women on an equal basis⁸². The parental leave is transferable to the father and the grandparents if they are insured for all risks in Bulgaria⁸³. Thus, the gender equality is respected in the legislative framework, giving opportunities for women and men to share the childcare. In Slovenia the child care and protection leave (260 days of a full-time) can be used by either the mother or the father⁸⁴. In Estonia fathers equal to mothers have the right to parental benefits beginning 6 months from childbirth according to the new Parental Benefit Act, January 1, 2004. Moreover, the parental benefit is paid from the state budget through regional Pension Boards⁸⁵. In Romania too, there is fiscal encouragement for father's to take paid leave. However the take up of these

⁸¹ Fultz E., Ruck M. at. all ed., 2003, Op.cit., p. 16-17.

⁸² Fultz E., Ruck M. at. all ed., 2003, Op.cit., p. 15 –17.

⁸³ Teodora Noncheva, Denitsa Satcheva, Bulgaria, 2003, Op.cit., p. 31.

⁸⁴ Study on the Social Protection Systems in the 13 Applicant Countries, Slovenia, p. 40-42

⁸⁵ http://www.vm.ee/estonia/kat_399/pea_172/4262.html.

“paternity leave” schemes is unclear and in Romania, for example, men would not undertake this for fear of seeming “unmasculine”⁸⁶ (Stanculescu and Berevoescu 2003). Thus it is not clear to what extent this policy is really implemented.

3.3. Women as citizens

Some aspects of the social protection system apply to women as citizens of the society. One example is that of pensions. In course of the socio-economic reforms the New Member States and Candidate countries from Central and Eastern Europe, as well as Cyprus have reformed their pension systems⁸⁷. With respect to gender equality, the trend in the 1990s is in the direction of linking the individual’s pension benefit more closely to his or her earnings and work history in the new Member states and Candidate countries could have negative repercussions for women. This trend appears in both the public pension schemes and the new privatized ones. It is advantageous to women and men with higher incomes, and hurts all workers, women or men, with lower ones. Given that women earn significantly less than men during their professional lives and tend to work fewer years (both as a result of more time taken for bearing and raising children and more likely unemployment throughout much of Central and Eastern Europe), this trend affects them more negatively⁸⁸.

The partial privatization of pension schemes raises a major question concerning the size of men’s and women’s pensions as a result of their different average life expectancies. The tendency to increase private funding, in particular in old-age security tends more to a typology of Anglo-saxon welfare state in some new Member States and Candidate countries. This issue arises in the new systems of commercially managed individual savings accounts mandated by privatization laws. When the amounts accumulated in these accounts are converted to annuities at retirement, it will be necessary to consult one of two types of life expectancy tables: either one that treats women and men separately or a second that gives a single, joint life expectancy projection for both. The use of the latter will result in the payment of an equal monthly benefit for a man and a woman who retire at the same age with the same history of contributions. However, since women on average live longer than men, they will, on average, accumulate higher total *lifetime* benefits than comparable men. On the other hand, the use of gender-specific tables will give a man and a woman retiring at the same age with the same histories of contributions the same total *lifetime* accumulations of retirement benefits but will give the woman a lower *monthly* benefit, because her savings must, on average, be stretched to cover a longer lifetime⁸⁹.

4. Conclusions

The social protection systems in the New Member States and Candidate countries are in process of transformation in response to the changing socio-economic conditions and negative demographic trends. The reforms concern mainly the partial privatisation of the social protection system, the relation of the benefits to the income, the enlargement of the coverage of the insured persons with the self-employed persons, the introduction of the three pillar pension system encouraging the accumulation of the personal savings for supplementary pensions. The reforms of the social security systems in transition economies affect the men and women in different ways. For this reason the gender dimensions of social

⁸⁶ Stanculescu, M., Sofia and I. Berevoescu, Romania. Country Contextual Reports. C. Wallace. Vienna, Institute for Advanced Studies, HWF Project, 2003.

⁸⁷ <http://www.ssa.gov>.

⁸⁸ Fultz E., Ruck M. at. all ed., 2003, Op.cit., p. 17.

⁸⁹ Fultz E., Ruck M. at. all ed., 2003, Op.cit., p.17 –18.

security policy have to be taken into account. In the present chapter some gender equality issues in the context of the social security system have been outlined. The results show that a contradiction exists between the introduction of the means-tested family benefits (instead of employment related benefits) and the policy of integration of women in the labour market after the motherhood. However, there is a tendency to implement a universal system of family benefits in the most of New Member States and Candidate countries can be observed.

The welfare states of Eastern and Central Europe have been developed in the context of economic crisis, fiscal decline and the proliferation of social problems requiring welfare support. Nevertheless, relatively strong social protection systems with universal coverage of the population are evolving in countries such as the Czech Republic, Slovenia, Slovakia and Hungary. In other countries the ideal of universal welfare protection is undermined by the fact that many people fall out of coverage.

Here we have considered the role of women as workers, for in the adult worker model benefits accrue mainly to individuals as a result of their participation in the labour force. This is reinforced by the introduction of social insurance systems. However, the lower wages, lower professional positions and vulnerability to unemployment that we have described in preceding chapters tend to undermine this universalism. The role of women as workers is increasingly undermined by their role as parents or carers, since an increasingly conservative model of family care is becoming predominant, especially in the context of the child raising allowance. The undermining of social benefits for mothers in the early transition period may have lead to a “birth strike” or the desire to postpone family formation in the New Member States and Candidate countries. In their role as citizens, women are also likely to suffer in the course of transition as their deteriorating position on the labour market puts them in a less good position to contribute to the partially privatised pensions system.

Hence, we would argue that despite the rather good levels of social support that still exist in the New Member States and Candidate Countries, the situation of women continues to be an unequal one within the social protection systems. The role of women as workers has continued partly thanks to the supportive role of the extended family, especially grandparents. The role of grandparents has been important in all of the countries under consideration, even those with generous and universal welfare states. However, in those countries where the welfare state is unable to provide complete coverage (such as Bulgaria and Romania) we see a reversion to a family based model of welfare that might be expected to intensify in future.

CHAPTER VIII: CHILD CARE SERVICES AND FAMILY POLICY IN THE CONTEXT OF EUROPEAN UNION ENLARGEMENT

1. Introduction

In this chapter we look at the childcare facilities in New Member States and Candidate Countries by reference to data from Eurostat, UNESCO, WHO and other sources. The trends in child care provision are affected by other trends described in this report, especially the demographic decline and the re-organisation of public services.

In the past, childcare services were fairly comprehensively provided by the former regimes, often by enterprises themselves. However, with the transition, such services were cut as enterprises rationalised their services or closed altogether. During the 1990s many kindergartens and nurseries were once again opened, at least in the more affluent transition countries, but this time under local authority jurisdiction. In addition, private services started to be provided. However, it is difficult to find comprehensive data on all of these services which tend to be provided at a local level and private services are not always recorded. The role of extended family (especially grandparents) in childcare continues to be very important, especially in the less affluent transition countries (for example Bulgaria, Romania and Latvia) where the fiscal crisis has led to state subsidised facilities being closed whilst private facilities are beyond the reach of ordinary women. In these countries, often what results is a “care deficit” with children being unsupervised or supervised by telephone. According to a recent UNESCO report “ although no data are available on the paying and subsidiary mechanism that prevail in the Central and Eastern European Countries (CEECs), childcare there has become very expensive as a result of restructuring of pre-schooling funding systems”⁹⁰. Hence it is probably impossible to draw a fully comprehensive picture of the childcare system in all countries. This report is based upon available data.

The childcare and education support system are affected by the repercussions of the demographic changes, as well as the economic crises and structural changes in the Central and Eastern European Countries (CEECs). The decline in the birth rate, the decrease in the number of marriages and the increase in unemployment lead to a reduction in the demand for child care and child educational services. Hence the reduction of childcare services can also be read as a response to falling birth rates. In reading the statistics enclosed here, we should bear in mind that countries such as the Czech Republic (1995), Hungary (1998), Slovakia (1994; 1995, 1996, 1997, 1998, 1999, 2001) and Estonia (2004) have introduced “Child care allowances” for periods of between 12 months and 4 years with the idea that women should remain at home to care for children during this period full time. If they put their children into a nursery, they can forfeit this allowance. Hence, these policies of encouraging women to stay at home represent something of a conservative trends, whilst at the same time the high enrolment rate in kindergartens once children have reached the right age, indicates a system which is more responsive to the needs of working mothers than most Western EU countries.

The present chapter will explore the trends of development and the changes in early childhood care and pre-schooling education services, as well as it will giving information about the respective regulatory and institutional framework.

⁹⁰ Tine Rostgaard, “Family Support Policy in Central and Eastern Europe – A Decade and a Half of Transition, Early Childhood and Family Policy Series”, No 8, Unesco Education Sector, 2004, p. 24.

A word about definitions. In each country there tends to be a slightly different vocabulary for pre-school childcare facilities. Here we define *nurseries* as facilities for children up to the age of 3 (sometimes called *crèches*) whilst *kindergartens* are for children aged 3-7 after which compulsory schooling begins in most of the countries under consideration. *Pre-school education* is for children just before they enter compulsory schooling and usually refers to the preparatory year before compulsory schooling. *Residential schools* are homes or institutions for children not in families. In the CEEC countries, children start full time education at the age of 7, so we are only discussing the period before they go to school in this report.

2. Comparative overview of the early childcare and pre-schooling services

We provide a comparative overview of trends in child care and pre-school services on the basis of EUROSTAT data and then we go on to look at each country in turn, grouped according to New Member States (CEEC), Candidate countries and then the Mediterranean countries where the situation is rather different. Since there is uneven coverage of different countries in the various reports on which we draw, we can include more information about some countries than others.

Pre-school enrolment (number of students) in the New Member States and Candidate countries, it is declining between 1998 and 2000 in public institutions, reflecting changes in the demographic profile of the population (fewer children). However, private institutions are playing an increasingly important role and this trend indicates changes in the institutional structure of the childcare system (Table VIII-1). In some countries, private pre-school facilities are also state subsidized, allowing a variety of provision (as in Slovenia). Alternative kindergarten such as Montessori schools have been introduced, but take up is low because people rather trust the traditional child care provision.

Table VIII - 1: Pre-primary school education - level 0 (ISCED 1997)

Public institutions

	1998	1999	2000	2001
EU 15	:	:	7449715	7314601
Bulgaria	219942	218267	211614	200131
Cyprus	:	8498	8255	9381
Czech Republic	310129	306384	294147	283803
Estonia	54797	54196	52059	51947
Hungary	374528	364409	354561	340244
Lithuania	91021	93387	93187	87708
Latvia	59888	57179	55993	52319
Malta	:	6545	6215	6082
Poland	948112	926092	883392	846869
Romania	619465	620957	612822	606849
Slovenia	47378	58077	57602	55180
Slovak Republic	169327	168698	163252	155609
Turkey	:	245983	237011	242475

Source: Eurostat database, June 2004

Private institutions

	1998	1999	2000	2001
EU 15	:	:	3287198	3336023
Bulgaria	235	258	329	318
Cyprus	:	10111	9052	8171
Czech Republic	5834	5243	4461	4370
Estonia	280	378	463	586
Hungary	10141	11726	12310	12856
Lithuania	266	258	257	251
Latvia	237	568	592	741
Malta	:	3898	3824	3765
Poland	31429	31946	35725	38547
Romania	4088	3821	3491	4187
Slovenia	361	595	621	550
Slovak Republic	703	695	739	810
Turkey	:	15176	14585	16231

Source: Eurostat database, June 2004

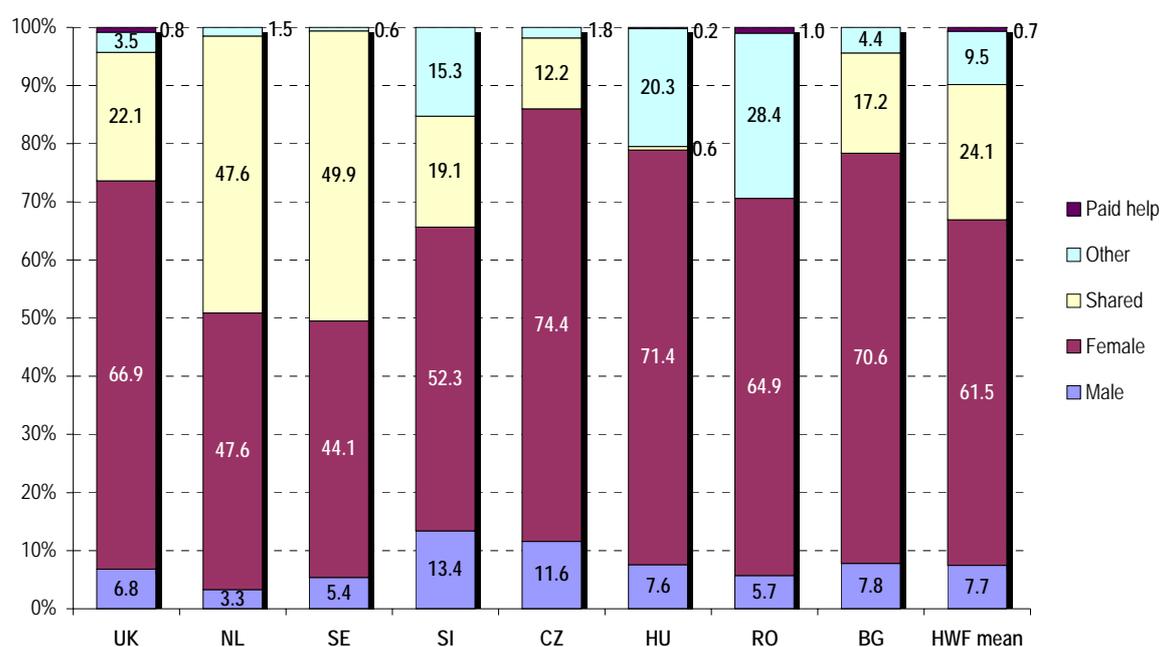
Most child care is provided of course by families. Here there are distinctive patterns in Central and Eastern Europe, whereby extended families are heavily involved. Quite often, the young family shares housing with the older generation, so that household size is usually larger than in EU 15 countries, especially in rural areas.⁹¹ This enhanced the strong traditions of family inter-generational solidarity⁹². Furthermore, since people in the past had their first children in their early 20s, the generation of grandmothers is relatively young and able to look after their children's children, especially if they are early retired, as was often the case in the past (women retired often in their 50s)⁹³. This can be evidenced to some extent in the responses to a questionnaire which asked about childcare carried out in 2001 (Graph VIII-1). The question wording was "who mainly takes daily care of the children" and since grandparents tend to be supplementary carers, they would not necessarily have been caught by this question. Nevertheless, we can see quite a high proportion of people mentioning "other" in the CEEC countries as compared with the old EU countries and this usually meant extended family, especially grandparents. We also see far smaller numbers sharing the childcare, since ideologies of egalitarian partnership have not penetrated into personal relationships to the same extent as in the Netherlands and Sweden (perhaps due to lack of a feminist movement). However, we also find a small private sector, with Romania having the largest sector in this respect, probably on account of the collapse of state child care facilities, which unlike in Slovenia, Hungary and the Czech Republic, were not replaced by municipal services. In some countries such as Slovenia and Bulgaria, this situation is recognised in legislation in which maternity leave can be taken not only by mothers or fathers but also by extended family.

⁹¹ "The Social Situation in Europe", 2003, European Commission, DG Employment and Social Affairs, 2003.

⁹² Wallace, C. (1995). "The family and social transition in Poland." *Journal of European Social Policy* 5(2): 97-109.

⁹³ Mozny, I. (1994). The Czech Family in Transition: from social to economic capital. *Social Reform in the Czech Republic*. S. Ringen and C. Wallace. Prague, Central European University.

Graph VIII - 1: Taking daily care of the child/children



Source: HWF Survey 2001 – Unified international data collection

3. Country reviews

3.1. Childcare and pre-primary education in Bulgaria

Enrolment in nurseries in Bulgaria has diminished during the socio-economic transformation between 1989 and 1997 as a result of following the demographic decline, increasing unemployment and financial problems in families⁹⁴. Referring to the recent data, i.e. 2000-2003, the places in nurseries and the enrolment of children in nurseries is relatively stable in towns and in villages (Table VIII-2).

Table VIII - 2: Nurseries, places and children in crèches for the period 2000-2003¹⁾, (Number)

	2000	2001	2002	2003
Nurseries	636	630	631	637
Places as of 31.12	21 296	21 174	21 516	21 542
in towns	19 255	19 035	19 448	19 411
in villages	2 041	2 139	2 068	2 131
Children				
number of entrants	21 001	22 071	22 582	21 144
at 31.12	20 149	21 167	21 816	21 029
by age:				
up to 1 year	132	114	114	133
1 to 2 years	5 588	5 801	6 372	5 926
2 to 3 years	13 052	13 907	14 066	13 680
3 years and over	1377	1 345	1 264	1 290

¹⁾ Incl. nurseries and groups, mixed with kindergartens, Data as of 31.05.2004

Source: National Statistical Institute of Bulgaria, <http://www.nsi.bg>

⁹⁴ Tine Rostgaard, "Family Support Policy in Central and Eastern Europe", 2004, Op.cit., p. 23.

The Public Education Act from 1991 provides for the establishment of preparatory groups and classes, aimed at improving children's preparation for school. Pursuant to the Public Education Act from 1991 and Amendment from 1998, kindergartens are the places that children can attend from their third year of age until they can enter school (the official school-entrance age is 7). Kindergartens can be public, municipal or private. Children's enrolment kindergartens is not compulsory and depends upon the decision of their parents or guardians. In fact even children as young as two and a half are admitted to kindergartens. For younger children there are nurseries. The municipal sector provides more than 95% of the funds. Pre-school education depends upon the child's age and status. For poor children or orphans there are established boarding schools, and for the physically or mentally disabled children there are special kindergartens. Private kindergartens, are allowed and regulated but are not publicly financed. Currently, the majority of private kindergartens in Bulgaria work with educational programmes specially approved by the Ministry of Education and Science. In public and municipal kindergartens parents pay fees at a rate determined by the Municipal Council. Children's preparation for school is carried out in kindergartens or in preparatory classes in schools. The kindergarten provides a child with the necessary conditions to develop its abilities to the highest degree and to prepare for school. The ideology of pre-school education has also changed since the transition, with a reorientation towards personality-oriented pedagogical interaction. Pre-school education is carried out in all-day and half-day kindergartens and school preparatory groups. The Bulgarian pre-school education system has the capacity to provide 100% all-day enrolment of children, although the socio-economic problems along with demographic decline have resulted in decreasing the enrolment rate of children in kindergartens⁹⁵.

During the socio-economic transformation the total number kindergartens fell, following the structural changes and the demographic decline in the country. Private kindergartens have been introduced, but their share is yet limited (Table VIII-3) because of the relatively expensive fees in these kindergartens, which are beyond the pockets of most young Bulgarian families.

Table VIII - 3: Educational institutions by type and kind of ownership

	1990/ 1991	1991/ 1992	1992/ 1993	1993/ 1994	1994/ 1995	1995/ 1996	1996/ 1997	1997/ 1998	1998/ 1999	1999/ 2000	2000/ 2001	2001/ 2002	2002/ 2003	2003/ 2004
Kindergartens (Total)	4 590	4 465	4 429	3 856	3 659	3 762	3 713	3 559	3 518	3 434	3 249	3 242	3 127	3 278
Kindergartens (Private)	-	-	2	4	6	8	11	14	15	18	18	22	20	24

Source: National Institute of Statistics, Bulgaria, <http://www.nsi.bg>, Data as of 29.03.2004

The number of pulpits and students, i.e. the total enrolment, is also falling, whilst the enrolment in private institutions has increased (Table VIII-4).

Kindergarten teachers are appointed for a six-hour workday and their training gives them a general knowledge as well as pedagogical skills. About 98% of teachers in Bulgarian pre-school institutions have a college or university degree and the other 2% have secondary education. Teachers of children are trained in seven universities by special programmes. They are offered post-graduate qualification in three teachers' training colleges⁹⁶.

⁹⁵ The Education for All (EFA) 2000 Assessment: Country Reports, Bulgaria, Unesco, http://www2.unesco.org/wef/countryreports/bulgaria/rapport_2.html

⁹⁶ The EFA 2000 Assessment: Country Reports, Bulgaria, Unesco,

The number of teaching staff in pre-primary education has declined during the transformation period in Bulgaria.

Table VIII - 4: Pupils and students by level of international standard classification of education (ISCED - 97)

	1990/ 1991	1991/ 1992	1992/ 1993	1993/ 1994	1994/ 1995	1995/ 1996	1996/ 1997	1997/ 1998	1998/ 1999	1999/ 2000	2000/ 2001	2001/ 2002	2002/ 2003	2003/ 2004
Pre-primary education (ISCED – 0)	303	258	263	247	246	254		220	218	211	200	199	201	201
Total	779	995	004	472	608	234	247 015	177	525	943	449	206	317	145
Pre-primary education (ISCED – 0) Private	-	-	21	159	87	194	249	235	258	329	318	458	555	605

Source: National Institute of Statistics, Bulgaria, <http://www.nsi.bg>, Data as of 29.03.2004

3.2. Childcare and pre-primary education in Czech Republic

Although there has been an economic recovery in the Czech Republic since the mid 1990s, there has been a decline in the number nursery schools, classes, and enrolled children from 1995/96 to 2002/03 (Table VIII-5).

There is a decrease in enrolment at the pre-primary education - level 0 (ISCED 1997) in public and private institutions as well (Table VIII-1). These trends could be related to the reconstruction of the childcare system, the low birth rate and unemployment as well as to the introduction of the child care allowance up to age 3 in the Czech Republic. Pre-school facilities are provided mainly by the 14 municipal regions since 1991 and enrolment after the age of 3 is rather high: 66% for those aged 3, 89% for those aged 4 years and 98% for those aged 5 years. For those aged 6 years there is only 22% enrolment in case the school start is postponed. This provision is mostly state financed – parents pay only a small fee.⁹⁷

Table VIII - 5: Nursery schools

School year	Nursery schools, total			incl.: With all-day operation			Teachers
	Schools	Classes	Children	Schools	Classes	Children	
1995/96	6,475	14,715	333,433	6,435	14,113	322,328	28,080
1996/97	6,343	14,400	317,153	6,312	13,982	310,391	27,635
1997/98	6,152	13,829	307,508	6,094	13,404	300,702	25,897
1998/99	6,028	13,509	302,856	5,973	13,087	295,799	25,296
1999/00	5,901	13,006	290,192	5,849	12,566	282,730	24,484
2000/01	5,776	12,611	279,838	5,722	12,162	272,397	23,800
2001/02	5,642	12,382	276,438	5,561	11,940	269,096	23,345
2002/03	5,552	12,304	278,859	5,503	11,871	271,153	23,198

Source: Czech Statistical Office

http://www2.unesco.org/wef/countryreports/bulgaria/rapport_2.html

⁹⁷ Wallace, C., “Comparative Contextual Report”, HWF Project, <http://www.hwf.at> for the European Commission SERD-1999-00178, 2004.

3.3. Childcare and pre-primary education in Cyprus⁹⁸

Following the island's invasion by Turkey in 1974, pre-school education expanded rapidly in Cyprus in response to social needs brought about by the post-invasion population redistribution. Today there is a well-established pre-primary education system with state kindergarten institutions supported by community and parental involvement as well as private pre-schools, (Nursery schools), serving approximately 75% of the child population aged 3 years to five and a half.

State kindergarten schools cater for approximately 64% of pre-schoolers of middle or low-income families. Admission criteria are based on yearly income and family status (working, single-parent or refugee families). Private kindergarten schools cater for children not accommodated in the government sector.

State kindergarten schools fall into two categories: public and community institutions. Public kindergarten schools are staffed and subsidised by the state. The remaining running cost is undertaken by parents, who, in consultation with local authorities, also provide the building facilities. Community kindergarten schools are subsidised by the state, however, the local authorities are responsible for recruiting staff and providing the building facilities.

Drawing on the government policy to provide pre-school children with equal educational opportunities, there has been a recent trend to establish regional kindergarten schools in rural areas. The existing regulations provide that a kindergarten school can be established in a community if there are at least 15 children in it. The maximum number of children in each group cannot exceed 30 if children are of the ages 4,5 to 5,5, 26 if children are of the ages 3,5 to 4,5 and 23 if children are of the ages 3,0 to 3,5.

The goal of pre-school education has always been the quantitative expansion and qualitative development of kindergartens. The qualitative development is pursued through the differentiation of the curriculum and the instructional approaches, as well as through the in-service training of kindergarten teachers. The quantitative expansion has been pursued through two development plans: expansion of the number of public kindergartens and expansion of the number of community kindergartens, with the purpose of fully covering the number of children between the ages of 3-5 1/2 years old (age of starting full time schooling).

During the 1989-99 decade, 37 new public kindergartens and 38 new community kindergartens were established, while the number of private kindergartens decreased by 20 (Table VIII-6).

⁹⁸ The EFA 2000 Assessment: Country Reports, Cyprus, Unesco
http://www2.unesco.org/wef/countryreports/cyprus/rapport_1.html

Table VIII - 6: Kindergartens

SCHOOL YEAR	PUBLIC KINDERGARTENS			COMMUNITY KINDERGARTENS			PRIVATE KINDERGARTENS		
	Kinder gartens	Children	Staff	Kinder gartens	Children	Staff	Kinder gartens	Children	Staff
1988-89	187	7 532	280	75	2 673	104	116	3 312	180
1989-90	183	7 113	279	96	3 486	133	119	3 685	177
1990-91	191	8 096	289	104	3 485	136	127	3 706	173
1991-92	198	7518	314	120	3 884	146	128	3 653	163
1992-93	205	7 705	327	107	3 622	150	116	4 883	240*
1993-94	219	8 194	356	107	3 358	139	112	4 200	210*
1994-95	224	8 393	361	103	3 579	144	91	4 720	190*
1995-96	224	8 634	386	109	3 608	152	90	3 210	-
1996-97	224	8 604	378	112	3 832	160	-	-	-
1997-98	224	8 596	387	113	4 274	166	95	3 250	192*
1998-99	224	8 966	409	113	4 194	170	96	4 285	176*

Including non qualified personnel

The Ministry of Education monitors progress through the in-service training of the teaching staff, through procedures for supervision and evaluation, as well as through preparing and publishing books for the kindergarten. The basic learning needs that have been identified mainly concern the emotional/social development of the children and the development of their language skills. Other basic learning needs concern Environmental and Health Education, as well as aesthetic development. No specific target groups have been identified, except for the children with special needs, for whom efforts are being made for their full or partial integration in mainstream classrooms.

Regarding the changes in public expenditure on Pre-Primary education, the following Table VIII-7 are indicative of the increases as they are shown in the annual government budget.

Table VIII - 7: Funding of community Kindergartens

School Year	1992	1993	1994	1995	1996	1997	1998
Amount CY pounds	421 035	517 000	603 500	603 500	603 500	603 500	704 800

The main problems encountered and anticipated are related to the expansion of kindergartens. It was postponed due to financial difficulties, as well as due to the limited number of kindergarten teachers. The financial problems will continue to exist, but only as far as public kindergartens are concerned. The government policy is the expansion of community and not of public kindergartens, as shown in the strategic development plan for Pre-Primary Education.

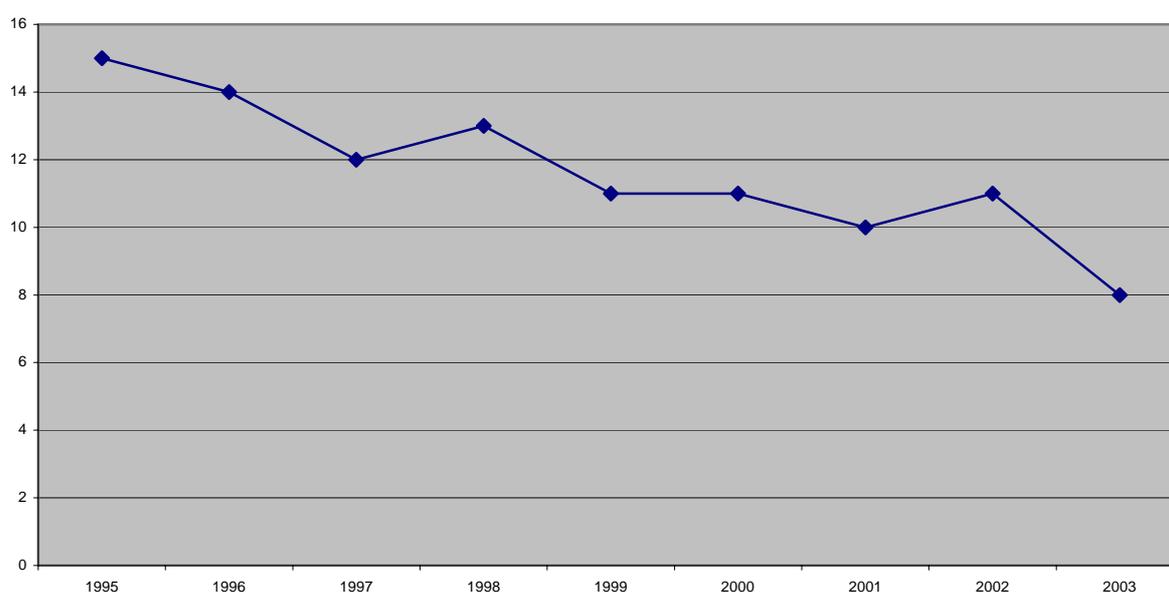
The public support and demand for basic education is very strong. There is evidence that the Government is determined to implement the goals of the strategic plan, especially regarding the expansion of community kindergartens. Direct evidence of this is the increase of the annual amount of government money provided to community kindergartens, as well as the encouragement of the local authorities and parents' associations for the establishment and operation of new community kindergartens.

The future policy directions are oriented to expansion of Pre-School Education, with the purpose of covering children between the ages of three and five years and 8months without necessarily expanding the public sector.

3.4. Childcare and pre-primary education in Estonia

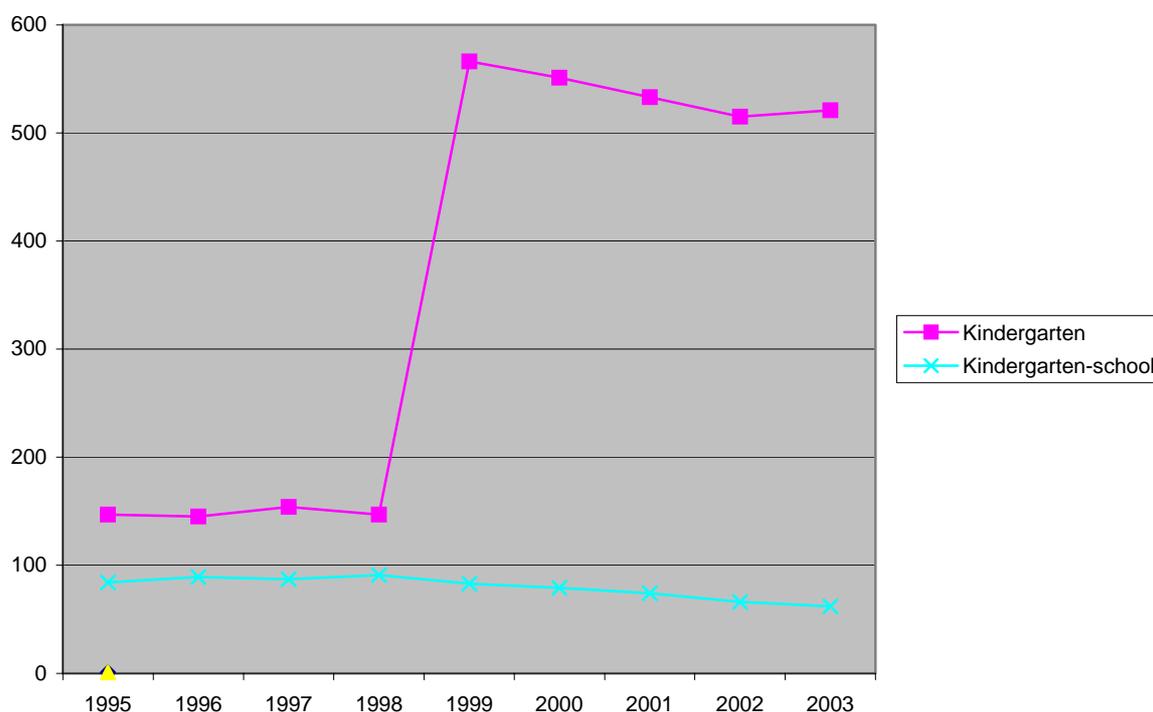
As in other transforming CEECs, there has been a decrease in the number of nursery schools in Estonia during the socio-economic transformation. In Estonia however this could be seen also after the mid 1990s despite the economic recovery indicated in the recent years (Graph VIII-2).

Graph VIII - 2: Nursery schools



Source: Statistical Office of Estonia, June 2004, <http://www.stat.ee/>

The number of kindergartens in Estonia rose significantly from 1998 to 1999, although data about nurseries are not available after 1999 (Graph VIII-3 and Table VIII-8). These trends show that structural change processes have taken place within the kindergarten system.

Graph VIII - 3: Preschool institutions – kindergarten and kindergarten schools

Source: Statistical Office of Estonia, June 2004, <http://www.stat.ee/>

Table VIII - 8: Preschool institutions by Year, Type of institution and Indicator

		Preschool institutions	Places in preschool institutions	Children	Pupils
1995	Nursery-school	15	474	641	0
	Kindergarten	147	6620	8078	226
	Kindergarten	414	37603	45397	1786
	Day-care centre	4	80	112	0
	Kindergarten for children with special needs	7	279	362	0
	Kindergarten-school	84	3607	4153	134
	1996	Nursery-school	14	460	626
Kindergarten		145	6737	7870	77
Kindergarte		406	37012	43731	1207
Day-care centre		7	336	406	60
Kindergarten for children with special needs		6	240	363	0
Kindergarten-school		89	3489	4024	22
1997		Nursery-school	12	408	536
	Kindergarten	154	6383	7350	75
	Nursery	407	37093	42840	1101
	Day-care centre	5	236	297	60
	Kindergarten for children with special needs	5	230	271	0
	Kindergarten-school	87	3488	3783	0
	1998	Nursery-school	13	412	520
Kindergarten		147	6773	7560	85

		Preschool institutions	Places in preschool institutions	Children	Pupils
	Nursery	399	35677	39638	735
	Day-care centre	11	498	579	45
	Kindergarten for children with special needs	7	540	670	22
	Kindergarten-school	91	3221	3499	114
1999	Nursery-school	11	430	464	0
	Kindergarten	566	46790	46512	662
	Nursery	0	0	0	0
	Day-care centre	1	180	149	60
	Kindergarten for children with special needs	2	96	120	0
	Kindergarten-school	83	3358	3117	.
2000	Nursery-school	11	420	488	0
	Kindergarten	551	46087	46483	333
	Nursery	0	0	0	0
	Day-care centre	0	0	0	0
	Kindergarten for children with special needs	5	203	232	0
	Kindergarten-school	79	3281	3044	.
2001	Nursery-school	10	406	473	0
	Kindergarten	533	45412	45956	74
	Nursery	0	0	0	0
	Day-care centre	1	180	151	0
	Kindergarten for children with special needs	6	264	253	0
	Kindergarten-school	74	3155	3019	.
2002	Nursery-school	11	434	494	0
	Kindergarten	515	45433	46484	0
	Nursery
	Day-care centre	0	0	0	0
	Kindergarten for children with special needs	4	171	171	0
	Kindergarten-school	66	2505	2458	.
2003	Nursery-school	8	336	384	0
	Kindergarten	521	46535	47765	0
	Nursery	0	0	0	0
	Day-care centre	0	0	0	0
	Kindergarten for children with special needs	6	238	211	0
	Kindergarten-school	62	2965	2967	0

Source: Statistical Office of Estonia, June 2004, <http://www.stat.ee/>

3.5. Childcare and pre-primary education in Hungary

In Hungary, the number of nurseries, the number of places offered, number of qualified supervisors and the number of enrolments has also declined for children less than three years old, reflecting the introduction of the child care allowance in 1998. The provision of kindergartens and public nurseries has been taken over by local authorities. The number of nurseries maintained by local governments has also declined. However, the nurseries provided by NGOs and private institutions has increased (Table VIII-9). Enrolment in nurseries is 10.2% of those of the appropriate age and enrolment in kindergartens is 86,4%. Informal care (neighbours, relatives) is also very important.

Table VIII - 9: Nurseries

Denomination	1990	1999	2000	2001
--------------	------	------	------	------

⁹⁹ Wallace, C., "Comparative Contextual Report", HWF project, 2004, <http://www.hwf.at>.

Infant nurseries	1 003	549	532	532
Number of places	50 250	26 071	24 965	24 394
Qualified, subordinate nurses	8 758	5 043	4 850	4 762
Number of infants enrolled to nurseries	40 825	31 983	29 561	28 981
Of which infant nurseries maintained by:				
local governments	38 939	31 116	28 654	28 177
non-profit institutions	–	95	86	276
private institutions	–	133	298	166
other	1 886a)	639	523	362
Number of enrolled children				
as a % of infants in nursery age	11.1	10.9	10.3	10.2

a) Data on infant nurseries of parent's place of work. Source: Hungarian Central Statistical Office, , Methodology: Infants enrolled to nurseries: data refer to the state on 31 May, Nursery occupancy rate: the number of infants enrolled to the nursery and actually cared for (the actual daily number) as a percentage of days of care (a product of places and working days).

There has also been a declining trend for kindergartens in Hungary, although not as steep as for the nurseries (Table VIII-10). The relatively stable systems of kindergartens, with very high levels of enrolment provide favourable conditions for women to reconcile work and family life.

Table VIII - 10: Education in kindergartens

Denomination	1990/91	1999/2000	2001/02	2002/03
Kindergartens-task unit a)	4 718	4 643	4 633	4 641
Kindergarten places, thousands a)	385	366.2	353.8	357,0
Pupils in kindergarten, thousands	392	366.9	342.3	331.7
Of which: in special education	0.8	1.2	1.4	1.4
Pupils' group	16 161	15 479	15 502	15 016
Teachers	33 635	31 653	32 327	31 550
Children per pupils' group	24.3	23.7	22.1	22.1
Children per teacherb)	11.7	11.6	10.6	10.5

a) Till 1999 excluding kindergarten task units and places under common administration with special primary schools.

b) Till 1999 excluding special education.

Source: Hungarian Central Statistical Office

http://www.ksh.hu/pls/ksh/docs/index_estadat.html

Methodology: Kindergarten children: children enrolled and registered in kindergartens at the date of statistical survey.

3.6. Childcare and pre-primary education in Latvia

In Latvia¹⁰⁰, pre-school education is the first part of the general education program preparing children up to the age of 7 but not past the age of 8 for the educational process and contributing to the overall development of the child. The pre-school education is regulated by the Education Law (1998), the Law of General Education (1999) and other related legislation and resolutions.

The funding for pre-school education at public schools comes from national and local budgets according to procedures defined by the Ministry. Parents usually pay only for meals and expenses resulting from special programs such as foreign language instruction in

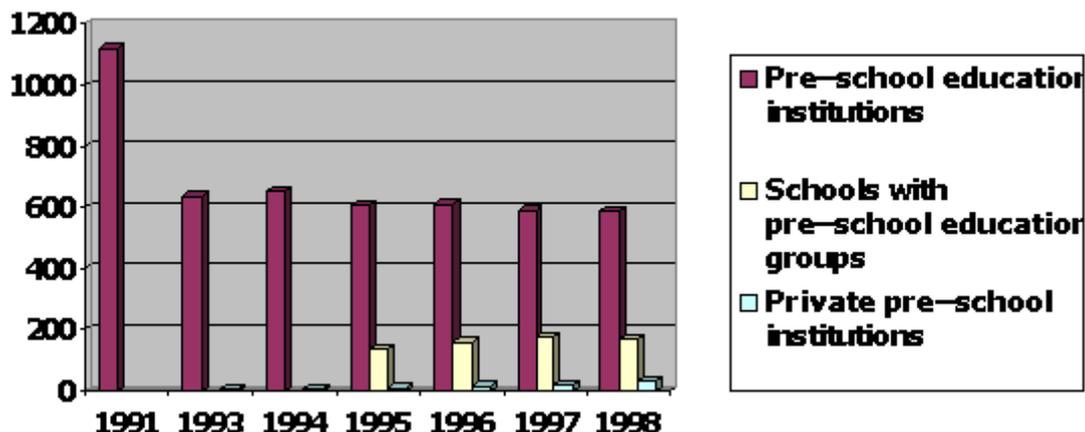
¹⁰⁰ The EFA 2000 Assessment: Country Reports, Latvia, Unesco, http://www2.unesco.org/wef/countryreports/latvia/rapport_2_1_.html.

kindergarten. Children from poor or large families may receive assistance with these fees if the local government is in a position to offer such assistance. Private pre-schools may charge tuition.

The birth rate has declined by a factor of two since 1990, therefore the number of children presently attending pre – schools or expected to attend in the next few years has decreased as well. Enrolment in kindergartens is lower in Latvia than for the two countries described so far. In 1985 there were enough vacancies in pre-schools for only 61% of the children in that age group. During the late 1980s and early 1990s changes in legislation followed closely on the heels of social and economic changes. Women were allowed to take a three-year maternity leave, receive child support and not lose their job or job status. At first, many women took advantage of this benefit. Beside the other benefits, parents received some financial support if their children did not attend pre-schools. Consequently, many parents stopped enrolling their children in pre-school programs, and the smaller number of children along with cuts in the income for tuition ultimately led to the closing of some pre-school education facilities so that by 1993 pre-school education facilities were attended by only 28% of all children of pre-school age.

In the years that followed, the number of children attending pre – schools gradually increased and by 1996 43% of all children of pre-school age attended a pre-school program. By 1999 this percentage had inched up to 44%. Although demand for pre-school programs is on the rise, pre-school educational facilities continue to close; the rate of closure, albeit at a lower rate than in the early 90s (Graph VIII-4).

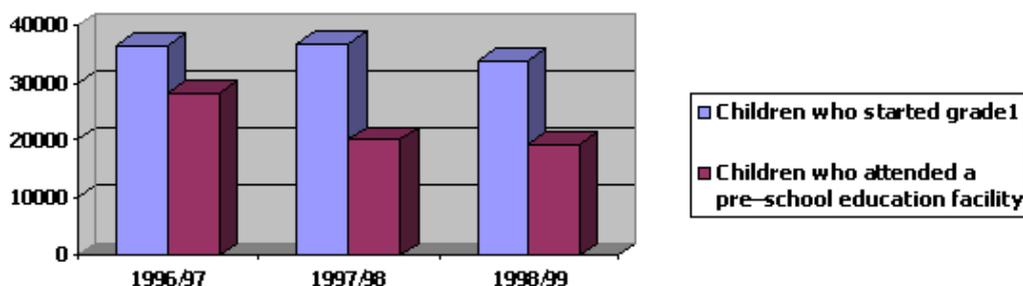
Graph VIII - 4: Pre-school institutions by type



Source: Ministry of Education and Science, National Revenue Service operational data

By 1999 57% of all five- and six-year-old children in Latvia were attending a pre-school education facility. Parental interest and involvement in their child’s overall development and education is increasing and they are more concerned with adequately preparing them for the basic program (Graph VIII-5).

Graph VIII - 5: Number of children who started grade 1 from the 1996/97 academic year to the 1998/99 academic year



Source: Ministry of Education and Science, National Revenue Service operational data

According to the UNESCO report, there are a number of problems with child care institutions in Latvia. In rural Latvia, poor infrastructure and widespread demographic changes make it difficult for parents to get their children to pre-schools. Special transportation arrangements on the part of the schools are cost prohibitive at this time. Lack of vacancies at pre-schools also create problems for the parents. One of the parents, most often the mother, has to give up her right to employment, which creates even more financial hardship for the family; resulting in a psychologically stressful and socially unfavourable environment for the child.

Private schools are not an option for most parents because of tuition costs. The need for more quality and accessible pre-school education facilities is underlined by the fact that the greatest number of repeaters are in the first couple of years of basic school because children are

entering basic school inadequately prepared. This trend is more pronounced in rural schools; urban pre-school programs are much better attended.

Numerous pre-school education facilities have been established since 1991. According to Ministry of Science and Education statistics, 28 private pre-school education facilities had been opened as of January 1, 1999; 2 private pre-school programs had been established at 2 existing schools during this time. The cost of tuition and other expenses at private pre-schools is incurred by the parents. For this reason, these schools are not an option for poor families.

The opportunities for minorities in pre-school education have also been taken into account. Just as in the case of mandatory basic education, any resident of Latvia is guaranteed the right to pre-school education in their native language. So pre-school programs are taught in Latvian, Russian, Polish, Lithuanian and other languages. Statistics show, however, that Russian is the most often used language at minority schools (Table VIII-11). Only a handful of pre-school programs are in reality taught in another minority language. In all minority schools, where instruction is in a language other than Latvian, all children are required to learn Latvian as well.

There are several alternative pre-school education programs available in Latvia, including Waldorf, Steiner and Montessori Schools. The first alternative programs appeared shortly after 1991. Alternative Pre-school education programs are attended by only a few children of pre-school age. The reason for this is twofold: The programs are expensive and most parents tend to be sceptical about alternative methods, choosing to put their trust in traditional approaches. The alternative programs, however, do offer parents a viable educational choice.

3.7. Childcare and pre-primary education in Lithuania

The enrolment of boys and girls in the pre-school education has slightly increased during the period 1996-2003 (Table VIII-11). These trends could be seen also by observing the enrolment rates in general (Table VIII-12).

Table VIII - 11: Enrolment by level of education

	1996	1997	1998	1999	2000	2001	2002	2003
Pre-primary education (level 0)	87137	91287	93645	93444	87959	88533	90434	88297
females	41723	43746	45050	44662	42162	42118	43341	41985
males	45414	47541	48595	48782	45797	46415	47093	46312

Source: Statistics Lithuania, <http://www.std.lt/web/main.php?parent=610>

Table VIII - 12: Enrolment rates¹

	(in per cent)							
	1996	1997	1998	1999	2000	2001	2002	2003
Pre-primary education (level 0)								
Gross	42.4	47.5	52.3	56.6	56.3	58.5	61.5	62
Net	40.5	45.2	50.1	54	54.2	56.3	59.5	60.3

Source: Statistics Lithuania, <http://www.std.lt/web/main.php?parent=610>,¹ Percentage of the enrolled as compared to a certain age group of population.

3.8. Childcare and pre-primary education in Poland

In Poland¹⁰¹ early childhood development programmes which are presently in operation follow the so-called *Minimum curriculum of pre-school education of children of the age group 3 to 6*, implemented on 11th April 1992 by the Ministry of National Education. The minimum curriculum comprises general guidelines for pre-school education and a set of tasks that should be performed by every institution for at least 5 hours per day, regardless of the programmes chosen by individual teachers.

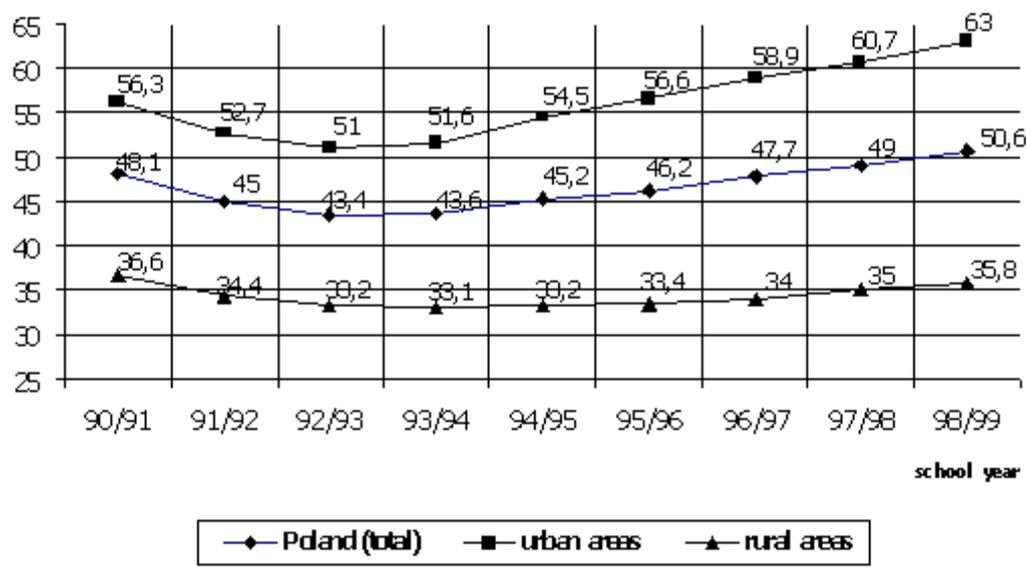
In 1992, in line with the new regulations, the Minister has approved three programmes for implementation: pre-school education programme, the programme of didactic and educational work with 6-year olds for one-year pre-school development activities, pre-school education programme for children of the age group 3 to 6.

The third programme is an entirely new form of developmental activities. The second programme is addressed to children of 6 years of age who are enrolled in pre-school classes of primary schools. Graph VIII-6 illustrates changes of the Gross enrolment ratio (GER)¹⁰² indicator referring to children enrolled in early childhood development programmes between 1990/91 and 1998/99 school years.

¹⁰¹ The EFA 2000 Assessment: Country Report - Poland, Unesco, http://www2.unesco.org/wef/countryreports/poland/rapport_2.html.

¹⁰² Gross enrolment in early childhood development programmes, including public, private and community programmes, expressed as a percentage of the official age group concerned, if any, otherwise the age group 3 to 5 according to the The EFA 2000 Assessment: Country Report - Poland, Unesco, Op.cit.

Graph VIII - 6: Gross enrolment ratio (GER) in Poland and by areas - urban and rural - in 1990-1999

GER^t_{EC}

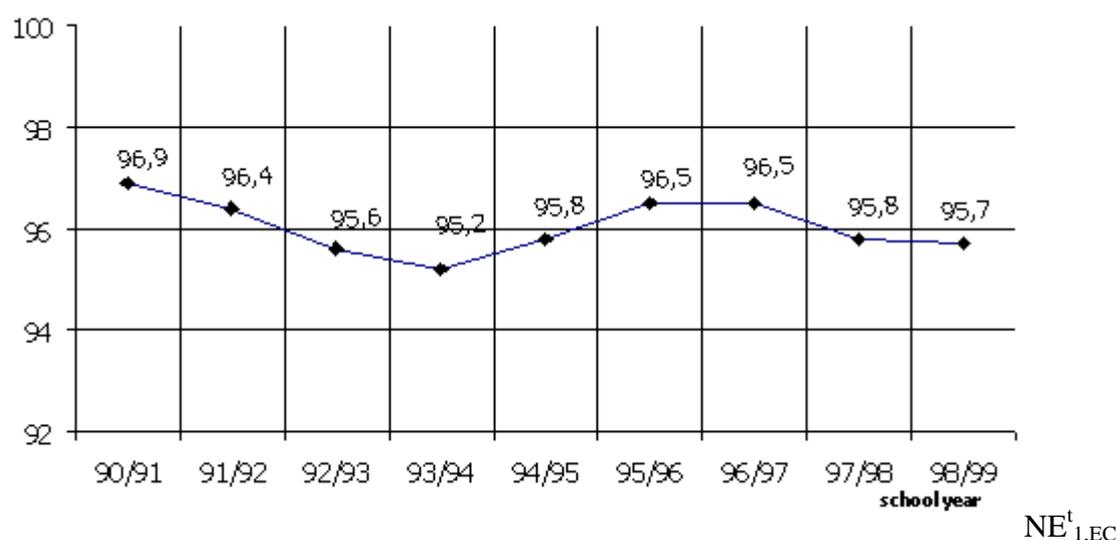
Source: The EFA 2000 Assessment: Country Report - Poland, Unesco, http://www2.unesco.org/wef/countryreports/poland/rapport_2.html

Firstly, we notice drops in the GER indicator in the school year 1992/93, which was caused by the social and economic changes occurring in Poland at that time (the problems of funds for pre-school education institutions, decreasing numbers of such institutions, difficult living conditions for many families, the growth of unemployment and so on). Secondly, the GER indicator shows a continuous increase between 1994 and 1999. The upward trend is significantly faster in urban areas (from 54.5 to 63.0) than in rural ones (from 33.2 to 35.8). This is on account of the increased participation of local self-governments and the local authorities, which took over responsibility for the financing of pre-school education institutions. As a result, the development of a network of centres and the better financing of them became possible. The pace of growth in regard to pre-school education in rural areas is still far too slow. It is a matter of particular concern because it reproduces the social and cultural backwardness of Polish villages. It is also regarded as the main reason for the disadvantage in educational opportunities for village children at later stages of schooling.

The percentage of new entrants to primary grade 1 who have attended some form of organised early childhood development programme (at least 200 hours) is shown in Graph VIII-7. In Poland, six years old children represent the official age group of attendees of pre-school classes of the so-called "zero year". This right has to be provided by the local authorities (*gminy*) which are now responsible for the operation and funding of pre-school institutions. The right to pre-school education can be provided through kindergartens or in pre-school grades of primary schools in which children are enrolled.

Because the one-year preparatory courses for six year olds is compulsory, there is up to 97% enrolment (Ne^t_{1,EC} indicator) during the period 1990-1999 (Graph VIII-7) with slightly higher enrolment in rural areas.

Graph VIII - 7: New entrants to primary grade 1 in 1990-1999



Source: The EFA 2000 Assessment: Country Report - Poland, Unesco,
http://www2.unesco.org/wef/countryreports/poland/rapport_2.html

NE^t_{1,EC}

3.9. Childcare and pre-primary education in Romania¹⁰³¹⁰⁴

Legislation in Romania has been adjusted to the European and international regulations on the observance of child rights, on child adoption and on parents' education. A series of documents on the policy in the field have also been prepared and the "The National Action Plan for Child Support" of 1995 establishes the principles and the directions for action in child education, protection, and health care, according to the Constitution of Romania and the UN Declaration on Children's Rights. The "Government Strategy for Child Protection: 1997-2000" (1997) proposed a set of legal acts on the strategic elements of the child protection system: a decentralised infrastructure, reorganised child protection institutions, redefinition of the family role in child education and care, the setting up of social and maternal assistance and the involvement of the civic society. In 1999, Romania's Rebirth through Education Alliance was constituted from public and governmental institutions, private and non-governmental organisations under the aegis of the Presidency of Romania. The Alliance has designed a national macro-programme: "Romania Educational". The envisaged objective is a partnership between the central and local authorities as well as the non-governmental sector in the field of child education and protection. Despite all of these initiatives, changes in the field of social policies on child protection and education failed to achieve a general reorganisation of the system so that it remains rather fragmented. The steps taken were aimed at updating the older legislation from the earlier centralised system of protection, which was completely controlled by the state. This needed revising in the light of urgent concerns that emerged after the transition such as children in disadvantaged situations, including the expansion of the "street children" phenomenon, the increase of HIV-AIDS cases among children, the explosion of international adoptions, etc. In Romania, the main central

¹⁰³ The EFA 2000 Assessment: Country Report, Romania, Unesco,
http://www2.unesco.org/wef/countryreports/romania/rapport_2.html

¹⁰⁴ Romania, Romanian Statistical Yearbook 2002, Chapter 7 Education; Research,
http://www.insse.ro/download/anuar_2002/aseng2002.htm

institutions responsible for the co-ordination and definition of policies in the field of child protection and education are: the Ministry of National Education, the Ministry of Health Care, the Ministry of Labour and Social Protection, the Ministry of Justice and the State Secretariat for the Handicapped. These institutions and their corresponding regional structures - county school inspectorates, county and local councils, mayors - are responsible for the budget planning and management of the child protection institutions (space, equipment, drugs, teaching aids, etc.). In agreement with the new law on local public funds, the allocation and management of resources is also decentralised in the field of child protection and education. Thus, local funds are spent on maintenance, current and capital repair works, and investments in public services specialised in child education and protection. After 1989, in addition to public financing, child protection and education benefited from external financial support including the International Monetary Fund, the World Bank, UNICEF, the European Union, the Council of Europe, UNDP, etc. These organisations are supplemented by financial and material contributions from charities, donations from various sources, sponsorship by enterprises and civil society initiatives¹⁰⁵.

A series of institutions develop activities targeted at the education and care of younger children:

- institutions for child protection and care - nurseries, nursery schools, pre-school foster homes, juvenile centres - for children from families with social and economic problems, orphans, and abandoned children;
- medical institutions such as hospitals for children with serious psycho-physical handicaps requiring specialised medical assistance;
- educational institutions - kindergartens;
- institutions for special education - special pre-school children's homes and special kindergartens where educational programmes are adjusted to children's special needs¹⁰⁶.

According to the statistical data the number of nurseries decreased from 840 units in 1990, to 348 units in 2001 mainly because of lack of funds to run them. Another factor is the decrease of the birth rate since the live births per 1000 population fell from 13,56 in 1990 to 9,66 in 2002¹⁰⁷. Other factors include the large number of external adoptions, the extension of maternity leave until the child reaches the age of 2 and the decline in the income of the population: parents are supposed to pay for a part of the child's maintenance and food in the nursery (although there are discounts of up to 50% depending on the parent's income).

Although the number of children attending nursery schools/nurseries has declined, staffing is nevertheless insufficient. At the same time, the staff, who are mostly medically based, lack psycho-pedagogical training. This fact reduces the activity in nurseries to the supervision and medical assistance of the children, with no age-adjusted educational programmes being developed. Recently, the Ministry of National Education has initiated a training programme for paediatric nurses. Some non-governmental initiatives have focused upon the training of specialised staff and the development of educational programmes in nurseries. Until now the care system in nursery homes has an excessively medical nature and ignores child socialisation and education. The fact negatively influences the social and affective development of the child, causing "hospitalism" and hinders the child's integration into the system of formal education. In recent years, the quality of infant protection has improved due to a series of factors: the significant increase in staffing; building refurbishment;

¹⁰⁵ The EFA 2000 Assessment: Country Report, Romania, Unesco, Op.cit.

¹⁰⁶ The EFA 2000 Assessment: Country Report, Romania, Unesco, Op.cit.

¹⁰⁷ WHO Regional Office for Europe, <http://hfadb.who.dk/hfa/>.

implementation of programmes initiated by the Department for Child Protection, the Ministry of Health Care, or of PHARE pilot projects aimed at facilitating infant's links with the family, reducing the desertion phenomenon, and organising individualised care programmes¹⁰⁸. We should note that it was traditional for poorer families to give their children up to these homes when they could not afford to keep them – they may nevertheless have stayed in touch with their children and hope one day to take them back. The drastic pro-natalist policies of the Ceausescu regime produced many such children.

Kindergartens are educational institutions for children in the age group 3-7 years. The network of kindergartens in the pre-school network includes: normal kindergartens, full-day kindergartens, one-week programme kindergartens; kindergartens for handicapped children, kindergartens in institutions for pre-schoolers, and kindergartens in institutions for handicapped pre-schoolers. Under Article 18 in the Law on Education, kindergartens are established by school inspectorates. Kindergartens may also be founded by economic agents, legal institutions, and other stakeholders and need to be approved by the school inspectorates¹⁰⁹.

Table VIII - 13: Number of Pre-school Institutions, Enrolled Children, and Available Places: 1998

Type of Kindergarten	Kindergartens	Children	Available Places
Weekly Programmes	68	5 873	6 520
Extended Programmes	1,223	128,928	148,431
Normal Programme	11,361	485,301	500,525
Handicapped Children	57	2,340	2,786
Homes for Able-Bodied Pre-schoolers	41	1 869	2,722
Homes for Disabled Pre-schoolers	10	467	733
Total	12,760	624,778	661,717

Source: National Commission for Statistics, Pre-school Education at the Beginning of the 1998/99.

In 1998/99, the network of pre-school educational institutions consisted of 99.5 percent kindergartens for normally developed children and 0.4 percent of the kindergarten in pre-school children's institutions. The highest percentage of occupied kindergarten places could be found in the normal-schedule kindergartens (96,5 percent), while the smallest percentage was found in institutions for disabled pre-schoolers (63,7 percent) (Table VIII-13).

In addition to formal institutions designed for child protection and education, there also exists alternative institutions and organisations developing educational programmes and granting children protection and humanitarian aid. Their target population for these programmes are the institutionalised children, children with special needs, street children, as well as children and families in difficulty¹¹⁰.

The enrolment of children in kindergartens has declined initially during the period of socio-economic transformation (Table VIII-14). However, after the 1994/95 school year, the rate of children enrolment in pre-school education has been steadily increasing, following the publication of the Law on Education provisions that has made pre-school education universal. However, the number of kindergartens has decreased once more during the last two observed years 2000/2001 and 2001/2002, mostly due to the demographic trends in Romania. The

¹⁰⁸ The EFA 2000 Assessment: Country Report, Romania, Unesco, Op.cit.

¹⁰⁹ The EFA 2000 Assessment: Country Report, Romania, Unesco, Op.cit.

¹¹⁰ The EFA 2000 Assessment: Country Report, Romania, Unesco, Op.cit.

private kindergarten network has emerged in parallel with the public network and although these might offer superior facilities, many people cannot afford to use them.

The first private kindergartens were established in the 1991/92 school year. At the beginning of the 1998/99 school year, the network of the pre-school education included 12,760 kindergartens (12,676 public and 84 private), with 392 units more than in the previous school year, out of which 26 percent are located in urban areas, and 74 percent in rural areas. Out of the total of 624,778 enrolled children, 48,66 percent attend urban kindergartens and 51.34 percent those in rural areas. The number of the private preschool education units and the number of the enrolled children has increased after 1997 (Table VIII-15).

Table VIII - 14: Education of all levels (day, evening, part-time education and learning at distance)

	1990/ 1991	1991/ 1992	1992/ 1993	1993/ 1994	1994/ 1995	1995/ 1996	1996/ 1997	1997/ 1998	1998/ 1999	1999/ 2000	2000/ 2001	2001/ 2002
Children in kindergartens (total)	752141	742232	752063	712136	715514	697888	659226	623553	624778	616313	611036	616014
Pre-school education - Kindergartens	125229	12600	12603	12715	12665	12772	12951	12368	12760	12831	10080	9980

Source: National Institute of Statistics, Romania, Romanian Statistical Yearbook 2002, Chapter 7 Education; Research, http://www.insse.ro/download/anuar_2002/aseng2002.htm

Table VIII - 15: Education of all levels from private institutions

	1992/ 1993	1993/ 1994	1994/ 1995	1995/ 1996	1996/ 1997	1997/ 1998	1998/ 1999	1999/ 2000	2000/ 2001	2001/ 2002
Pre-school education										
Education units	16	14	11	13	26	94	84	70	72	90
Enrolled population	451	686	752	664	1174	4088	3821	3491	4187	5456
of which female	0	349	388	347	584	2059	1958	1821	2156	2776

Source: National Institute of Statistics, Romania, Romanian Statistical Yearbook 2002, Chapter 7 Education; Research, http://www.insse.ro/download/anuar_2002/aseng2002.htm

The post-1989 evolution in terms of unit number, enrolled children, and teaching staff in pre-school education has led to improved service quality and educational activities. The children/educator ratio decreased from 28 to 17.01 in the 1997/98 school year, and to 17.1 in the 1998/99 school year. The 1998/98 ratio in urban areas is 14.5 and 20.5 in rural areas. The inference is that, in the case of rural area, the legal maximum number of children in a group (20) is exceeded. Actually, these values are higher in large cities and lower in rural areas with a reduced school population, where groups bring together children aged 3 to 6. Educators and teachers employed in pre-school education are graduates of the pedagogical high-schools, colleges, or a higher-education institution, and of a training course in psycho-pedagogy. The load of the kindergarten staff is one position of educator/teacher per one group or combined group of children. For some activities (foreign languages, drawing, music, and dance), higher educated teachers are employed¹¹¹.

¹¹¹ The EFA 2000 Assessment: Country Report, Romania, Unesco, Op.cit.

3.10. Childcare and pre-primary education in Slovakia

Slovakia¹¹² has the following types of pre-school establishments: kindergartens and special kindergartens with half-day, all-day, all-week or continuous care. These schools were established by the state, city or church authorities, factories, as well as co-operatives or individuals.

Conditions in kindergartens were covered by new legislation after 1990. Pre-school establishments are an inseparable part of the educational system, their pedagogical function has become stronger and they have initiated the integration of disabled children with able-bodied children. Children of five years of age and children with delayed school age are given priority in the enrolment in kindergartens .

The preparation of children for school is an integral part of pre-school education and it is provided by the state in specific ways:

- Daily, regular pre-school education lasting several years, which enriches family education, and which is the most effective form of children's preparation for school. Children develop gradually, systematically and individually, in accordance with their age, by special educational efforts on the part of kindergarten teachers.
- Preparatory classes in kindergartens providing daily preparation for school, for children aged 5-6 and for children with delayed school age. This is a one- year course, and it is compulsory for children during the year before full time schooling begins. In case there is a lack of places or there is no kindergarten in a village, preparatory classes can be established also in other suitable facilities.
- Preparatory classes combining both the direct presence of mothers in the education process in a kindergarten and home pre-school preparation. These provide intensive preparation for children one year before their school age. These are usually established in villages with no kindergarten, mostly for children of full-time mothers who can attend to kindergarten with them.

Home pre-school preparation can be undertaken in combination with preparatory classes in kindergartens . Children and their parents can strengthen the knowledge and skills which they obtained in kindergartens. Home pre-school education is introduced in accordance with teacher's instructions, educational plans and methodological materials constructed by experts employed by the regional authorities.

Kindergarten enrolment decreased between 1990 and 1998. From the 1990 enrolment, which was 216 336 children, it decreased to 167 504 in 1998, it means about 48 832 places were lost. This is the result mainly of the decrease in the whole population, but also by the lack of financial resources given by the state and by the closure of some kindergartens that previously existed in factories, or by privatisation of others. At the same time the percentage of kindergartens enrolment in 1990 (which is 84.7%) is almost identical with that of 1998 (which was 84.2%). The most evident decrease was in 1995, which was 70.9% (from 1990 it is 14.2% difference). In 1998 the percentage of kindergarten enrolment increased from 75.2 % (1996) to 84.2%. The development of kindergarten enrolments differed between regions of Slovakia. Before 1996 Slovakia was divided into 4 regions. The kindergarten enrolment varied from 64.5% in the Central Slovak region in 1995 to 100.9% in the Bratislava region in 1993. The most evident decrease in kindergarten enrolment was in 1992-1995 in two regions, in the Central Slovak region (from 73.5% in 1992 to 64.5% in 1995) and in the East Slovak

¹¹² The EFA 2000 Assessment: Country Reports, Slovakia, Unesco
http://www2.unesco.org/wef/countryreports/slovakia/rapport_2.html.

region (from 76.5% in 1992 to 67.4% in 1995). This reflects the decline in employment in those regions following the transition, the decline in material conditions and the increasing numbers of women staying at home rather than going out to work.

Among the problems of the childcare and pre-school education system indicated in the UNESCO report is that the capacities of already existing kindergartens as well as qualified teachers were not utilized. Many teachers had to either leave their schools after the schools were closed down, or they started to work in primary schools (as unqualified teachers or as supervisors in school clubs).

3.11. Childcare and pre-primary education in Slovenia

In Slovenia the number of kindergartens has slightly increased from 1995/96 to 2001/02 with the economic recovery in the country. The care and educational staff are predominantly women (Table VIII-16). In all the Central and Eastern European countries the care and education in the nurseries and kindergartens is a typical job for women.

Table VIII - 16: Kindergartens

	Institutions ¹⁾	Class units	Children		Care and educational staff	
			Total	Girls	Total	Women
1995/96	793	3500	66553	31559	6672	6555
1996/97	800	3509	65332	31161	6709	6609
1997/98	793	3468	62662	29912	6911	6821
1998/99	802	3455	62848	29226	7012	6935
1999/00	808*	3523	64151	30639	7329	7272
2000/01	814	3531	63328	30350	7163	7022
2001/02	801	3477	61803	29293	7099	6956

1) Data include independent kindergartens, kindergartens with unit, branch units of a kindergarten, kindergartens as a part of another institution, kindergarten as a part of an elementary school.

Source: Statistical Office of the Republic of Slovenia, <http://www.stat.si/>

The children in the pre-school preparatory education are more often enrolled in whole year programs than in part-time programmes. However, their numbers have declined, whilst those on part time programmes have increased (Table VIII-17).

Public nurseries and kindergartens for up to 9 hours per day are heavily subsidised in Slovenia and available for a nominal charge or free to those on social assistance. Private facilities are also provided and are likewise subsidised in order to provide a range of choice, including alternative schools. Altogether, 56.6% of pre-school children are found in these facilities.¹¹³

¹¹³ Wallace, C., "Comparative Contextual Report", HWF Project, 2004, <http://www.hwf.at>

Table VIII - 17: Pre-school preparation ²⁾

	1995/96	1996/97	1997/98	1998/99	1999/00	2000/01	2001/02
<i>Children involved in:</i>	28158	24662	23185	22987	20997	16899	14046
<i>whole-year programmes</i>	21311	18593	18225	18677	17282	14101	11861
<i>part-time programmes</i>	6847	6069	4960	4310	3695	2798	2185

2) The number of children decreased because of inclusion of children into the first grade of the nine-grade basic education.

Source: Statistical Office of the Republic of Slovenia, <http://www.stat.si/>

3.12. Childcare and pre-primary education in Turkey

According to the UNESCO¹¹⁴ report, pre-school education is a systematic process of education covering the children in the age group 0-to-72 months, compatible with their characteristics and level of development, providing an environment rich in stimulants, guiding the children's physical, mental, emotional and social development in the best way according to the cultural values of the society. The pre-school period is one in which the development of the child accelerates and can affect their development in later years.

The objectives of pre-school education, in compliance with the general objectives and fundamental principles of national education, are:

- Assuring physical, mental and emotional development of children and assuring that they gain favourable habits.
- Preparing the children for primary education.
- Creating a common environment for children who come from families in disadvantaged situation.
- To assure that the children speak Turkish well.

The following matters are targeted for developing and expanding pre-school education in our country:

- Opening kindergarten classes under the existing schools of all types and at all levels, making use of their physical capacities.
- By affecting the necessary revisions in the architectural projects for the school buildings to be constructed -- all types of schools at all levels, implementing renovations at ground floors to permit pre-school education.
- Preparing projects concerning education of children who did not benefit from pre-school education, expanding early childhood development and education and preparing television education programs for raising public awareness.
- Formation of "Multi-purpose Pre-school Education Research Centers" for developing and implementing alternative models for more economical ways of reaching down to children and families of where there is immigration and slum areas.
- Preparing package programs for developing and expanding (Development, Education and Care) the activities in early childhood care.
- Developing common legislation concerning development, care and education of the children in their period of early childhood.

¹¹⁴ The EFA 2000 Assessment: Country Reports, Turkey, http://www2.unesco.org/wef/countryreports/turkey/rapport_2.html.

The countrywide enrolment rate of pre-school for the academic year 1998-1999 is 6.9 percent, for females and males combined. The enrolment rate is 6.5 percent for females and 7.0 percent for males. But the gender-based enrolment rates do not include the children in the Mother-Child Education Programs, since gender-based statistics have not been collected in these programs.

To the number of children at the public institutions of pre-school education, the number of children at the child care centers, that have been opened at the Social Services Institution for Children Care for the purpose of providing pre-school education to children in need of care and in accordance with Article. 191, have been added. Social services are provided for a fee at day care centers opened by the Social Services Advisory Council and Social Services Institution for Children Care for the purpose of providing care to children in need of care in the 0-6 age group, preserving their physical and mental health and imparting basic values, attitudes and habits.

Child care centers and social facilities have been established at the institutions where they are needed, for providing pre-school education to children whose parents are employed at public agencies and organizations. Article 191 of Public Servants Law: 657 is as follows: "Child care centers and social facilities may be established for public servants where need and necessity is determined to exist."

The pre-school education activities of MEB General Directorate for Apprenticeship and Non-formal Education are carried out under two different programs, namely, the Mother-Child Education Program and Trainer Mothers' Education Program. The number of pupils in these programs have been entered in the column titled "others" for the number of pre-school children in the indicator. The definition and progress of these activities are briefly described below:

The purpose of the *mother-child education programs* is to support comprehensive development and growth of the child through the mother (Table VIII-18). The program is implemented by means of the courses held at the public training centers of the General Directorate for Apprenticeship and Non-formal education. Mothers of children in the 0-6 age group attend these courses, which are organized separately for mothers of children in the age groups 0-2, 2-4, and 4-6. Mothers are informed in the subjects of child care, child development, nourishment, protection from child diseases, prevention of accidents, first aid, women's reproductive health care and family planning, and parent-child relationships, in order to help the mothers become more self-confident and successful in child development and education and tackle problems more easily.

The program serves to help develop those families and children who do not have access to pre-school education services and are at risk due to their social and economic circumstances. Despite their disadvantaged environment and circumstances, the children's cognitive, social and emotional development as well as their school achievement levels improve, due to such home-based education they receive.

Research has shown that the mothers who attend these programs become more sensitive to the matter of the development of their children, they build better relationships with their children and develop higher expectations and aspirations concerning the future of their children.

This activity is important in terms of contributing to the matter of equal opportunity in education, along with its support to pre-school education.

Table VIII - 18: Statistics related to enhancing the programme for Mother-Child Education

Academic Year	Number of Provinces	The Number of Public Training Centers (HEM)	Number of Teachers	Number of Couples Trained
1993-1994	9	27	40	2,866
1994-1995	11	42	79	5,534
1995-1996	23	93	148	8,640
1996-1997	34	133	207	11,196
1997-1998	51	164	232	14,796
1998-1999	60	184	325	19,188

Trainer Mother's Education Program

The definition of data required for the indicator - *percentage of new entrants to primary grade 1 who have attended some form of organised early childhood development programme* is (a) the number of new first grade entrants having attended pre-school education and the total new first grade entrants. Because the number of children who have attended pre-school education among the new first grade entrants was not known, this indicator was built by using the number of age- five pre-school children in the academic year 1997-1998, instead of the number of children who have attended pre-school education among the new 1998 first grade entrants. Therefore this indicator is a rough indicator but it can provide an idea.

Accordingly, the countrywide percentage of children who have attended some form of pre-school program among the new first grade entrants is 13.6 percent. This percentage was determined to be 13 percent for the public institutions, and 47.4 percent for private institutions. The numbers of females and males who had received pre-school education among the new first grade entrants are equal to each other.

4. Conclusions

The childcare and education system in the New Member States and Candidate countries was subject to a number of reforms since 1990, on account of the structural changes in the economy, the rise in unemployment (especially for women), the reforms of the social security, problems with state budgets and demographic decline. For the most part, the facilities that were previously provided by factories, enterprises and the state have been taken over by local authorities.

In most of the observed countries the number of childcare and pre-school institutions and facilities decreased. These trends are more obvious for nurseries than for kindergartens and pre-school institutions. The trends of decline are observed mainly at the beginning of the transformation period. From the mid 1990s, the numbers of kindergarten places and places in institutions increased again in many countries, reflecting the upswing of the economy and the progress of socio-economic reforms.

To some extent private institutions have been expanded but their role is yet very small and except where they are publicly subsidised (like in Slovenia) they are mostly beyond the pockets of young families.

Problems exist concerning the conditions in the childcare and pre-school education institutions, as well as concerning the efficiency of staff engagement and use of facilities. In the countries under consideration, there are a range of different kinds of childcare and pre-school institutions ensuring the care, the socialisation and education of children. There are special homes for abandoned children and care and pre-school institutions for disabled children. We notice that in many countries, attendance at pre-school facilities was higher in

urban areas than in the countryside, which can lead to the reproduction of disadvantage and backwardness among children in the countryside, as was noted in the Polish report. In countries such as Romania and Latvia, the poor transport system (and lack of private transport) mean that many children cannot even get to the pre-school facilities.

The New Member States and Candidate countries adopted the European and international standards concerning the child rights and family policy. Projects of international organisations, *inter alia* UNESCO and UNICEF as well as EU programmes such as PHARE, create new opportunities for the care and education of children, including for children with special needs in these countries. New ideologies of pedagogical development have been introduced in some countries (for example, Romania) to help with child development and this is reflected in the training of teachers and supervisors.

Moreover, programmes for co-operation between the child care and education institutions have been put into place, ensuring socialisation of children and helping the women to reconcile family and working life.

Despite problems and reforms, the provision of pre-school education for children reflects the idea that women should be in the labour force and children are better cared for if they are educated in such facilities rather than left at home. The result is that in many CEEC countries, despite the economic problems, more and better child care facilities (for longer hours) are available than in most western countries (although quality is variable). One tendency, however, has been for countries to introduce child care allowances to encourage women to stay out of the workforce for the first years of the child's life and this is one reason for the decline in nursery places in countries such as Hungary and the Czech Republic.

CHAPTER IX: APPLICATION OF EU LEGISLATION IN TERMS OF EQUAL OPPORTUNITIES IN THE CONTEXT OF EUROPEAN UNION ENLARGEMENT

1. Summary of the Legislation of Equal Treatment of Women and Men

The summary of the legislation of equal treatment of women and men is prepared on the basis of the European Commission's countries' reports for the New Member States and Candidate countries¹¹⁵. Extracts of the respective reports are presented in the Annex below concerning the progress of the transposition of the legislation of equal treatment of women and men according to the European Commission's countries' reports.

The legislative issues regarding the equal treatment of women and men are part of the social policy and employment chapter of the *acquis communautaire*. Most of the New Member States have transposed almost all legislation in the field of equal treatment of women and men, and, in general, the legislative transposition is in line with the *acquis*, with the exception of Estonia.

A stipulation to be transposed in the New Member States is that the pensionable age for male and female civil servants has to be equalized upon accession, when the pension scheme constitutes a salary within the meaning of the EC Treaty and case law. As we have seen in the Paper V on social security system, the pensionable age could be origin of gender discrimination. Moreover, provisions discriminating women in employment, as well as protecting women from heavy work, night work, etc., have to be removed in a major part of the New Member States.

Finally, the administrative structure in charge of the gender equality should be strengthened, as well. In the Candidate countries progress in the field of equal treatment of men and women has taken place through the adoption of a legal framework and the setting up of respective responsible bodies.

We should bear in mind in reading these reports that "equal treatment" tends to be used in the Accession negotiations rather than "gender mainstreaming", indicating that gender issues have been marginalized in this process.¹¹⁶ Gender mainstreaming implies making sure that gender is taken into consideration in the formulation and implementation of policies and has been one of the main triumphs of EU social policy in recent years. The fact that this term has not generally been used in the Accession negotiations implies that gender issues are relegated to being of lesser importance and likely to be neglected in the Enlargement.

The majority of countries have been concerned with "transposing" gender legislation so far rather than implementing it. It is not clear that when equal opportunities exist formally in the law that this means that policies will be actually implemented and enforced. This raises questions as to the extent that the following accounts actually result in any action.

¹¹⁵ <http://europa.eu.int/comm/enlargement>

¹¹⁶ Bretherton, C. (2001). "Gender mainstreaming and EU enlargement: swimming against the tide?" *Journal of European Public Policy* 8(1): 60-81.

2. Progress of the transposition of the legislation of equal treatment of women and men according to the European Commission's countries' reports

2.1. Bulgaria¹¹⁷

In the field of equal treatment of women and men, important progress has been made with the adoption in September 2003 of the Law on Protection against Discrimination, which aims at transposing a number of key directives in this area (equal pay, equal treatment in employment, pregnant women and burden of proof). In February 2003, a Consultative Commission on equal opportunities which is, *inter alia*, supposed to draft a National Action Plan on gender equality was set up at the Ministry of Labour. In April 2003, a National Action Plan on Employment was adopted, including a section on promotion of equal opportunities for women and men.

2.2. Czech Republic¹¹⁸

The Czech Republic has transposed almost all legislation in the field of equal treatment of women and men, and, in general, the legislative transposition is in line with the *acquis*. However, the *acquis* on equal treatment in occupational social security schemes still remains to be transposed. Moreover, the pensionable age for male and female civil servants will have to be equalised upon accession, when the pension scheme constitutes pay within the meaning of the EC Treaty and case law. With regard to equal access to employment, effective sanctions against discrimination must be provided and provisions in the labour code protecting women in preventing them from work underground and physically heavy work need to be removed. It will also be necessary to introduce a compulsory period of maternity leave for pregnant workers as well as a clear clause to cover protection of workers on parental leave against dismissal. Implementing structures are largely in place, but need further strengthening.

2.3. Cyprus¹¹⁹

Cyprus has transposed all legislation in the field of equal treatment of women and men, and, in general, the legislative transposition is in line with the *acquis*. However, the pensionable age for male and female civil servants will need to be equalised upon accession, when the pension scheme constitutes pay within the meaning of the Treaty and EC case law. Moreover, the exclusion of women from certain activities in the police force and underground work should be brought in line with the *acquis*. Implementing structures are in place and have been recently strengthened.

¹¹⁷ "Regular Report on Bulgaria's progress towards accession", Chapter 13: Social policy and employment, Regular Report November 5, European Commission, 2003, p.73, <http://europa.eu.int/comm/enlargement>.

¹¹⁸ "Comprehensive monitoring report on the Czech Republic's preparations for membership", Chapter 13: Social policy and employment Regular Report -November 5, European Commission, 2003, p. 33, http://europa.eu.int/comm/enlargement/report_2003/pdf/cmr_cz_final.pdf.

¹¹⁹ "Comprehensive monitoring report on Malta's preparations for membership", Chapter 13: Social policy and employment Regular Report -November 5, European Commission, 2003, p. 31-32.

2.4. Estonia¹²⁰

Estonia has not transposed legislation in the field of equal treatment of women and men. Alignment with the *acquis* is scheduled to be achieved with the adoption of the Gender Equality and Equal Treatment Act and the Employment Contract Act. The adoption of the Gender Equality and Equal Treatment Act is foreseen to also provide for an institutional framework for ensuring its effective implementation. There are substantial delays compared to the original timetable for transposition, which need to be addressed urgently. Implementing structures remain to be put in place.

2.5. Hungary¹²¹

Hungary has adopted all the necessary legislation in the field of equal treatment of women and men, and, in general, the legislative transposition is in line with the *acquis*. However, the pensionable age for male and female civil servants will have to be equalised upon accession, when the pension scheme constitutes pay within the meaning of the Treaty and EC case law. Moreover, legislation concerning the protection of women in employment, yet leading to their discrimination, should be removed. Implementing structures need to be further strengthened. In this respect, the creation, in May 2003, of a new government position of a Minister without portfolio in charge of equal opportunities is a welcome development.

2.6. Latvia¹²²

Latvia has to a large extent transposed the *acquis* in the field of equal treatment of women and men, although some legal adjustments will still be needed before accession, such as the removal of overprotection of women against night work. The pensionable age for male and female civil servants will have to be equalised upon accession, when the pension scheme constitutes pay within the meaning of the Treaty and EC case law. Implementing structures are largely in place, especially since the establishment of a Gender Equality Council, a co-ordination and advisory body. However, further sustained efforts are needed to enforce efficient co-ordination of gender equality measures.

2.7. Lithuania¹²³

Lithuania has transposed most of the legislation in the field of equal treatment of women and men, and in general, the legislative transposition is in line with the *acquis*.

¹²⁰ “Comprehensive monitoring report on Estonia’s preparations for membership”, Chapter 13: Social policy and employment Regular Report -November 5, European Commission, 2003, p. 33.

¹²¹ “Comprehensive monitoring report on Hungary’s preparations for membership”, Chapter 13: Social policy and employment Regular Report -November 5, European Commission, 2003, p. 34.

¹²² “Comprehensive monitoring report on Latvia’s preparations for membership”, Chapter 13: Social policy and employment Regular Report -November 5, European Commission, 2003, p.34.

¹²³ “Comprehensive monitoring report on Lithuania’s preparations for membership”, Chapter 13: Social policy and employment Regular Report -November 5, European Commission, 2003, p.33.

However, requirements on parental leave (minimum period of three months) and the burden of proof remain to be complied with before accession. The pensionable age for male and female civil servants will have to be equalised upon accession, when the pension scheme constitutes pay within the meaning of the Treaty and EC case law. Implementing structures are in place and are functioning well.

2.8. Malta¹²⁴

In the field of equal treatment of women and men, further alignment is still needed on equal treatment in matters of occupational social security schemes. The pensionable age for male and female civil servants will have to be equalised upon accession, when the pension scheme constitutes pay within the meaning of the Treaty and EC case law. Implementing structures should be put in place.

2.9. Poland¹²⁵

In the field of equal treatment of women and men, Poland has transposed most of the legislation. Further legal adjustments are necessary in the area of equal treatment of women and men in employment and in social security, such as the removal of provisions aiming at protection of women in employment, yet leading to their discrimination. The pensionable age for male and female civil servants will have to be equalised upon accession, when the pension scheme constitutes pay within the meaning of the Treaty and EC case law. Implementing structures are largely in place, but administrative capacity needs further strengthening, particularly at regional and local levels. At the central level, the Office of the Plenipotentiary for Equal Status of Women and Men which has been established in 2001 needs to be reinforced both in terms of competencies and capacities.

2.10. Romania¹²⁶

Some progress can be recorded in the field of equal treatment of women and men. The directive on the burden of proof has been transposed by the Labour Code. The Labour Code also includes some measures on night work during pregnancy although more detailed provisions are required with regard to maternity protection. Some progress has been achieved with the implementation of the National Plan for Equal Opportunities through the establishment of a national training programme on gender related regulations for the Ministry of Labour's staff in central and territorial departments.

¹²⁴ "Comprehensive monitoring report on Malta's preparations for membership", Chapter 13: Social policy and employment Regular Report -November 5, European Commission, 2003, p.32.

¹²⁵ "Comprehensive monitoring report on Poland's preparations for membership", Chapter 13: Social policy and employment Regular Report -November 5, European Commission, 2003, p.39.

¹²⁶ "Regular Report on Romania's progress towards accession", Chapter 13: Social policy and employment, Regular Report November 5, European Commission, 2003, p.76.

2.11. Slovakia¹²⁷

Slovakia has transposed all the necessary legislation in the field of equal treatment of women and men. However, some legal adjustments are necessary to achieve full alignment. The pensionable age for male and female civil servants will have to be equalised upon accession, when the pension scheme constitutes pay within the meaning of the Treaty and EC case law. Furthermore, some adjustments to the Labour Code will be necessary as regards access to employment as well as provisions concerning the protection of women in employment, yet leading to their discrimination. Implementing structures are in place, but further strengthening is needed in order to ensure enforcement of the legislation.

2.12. Slovenia¹²⁸

Slovenia has transposed all legislation in the field of equal treatment of women and men and the legislative transposition is in line with the *acquis*. The pensionable age for male and female civil servants will need to be equalised upon accession, when the pension scheme constitutes pay within the meaning of the Treaty and EC case law. The necessary implementing structures are in place. A specific implementing structure for the hearing of cases of alleged unequal treatment of men and women and the issuing of opinions has been established within the Office for Equal Opportunities.

2.13. Turkey¹²⁹

As regards equal treatment of women and men, the new Labour Law introduces some provisions which are partly in compliance with the Directives on equal pay, equal treatment in employment and the burden of proof. It accepts the principle of equal treatment between persons irrespective of sex, as well as racial and ethnic origin, religion and ideology. It also includes provisions for maternity leave.

¹²⁷ “Comprehensive monitoring report on Slovakia’s preparations for membership”, Chapter 13: Social policy and employment Regular Report -November 5, European Commission, p.32.

¹²⁸ “Comprehensive monitoring report on Slovenia’s preparations for membership” , Chapter 13: Social policy and employment Regular Report -November 5, European Commission, 2003, p.30.

¹²⁹ “Regular Report on Turkey’s progress towards accession”, Chapter 13: Social policy and employment, Regular Report November 5, European Commission, 2003, p.87.

CHAPTER X: CONCLUSIONS AND POLICY RECOMMENDATIONS

In this report we have drawn together information about a range of issues affecting women in the Enlargement countries: demography and family, education and labour market, health, social protection, child care, political representation and general attitudes to gender roles. We have also summarised the responses of these countries to the gender issues raised by the Accession process. Coverage of many of these issues is uneven between countries and it is difficult to find out in a systematic way what happens at local and regional levels. We are limited by the data that we have available at present and much of this is rather recently compiled.

The Enlargement process means that large inequalities now exist within the EU, both between countries and within countries, that might bring challenges for structural adjustment and for the European social model. Some regions in the New Member States and Candidate countries are little different from Western Europe (such regions would be Prague, Budapest, Ljubljana) and these have grown as poles of prosperity in recent years. Other regions are very backward and have even become poorer since the transition as services have collapsed and the redistributive systems associated with the communist era have been abandoned. Such is the case, for example, in parts of Romania and Bulgaria as well as Latvia. However, all countries have become more internally polarised as the process of change has fallen unevenly. This means that the situation of women can be very varied not only between but within each country.

However, countries can be divided into several groups for purposes of comparison. First we have the Mediterranean countries, Malta and Cyprus, which have a strong family culture in which women are mainly seen as being at home. However, the living conditions are rather good in these countries, and have been improving over the last ten years, so we could see them as not so different to other Mediterranean welfare states. However, in these countries the participation of women in education and work is something that should be encouraged if they are to meet the Lisbon targets.

Secondly, we have the re-institutionalising and improving transition countries, where living conditions have picked up since the mid 1990s and the process of reform is well advanced. They resemble more the Western European models of social policy and coverage is mostly universal (the exception here might be Poland). These would include: the Czech Republic, Hungary, Slovenia, Slovakia and possibly Poland. The overall positive situation in these countries hides the fact that there are increasing regional disparities.

Thirdly, we have the Baltic States, which have taken longer to recover with more serious disadvantages, but are now going in the same direction as the countries mentioned above. Among them, Estonia has been rather far ahead and Latvia rather lagging.

Fourthly, we have the Candidate countries of South Eastern Europe, Romania and Bulgaria, where reforms have been slow and economic restructuring has caused devastating problems. In these countries there has been de-modernisation in some areas as rural populations return to peasant style agricultural subsistence. They have abandoned their tractors for horses and carts. Many people fall out of coverage of welfare policy because there are not enough funds to respond to the many problems of poverty.

Finally, there is Turkey, where traditional attitudes to women still prevail, but where the process of development has been very fast in the last 15 years.

Within countries we see differences in living conditions and income emerging more and more strongly and this affects the life-chances of women. At the lowest level, there is a disadvantaged group with poor education and poor skills, but most of these are men. On the other hand the high youth unemployment that particularly affects younger women along with lack of social benefits means that many young women are left without any income and without any prospects. For them, emigration starts to seem a more promising option, especially if they have some skills and grasp of language. The many hundreds of thousands of young women who become the victims of trafficking each year is one tragic outcome. At the upper level, the newly emerging group of managers and entrepreneurs are likely to be among the wealthier members of society, but women are under-represented in this group. Low levels of income had negative consequences for health. The exclusion of women from both the economic and political elite perhaps reflects patterns in most parts of the world, but seems to be rather strongly entrenched in Eastern and Central Europe and is reinforced by conservative attitudes towards women's participation in public life.

The difference with conventional western patriarchal attitudes is that in Eastern and Central Europe, women are expected to be economic providers in the household and this expectation is also reflected in their entitlements to benefits, pensions and social security

The high levels of education found among women in Eastern and Central Europe along with their propensity towards life long learning mean that this situation is not inevitable. Although women are less likely to be found in Science and Technology, they potentially have good opportunities for professional realisation. The fact that the situation in the labour market continues to be gender segregated, both horizontally and vertically, implies that the problem of the under-performance of women after they leave education has different roots.

The demographic changes and high mortality among men, mean that there will be aging populations that are increasingly female in future. Since fewer children are being born and lifestyles have become more individualised, the strong intergenerational bonds of family support may come under threat, although until now, the family has been a major source of social security in uncertain and risky times.

The trends related to the family formation in the countries from Central and Eastern Europe are becoming similar those observed in the Western European countries – postponement in family formation and in child bearing, more consensual unions, a drop in marriages, a rising number of children born out of marriage, etc.. These trends are both a cause and consequence of the changes in the situation of women for whom early marriage and children are no longer attractive as they were in the past. This is reflected in both their attitudes and their behaviour. The question remains therefore if this is really a “birth” or “fertility” strike by young women or whether they are simply postponing family formation until later in the life course. The processes of population ageing and changes in the age structure are likely to lead to structural problems in the fiscal, institutional and social security systems relying on a balanced age structure of the population. This applies to childcare and the educational system, but also to the public pension system

On the one hand during the period of socio-economic reforms the shortage of social benefits related to maternal leave, the slashing family targeted social policies and the childcare facilities in most countries may also have provoked the decline in fertility rates and respectively in the birth rates in the transformation economies. On the other hand, childcare programmes have also been cut in response to the decline in numbers and there are often more places available than are taken up. However, social protection has remained relatively high in most of the transition countries and populations expect high levels of social support.

New policies and benefits have been introduced in the more advanced reform countries, including pro-natalist family policies, but in the less advanced countries, services have simply been eroded and less and less people are covered. It will be interesting to see if the reconfigured child care policies in countries such as the Czech Republic, Hungary and Slovenia, where it is still higher than in most Western countries, will help to reverse this trend.

Not only the division of labour but attitudes towards women remain rather conservative. This means that women who take on a family can expect to do a great deal more additional work, leading perhaps to issues of work-family balance (although this is not perceived as a problem as such). It may however, be in the background influencing decisions to start families.

However, the number of women participating in the employment market is lower than that of men in the New Member States and Candidate countries, although it is higher than in the EU 15 (in terms of prime aged labour force), with some exceptions. The employment gap between genders exceeds the EU 15 average in Malta, Turkey and Cyprus, due mostly to the traditional family culture in these countries. Among the New Member States of Central and Eastern Europe, the gender difference in employment rates is not so big because of the cultural expectation that should work full time in the labour market. A positive trend is that the gap in employment rates between genders is decreasing during the period from 1996 to 2002 in the EU 15 and the Acceding countries as a whole.

In the new professions, women are under-represented. There are less of them in high level professional positions as *general managers* and *business proprietors* in almost all countries. The number of women full professors is lower than men everywhere, although women are relatively quite well represented in this sector in the Central and Eastern European countries in comparison to the EU 15. Although the number of part time jobs has been growing, this is not a main option for women as it is in many EU countries.

Therefore, policies to promote women's participation in economic life and in science are required in order to allow the development of professional careers for women in this sector. The reduction of occupational segregation is an important aspect of equal opportunities in employment policies in the EU 15 and the future EU Member States according to the European Council of Lisbon

Unemployment is a key problem of the transition economies. The female unemployment rate is higher than those of men according to the recent data in both the EU 15 and the New Member States as a whole. Similar to the trend of unemployment rate, the long-term unemployment rate in the EU 15 and New Member States as a whole is higher for females than for males. Thus, the vulnerability to unemployment for women is greater than for men and measures overcoming the unemployment and especially the female unemployment should be undertaken.

The gender pay gap in the Enlargement countries is generally higher than the EU average gender pay gap can be observed. Closing this gap is the objective of policies on a national and an EU level.

Statistics of mortality reflect quite well the progress of transition in various countries and we see in general an improvement in all countries, although this was delayed until the end of the 1990s in the Baltic States, Romania and Bulgaria. On most indicators, men seem to be more affected by mortality than women. Men thus seem to be more sensitive to the impact of transition than are women and this is the case for heart and circulatory diseases as well as for

infectious diseases and even suicide. This is only the case in the post-communist countries. In the EU 15 as well as in Cyprus, Malta and Turkey, the male and female life expectancy is increasing from 1980 afterwards. In the Mediterranean countries is found the smallest difference between female and male life expectancy at birth as well even lower than the EU 15 average

A source of concern is the increasing mortality caused by female-specific diseases in many New Member States and Candidate countries in comparison with the decrease of this mortality in the EU 15. For example, the level and dynamics of the SDR caused by breast cancer in the New Member States and Candidate countries shows an increase or stabilisation on a high level in many countries. The mortality caused by cancer of the cervix has also a high level and shows a trend towards increase in the most of the New Member States and Candidate countries. This probably reflects the lack of preventative measures and since it is something that has been successfully brought down in the EU, this expertise could perhaps be passed on to the New Member States.

In general the health situation of men and women in the Central European New Member States – Poland, Hungary, Czech Republic, Slovakia and Slovenia – is generally better and improving more than in the Baltic States and Romania and Bulgaria. In the latter group of countries there has been an escalation of certain diseases associated with poverty and failure of the health services, such as tuberculosis. Women express less satisfaction with their health, even though they have longer life expectancy than men. This paradoxical result can be explained by the fact that although men die younger, women are more often sick. This is likely to increase in the future with larger numbers of older women.

The childcare and education system in the New Member States and Candidate countries was subject to a number of reforms since 1990, on account of the structural changes in the economy, the rise in unemployment (especially for women), the reforms of the social security, problems with state budgets and demographic decline. For the most part, the facilities that were previously provided by factories, enterprises and the state have been taken over by local authorities. In most of the observed countries the number of childcare and pre-school institutions and facilities decreased. These trends are more obvious for nurseries than for kindergartens and pre-school institutions. The trends of decline are observed mainly at the beginning of the transformation period. From the mid 1990s, the numbers of kindergarten places and places in institutions increased again in many countries, reflecting the upswing of the economy and the progress of socio-economic reforms. To some extent private institutions have been expanded but their role is yet very small and except where they are publicly subsidised (like in Slovenia) they are mostly beyond the pockets of young families.

Problems exist concerning the conditions in the childcare and pre-school education institutions, as well as concerning the efficiency of staff engagement and use of facilities. In the countries under consideration, there are a range of different kinds of childcare and pre-school institutions ensuring the care, the socialisation and education of children. There are special homes for abandoned children and care and pre-school institutions for disabled children. We notice that in many countries, attendance at pre-school facilities was higher in urban areas than in the countryside, which can lead to the reproduction of disadvantage and backwardness among children in the countryside, as was noted in the Polish report. In countries such as Romania and Latvia, the poor transport system (and lack of private transport) mean that many children cannot even get to the pre-school facilities.

The New Member States and Candidate countries adopted the European and international standards concerning the child rights and family policy. Projects of international

organisations, *inter alia* UNESCO and UNICEF as well as EU programmes such as PHARE, create new opportunities for the care and education of children, including for children with special needs in these countries. New ideologies of pedagogical development have been introduced in some countries (for example, Romania) to help with child development and this is reflected in the training of teachers and supervisors.

Despite problems and reforms, the provision of pre-school education for children reflects the idea that women should be in the labour force and children are better cared for if they are educated in such facilities rather than left at home. The result is that in many CEEC countries, despite the economic problems, more and better child care facilities (for longer hours) are available than in most western countries (although quality is variable). One tendency, however, has been for countries to introduce child care allowances to encourage women to stay out of the workforce for the first years of the child's life and this is one reason for the decline in nursery places in countries such as Hungary and the Czech Republic. Hence, the tendency is for younger children to be cared for at home, but older children (from age 3 or 4) to be found in kindergartens, enabling the reconciliation of work and family life.

The social protection systems in the New Member States and Candidate countries are in process of transformation in response to the changing socio-economic conditions and to the negative demographic trends. The reforms concern mainly the partial privatisation of the social protection system, the relation of the benefits to the income, the enlargement of the coverage of the insured persons with the self-employed persons, the introduction of the three pillar pension system encouraging the accumulation of the personal savings for supplementary pensions, etc. The reforms of the social security systems mainly in the transition economies affect the men and women in different ways. For this reason the gender dimensions of the social security policy have to be taken into account. We have shown that a contradiction exists between the introduction of the means-tested family benefits (instead of employment related benefits) and the policy of integration of women in the labour market after the motherhood. However, family benefits tend often to be universal in nature.

The welfare states of Eastern and Central Europe have been developed in the context of economic crisis, fiscal decline and the proliferation of social problems requiring welfare support. Nevertheless, relatively strong social protection systems with universal coverage of the population are evolving in countries such as the Czech Republic, Slovenia, Slovakia and Hungary often based upon social insurance systems. However, the lower wages, lower professional positions and vulnerability to unemployment means that women and men benefit in different ways. In particular, the reform of the pensions system, providing a state minimum topped up with occupational and private pensions, will tend to reproduce the inequalities suffered by women in the labour market also in later life. In other countries the ideal of universal welfare protection is undermined by the fact that many people fall out of coverage.

The role of women as workers is increasingly undermined by their role as parents or carers, since an increasingly conservative model of family care is becoming predominant, especially in the context of the child raising allowance and this is reflected in the rise of a family-conservative political rhetoric in many countries. The undermining of social benefits for mothers in the early transition period may have led to a "birth strike" or the desire to postpone family formation in the New Member States and Candidate countries.

Hence, we would argue that despite the rather good levels of social support that still exist in the New Member States and Candidate Countries, the situation of women continues to be an unequal one within the social protection systems. The role of women as workers has continued partly thanks to the supportive role of the extended family, especially grandparents.

The role of grandparents has been important in all of the countries under consideration, even those with generous and universal welfare states. However, in those countries where the welfare state is unable to provide complete coverage (such as Bulgaria and Romania) we see a reversion to a family based model of welfare that might be expected to intensify in future.

The representation of women in national politics in the New Member States and Candidate Countries is generally lower than in the EU 15 countries. However, in many countries it appears to be increasing over the 1990s and 2000s, although small numbers and limited time horizons make it difficult to draw firm conclusions. Various explanations have been put forward, including religion, levels of modernisation and the role of the feminist movement. None of these seem to be very adequate for explaining the representation of women in senior political positions in Central and Eastern Europe although they are better in explaining the representation of women in parliament in general. Women are especially under-represented in senior decision making on the economy, but are better represented in basic government functions, infrastructure and socio-cultural fields. Considering the situation country-by-country we find that women are no more likely to be active in local level politics than in national level politics, although there are some exceptions (Malta, Hungary, Slovenia). In many countries the promotion of women's representation is being addressed and although a quota system is seen as the solution in Malta and in Cyprus, this is not proposed in CEE countries because of the associations with the past.

The evidence suggests that people in CEE countries are more conservative and anti-egalitarian in their attitudes to gender roles than those in Western Europe. This is despite the experience of decades of egalitarian labour market and education policies and quota systems of political representation to ensure the participation of women. The gender role attitudes may reflect unreconstructed values that have persisted from an earlier time or they may represent a reaction to the forced gender egalitarianism of the previous epoch. They point to an underlying value system that was at odds with the dominant communist ideology, but also more "old fashioned" than that prevailing in Western Europe. However, those questions which tapped the attitudes to working mothers and spouses found more sympathy in CEE countries, where there was a tradition of dual earner families. The support for working mothers however, seems to have grown over the last ten years quite substantially in both Eastern and Western Europe.

Slovenia can be seen as an example of a New Member State where gender policies have been rather successful. In addition to having comprehensive child care facilities (with private provision being subsidised in addition to state provision), we find in Slovenia the best levels of health and education for women, good integration into the labour market, relatively good representation in politics and good performance on a range of indicators. Of course Slovenia is advantaged in being a wealthy and rather socially homogenous country. However, it is an indication of how the post-communist transformation (including civil war in the case of this country) need not necessarily lead to a deterioration in the situation of women.

The Enlargement of the European Union to include the 10 new member states is not necessarily positive for the movement towards gender equity in the EU. These countries embody conservative family ideals that have been reinforced through the process of democratisation. The Mediterranean Enlargement countries had traditional Southern gender roles in any case, but the post-communist countries also embody conservative ideas of women's roles as carers, at the same time as endorsing their full time participation in the labour market. Some authors have pointed out that the whole issue of gender can lead to misunderstandings in the Enlargement process when the egalitarian ideals in Western Europe are not matched in Eastern Europe. Thus ECE legislators and intellectuals do not see gender

issues as being important ones for them¹³⁰ and the feminist movements that might have foregrounded such issues are weak. Hence, gender mainstreaming has been left off the agenda in the Accession process and equality issues until now have been mainly the concern of “transposing” European legislation. It is not clear to what extent directives will be actually implemented and the Open Method of Co-ordination leaves considerable room for manoeuvre.

Some have predicted an overall movement of change against gender equity with the Enlargement as a new group of civil servants, lobbyists and MEPs move into power for whom these things are of no great importance, although they also bring with them principles of a strong welfare state which can indirectly support women. Thus, we can expect a shift in the character of the “European Social Model”.

Policy Recommendations:

Employment/Education

In the field of employment the good educational levels of women is not reflected in their labour market situation. There should be measures to promote the situation of women in the labour market and to overcome the gender pay gap which is higher than the European average. In particular measures are needed to bring women into Science and Technology and into the new professions of managers and entrepreneurs/self employed.

Measures to reduce female unemployment and bring younger women into the workforce should also be considered

Reconciliation of work and family life

The birth rates often reflect the extent of childcare and social support available to women that can make the decision to work or have a family compatible. Affordable child care is therefore an important aspect of this reconciliation and it is evident for example in Slovenia where the birth rate is the highest. The implementation of EU legislation protecting the rights of pregnant women may help in this respect.

Health

Women in Enlargement countries are dying prematurely, often from preventable causes. Promoting changes in lifestyle is often more effective among women along with screening programmes for cervical and breast cancer.

Politics

The under-representation of women in politics goes uncontested because of the weakness of feminist movements and women’s lobbies in the enlargement countries. The implementation of gender equity measures therefore needs to be monitored by the EU so that their implementation is ensured rather than only existing on paper.

Further information and research

This report is based upon existing information about women in the Enlargement process. This information is relatively recent in origin, so long term trends are not yet discernible. The integration of the 10 new member countries will provide more and better sources of information, but unless the gender issue is kept alive, indicators of this kind will not necessarily be collected.

¹³⁰ Watson, P. (2000). "Politics, policy and identity: EU eastern enlargement and East-West differences." *Journal of European Public Policy* 7(3): 369-84.

Research Report

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