

**POVERTY AND WELFARE TRENDS IN LATVIA
OVER THE 1990S**

Country Paper

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The opinions expressed are those of the authors and do not necessarily reflect the policies or views of UNICEF.



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Explanation of symbols

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- ... Data not available or too uncertain for presentation

Preface

Ten years have already passed since the Latvian nation declared its wish to restore independence. It was with deep faith and conviction the community looked ahead in the future at the end of the 1980s and the very beginning of the 1990s. During these ten years we have passed through a complex period in the country's history, namely through the transition from one economic formation to another. Latvia has made considerable progress in the creation of an economic system that would suit the independent state in its transition to a market economy.

Economic changes have made a deep impact on the daily life of every inhabitant and on the material wellbeing of the largest part of the population. As a result of this fundamental transformation part of the population enjoy the fruits of the economic progress and make use of advantages offered by the new economic system while the other part are confronting unemployment and poverty but the third group must endure day-to-day uncertainty and instability losing confidence in the future

A few years have passed since under the framework of the UNICEF project the Central Statistical Bureau started to focus its attention on the problems of children's rights protection and child development. The majority of these problems concern separate groups of children such as disabled children, orphaned children or children growing in a single parent family or in families with many children. The analytical report examines changes that have taken place in the last 10 years in the three most relevant dimensions – health, education and welfare, with particular emphasis laid on vulnerable groups of children.

Part I

POPULATION

Economic and social changes in Latvia have deeply influenced the population structure and family stability; a rise in emigration was also observed during a number of recent years. The situation on the whole can be described as depopulation. Changes in the socio-economic factors in the 1990s have also created substantial alterations in the criteria of human values and opinions that directly influence the attitude toward the family, its role and significance in the life of society and an individual. The attitude of society to the family has undergone dramatic changes and young people postpone family formation and birth of their children to some later time.

Demographic situation in Latvia

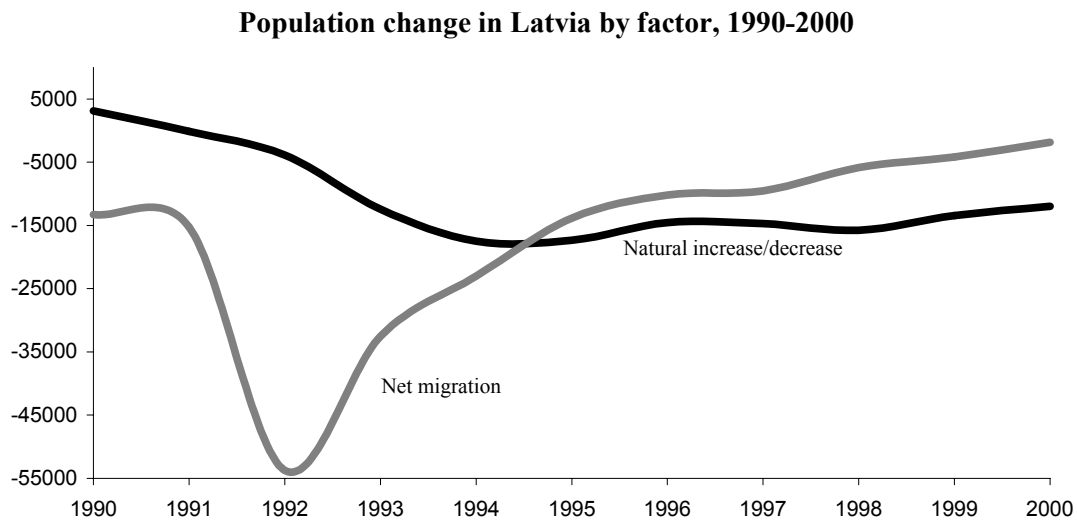
The demographic situation in Latvia may still be assessed as unfavourable. Since 1991 the natural increase of population has been negative showing an excess of deaths over births. This trend continued during the subsequent years with the highest negative natural increase in 1994 when deaths outnumbered births by 17.5 thousand. In 2000 the number of deaths exceeded the number of births by 11.9 thsd.

Over the period of the last decade the direction of long-term migration flows changed essentially and emigration grew rather rapidly exceeding immigration flows several times. In this period 43 thousand people arrived in Latvia but 213 thousands departed from it.

Over the period from 1991 to 2000, due to the natural increase with minus sign and emigration, the number of population in the country decreased by 292 thousand. At the beginning of 2001 the population stood at 2 million and 366 thousand.

The chart below illustrates population change in Latvia in the period between 1990 to 2000.

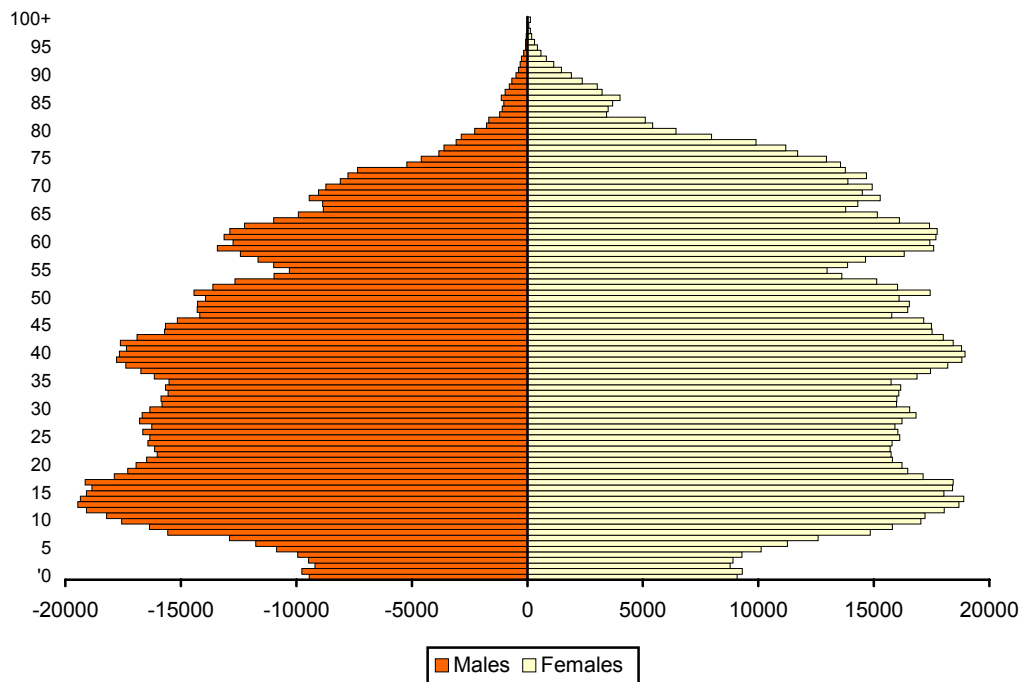
Figure 1.1



46% of Latvia's population are men and 54% – women. In recent years the percentage of women has increased from 53.4% in 1991 to 54.0% in 2001. At the age under 30 years men outnumber women but in the further age groups the number of women increases rapidly reaching 70% of the total population in the age group over 70 years.

Figure 1.2

Composition of population of Latvia by age and sex, at the beginning 2001



The proportion of children and adolescents (0-14 years) to the total number of population went down from 21.5 % in the beginning of 1990 to 17.3 % in the beginning of 2001; the number of population aged 60 and over increased in this period from 17.8 % to 21.5 %.

The demographic burden of working-age population (the number of children and pension-age population per 1000 working-age population) started to decrease lately. Partly this can be explained by the rise in the retirement age for both males and females.

The demographic burden mainly decreases under the influence of the decline in the number of younger generation population, while the impact of elderly, above working age, population actually did not change. This is testified by concrete figures. In the beginning of 1991 the demographic burden per every 1000 working-age population was 78 persons, while in the beginning of 2000 it was 658. These changes are due to the decrease of population aged 0-14 per 1000 population of working ages from 406 to 286 or by 29.6%. The number of pension-age population per 1000 working-age population in the beginning of 2001 was 372 compared to 374 in the beginning of 1991.

Number of births

In 2000, 20248 children were born in Latvia, by 21.9 thousand or 2.1 times less than in 1987, the peak year in the whole post-war period. In 2000, the birth rate in the country increased by 4.4 %. In 1999 it grew more rapidly - by 5.4% compared with 1998.

An analysis of the dynamics of birth rates in the period between 1990 to 1998 reveals a continuous fall in the level of natality both in urban and rural areas, but in 1999 this trend changed. The age - specific fertility rate (the number of live births per 1000 women aged 15-49 years) in the next table confirms this trend.

Table 1.1
Specific fertility rates, 1990-2000

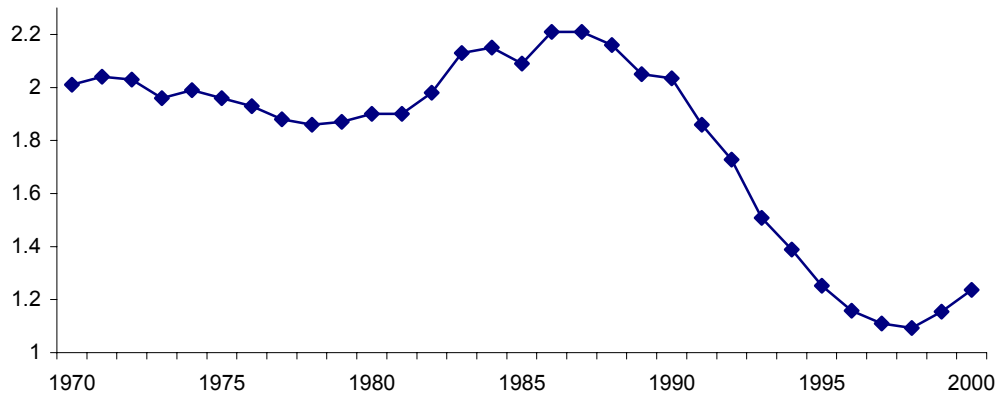
	Latvia	Urban areas	Rural areas
1990	58.52	50.71	81.34
1991	53.92	46.87	74.35
1992	49.97	42.13	71.00
1993	43.16	35.36	63.33
1994	39.57	33.04	57.04
1995	35.44	30.08	49.68
1996	32.53	27.38	46.16
1997	31.02	26.60	42.66
1998	30.36	25.85	42.13
1999	31.99	27.65	43.14
2000	34.19	30.22	43.97

The total fertility rate that fell dramatically in the 1990s is a clear evidence of change in the birth rate. Although in the 1970s and 1980s a woman had on average from 1.9 to 2.2 children, this rate in 1998 was only 1.1 and in the year 2000 – 1.24 (the figure below shows changes in the total fertility rate in the period between 1970 and 2000).

In recent years the percentage of second and third child in the family is growing and this indicates that families are becoming larger.

Figure 1.3

Total fertility rate in Latvia, 1970-2000



One of the reasons affecting the level of natality is the declining number of females in the fertile age (15-49 years), especially in the age group 20-29 that has the highest fertility rates. Since 1990 until 2001 the number of females in the age group 20-29 has decreased by 30.4 thousand, and the percentage of this age group in the total number of females in the fertile age has fallen from 29.3 % to 27.1 %.

About half of all new - born, 49.6% were born as the first child in the family. Second live births constituted 32 % of the total live births and the third - 10.8 %. The situation in 1990 was as follows: second births constituted 32.8 % and third births - 12.7 % of the total live births.

Induced abortions have a considerable impact on the birth rate. There were 17,2 thsd abortions in 2000. There were 85 abortions per 100 live births. Over the period of the latest ten years the number of induced abortions has decreased by 56 % but the number of abortions per 100 births only by 24 %.

Beginning in 1995, the number of induced abortions in Latvia is gradually decreasing. In 2000, there were on average 29 induced abortions per 1000 females at the age of 15-49 years. The fact that the number of induced abortions among underage persons has decreased in recent years is also a positive sign.

Table 1.2

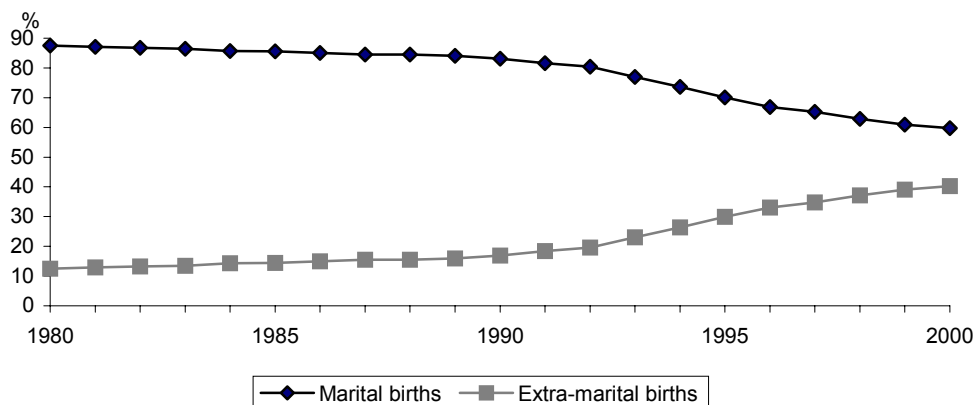
Rate of deliveries to the number of induced abortions

1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
0.89	0.92	0.86	0.91	0.83	0.81	0.86	0.92	1.07	1.17

Birth rates for women outside wedlock are still rising. In the last year, there were 40.3 % extramarital births on average in the country (see figure below).

Figure 1.4

Live births in Latvia by marital status of parents, 1980-2000 (per cent to total number of live births)



Marriage and divorce

During the last years substantial changes have occurred in family formation and marriage dissolution. The absolute and relative indicators of contracted marriages have declined. In 2000, 9211 marriages were recorded in Latvia, 14.2 thsd or 2.5 times less than in 1990.

Approximately 60 % of the marriages were celebrated at the age of 20-29 years. With the marrying intensity going down, the average age upon entering a marriage is rising. The table below shows changes in the average age of men and women entering their first marriage.

Table 1.3

Average age at the first marriage in Latvia, 1990-2000

	Males	Females		Males	Females
1990	24.0	22.2	1996	25.1	23.2
1991	23.9	22.2	1997	25.7	23.6
1992	24.0	22.4	1998	26.0	24.0
1993	24.3	22.5	1999	26.2	24.2
1994	24.5	22.5	2000	26.4	24.4
1995	24.8	22.8			

The total marriage rate (number of marriages per 1000 inhabitants) decreased from 8.9 marriages in 1990 to 3.9 in 1999, that is, almost 2.3 times.

The marriage rate showing the average number of contracted marriages in the respective generation during its lifetime has decreased from about 1.0 to 0.4. Currently roughly a half of the population of the respective generation enter a registered marriage.

In 2000, 6134 marriages were dissolved in Latvia. The divorce rate per 1000 population was 2.6 in comparison to 4.0 in 1990. Of all the dissolved marriages, 4090 or 67 % were families with underage children. The following table shows the number of under-age children in these families.

Table 1.4

Divorces by number of common under-age children, 1990 and 1995-2000

Year	Number of divorces	Of which with common under-age children		Number of children in divorced families	Average number of children per family
		Total	Per cent to total number of divorces		
1990	10783	6669	62	9556	1.4
1995	7821	5289	68	7653	1.4
1996	6051	3981	66	5599	1.4
1997	6103	4112	67	5784	1.4
1998	6211	4046	65	5600	1.4
1999	6010	4034	67	5537	1.4
2000	6134	4090	67	5689	1.4

Approximately half of marriages were dissolved after 11 years of living together. Over the past years a slight rise could be seen in the average duration of a marriage. In 1990, the average duration of a marriage until the moment of separation was 8 years but in 2000 it was already 12 years.

Migration

Due to the predominance of emigration over immigration, resident population in Latvia decreased by 1.8 thousand in 2000 compared to 4.2 thousand in 1999.

In comparison with 1999, long-term emigration declined by 42 % in 2000. Immigration in Latvia from other countries decreased by 10%.

As a result of migration in 2000, the number of persons with higher education decreased by 266, with secondary specialised - by 405, with general secondary - by 490, with basic or below basic education - by 705.

The reasons behind the change of permanent residence in 2000 were as follows: children coming back to live with parents (32.0 %), restitution of house ownership (13.4 %), studies (11.2 %), coming to live with husband/wife (7.9 %), subtenant's contract (7.5 %), parents to live with children (3.7 %), change of jobs (3.6 %), obtaining a new flat (3.0 %), exchange of flats (1.6 %), and other motives (16.1 %).

As a result of emigration in 2000, the number of non-citizens in Latvia decreased by 1.6 thsd persons compared with 1.3 thsd persons in 1999.

In the period 1998 – 2000, 7 persons in Latvia were granted the refugee status.

Part II

EDUCATION

The Law on Education (1991) was one of the first laws adopted after the restoration of independence. It introduced a number of substantial changes and oriented education in Latvia in the direction many educational systems are currently developing in Europe and beyond. The priority today is to harmonise the educational system of Latvia with those of the EU countries. The government must ensure such quality of education that would create conditions for the development of an educated society and would allow the country's population to compete on the labour market in Latvia and world-wide.

Pre-school education

Pre-school education differs from all other educational phases in that the child gains this level of education both in the family and at school. Pre-schools, just like the family, perform childcare and educating functions. Pre-schools cannot replace the family, but they do give parents, especially the mother, an opportunity to combine childcare and education with a job or business. Salaries are low in our country and child support is negligible and it is impossible to support a family on one income.

During the 1990s, the number of pre-schools has decreased and enrolment has dropped off. In 1990 111.5 thousand children were enrolled in pre-schools, in 1993 the number was down to 60.5 thousand and during the last few years enrolment has been around 60 thousand.

Table 2.1

Pre-school establishments							
	1990	1995	1996	1997	1998	1999	2000
Number of pre-school establishments	1123	608	611	598	586	573	561
Enrolment, total, thsds	111.5	72.8	72.3	68.4	66.1	65.1	61.8
Enrolment in pre-school establishments at the age of 3-6 years as per cent of the total number of children in this age group	45	47	51	52	56	64	63

This trend has been especially noticeable in rural areas. There are several demographic and economic factors that account for this trend. As a result of the decrease in the birthrate, the number of pre-school age children has decreased, the pre-school funding structures have changed, the government no longer covers all expenses and families have to cover the costs themselves. In the case of parents working, families can choose to take their child to a kindergarten facility or entrust a family member with childcare responsibilities. The fee of pre-school establishments has increased sharply. In 1990 it was on average 4% of the average monthly labour remuneration but in 2000 it was already as high as 10%.

Similarly as in other countries, the first encounter of children in Latvia with the educational system occurs at the pre-school establishments children attend before they start going to school.

There is not yet a unified procedure for the preparation of children for school. Upgrading of pre-school education is one of the priorities in the period between 2001 and 2005. It is not only the training programmes at pre-school establishments that needs improving but consultative support must likewise be given to families for educating pre-school aged children and preparing them for school.

Basic and secondary education

According to the Law on Education of the Republic of Latvia basic education or continuation of studies for the acquisition of basic education is compulsory until the age of 18 years.

Table 2.2

General schools

	1990	1995	1996	1997	1998	1999	2000
Number of general schools	962	1094	1112	1110	1111	1095	1074
Enrolment, thsds	352.5	347.5	354.5	360.0	361.7	361.4	359.8
Pedagogical staff, thsds	32.1	34.7	35.9	36.2	34.9	34.8	34.0

In the last ten years the following changes have taken place in the operation of general schools: Until 1996 the number of schools had been rising since schools were opened as close as possible to the place of residence of children. Beginning in 1999 the small rural schools were closed because due to the lack of financial resources local governments were unable to ensure the functioning of schools taking at the same time an active part in the optimisation of the network of education institutions.

Teaching programmes are being upgraded. More attention in the school programmes is paid to foreign language teaching and the acquisition of PC skills. In 2000 computer classes were established in all general schools and they are gradually connected to the Internet.

A new negative trend could be observed as early as in the beginning of the 1990s – a rapid increase in the number of children who did not attend school. In 1999 the building of a register of such children was started. According to the Ministry of Education and Science, 2.6 thousand children from the 1st to 12th grades did not begin studies at school in September 2000. The main reasons for non-attendance were as follows: 22% due to an illness, 17% due to the recklessness of parents and 13% due to social problems;

Dropouts of general schools are recorded only beginning in 1999. There were 9.1 thsd dropouts in the school-year 1999/2000 and 9.5 thsd (up by 5%) in the school-year 2000/01. Of the total number of dropouts, 36% attended grades 1-4, 43% - grades 5-9 and 21% studied in grades 10-12;

The issue of salaries of the pedagogical staff is not solved. Although labour remuneration in the field of education has been raised it still is lower than the average wage of the employed in the economy. A new order of compensating the pedagogical staff in the period until 2003 has been worked out in the country but its execution depends on economic growth in the above mentioned period of time.

Table 2.3

Average wages and salaries of the employed in the economy (in lats)

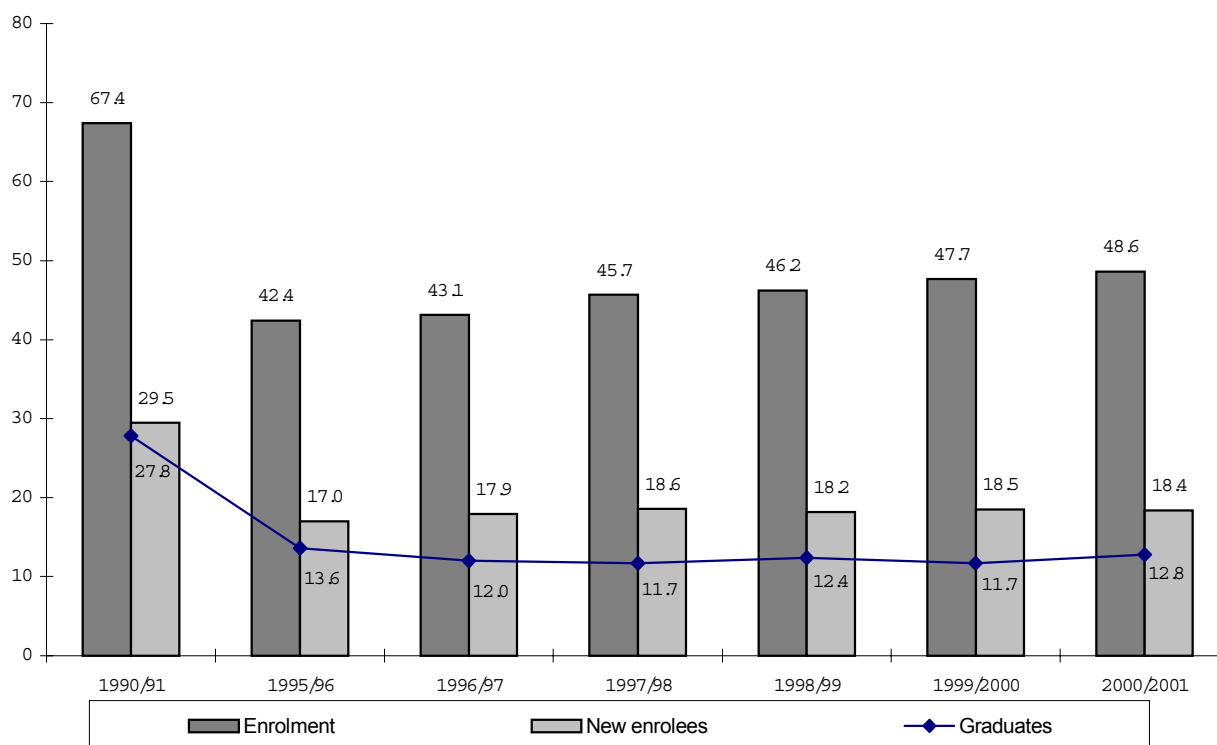
	1992	1993	1994	1995	1996	1997	1998	1999	2000
Total	21.50	47.2 3	71.87	89.50	98.73	120.03	133.30	140.99	149.5 3
of which: education	19.99	39.3 5	54.34	71.58	78.20	93.07	108.11	119.90	135.1 3
Teacher's salaries as percent of the average wages in the economy	93.0	83.3	75.6	80.0	79.2	77.5	81.1	85.0	90.4

Professional education

Within the educational system of Latvia professional education comprises basic vocational education, vocational training, secondary vocational and first level higher professional education. During the last ten years the following changes have taken place in the professional education system:

At the beginning of the 1990s enrolment in vocational education institutions fell dramatically but since 1995 the situation has stabilised;

Vocational schools: enrolment, new enrollees and graduates (thsd)



Alongside the changing demand in the labour market, the training programmes offered by vocational schools have also changed. Although in the soviet time there were only secondary vocational education programmes, since 1997 the professional education institutions offer basic pedagogical correction vocational education programmes (these programmes are intended for young people that after some interruption have come back to the educational system and for whom it is important to obtain vocational skills in parallel with the basic education) and beginning in 1999 first level higher professional education programmes are also offered; With the number of private vocational education institutions going up, the number of those pupils who must pay for their education also rises. Although at the beginning of the 1990s it was free of charge, in the school year 1996/97 5.8% of pupils paid for their education but in the school year 2000/01 this figure was 10.5%. The comparatively high number of dropouts should be mentioned as a negative trend. So, for example, in the period between 1 September 1999 and 1 September 2000 14% of the pupils of professional education institutions were sent down. Half of the dropouts (48%) were first year students. The same level of dropout was also observed in previous years. The most frequent cause of dropout was poor progress in studies that very often was due to the extremely low level of knowledge upon entering the vocational school. For example, of the pupils enrolled in the school year 2000/2001 in the vocational schools under the supervision of the Ministry of Education and Science, 33% had been given 3 points (bad) or even lower mark at least in one of the teaching subjects.

Higher education

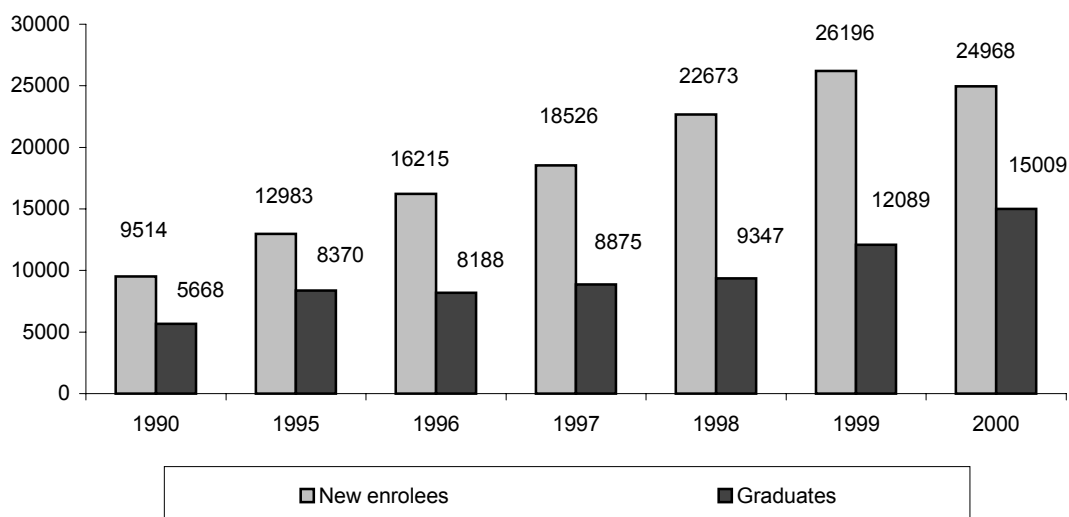
In Latvia the strivings of young people for education, in particular higher education, have become more pronounced. Although without a guarantee, education ensures a better position in the labour market. Following the reestablishment of independence the system of higher education in Latvia underwent rapid changes: new higher education institutions were opened, in particular institutions founded by legal persons, new fields of studies were established and the quality and content of the training programmes are now more often evaluated according to internationally comparable standards.

These changes can be best characterised by the following data:

The rise in enrolment allowed recovering from the crisis that was observed in higher education in 1993. Compared with 1993, enrolment increased 2.6 times and in the academic year 2000/2001 it numbered 101.3 thsd students.

Figure 2.2

New enrolees in basic studies and graduates from higher education institutions



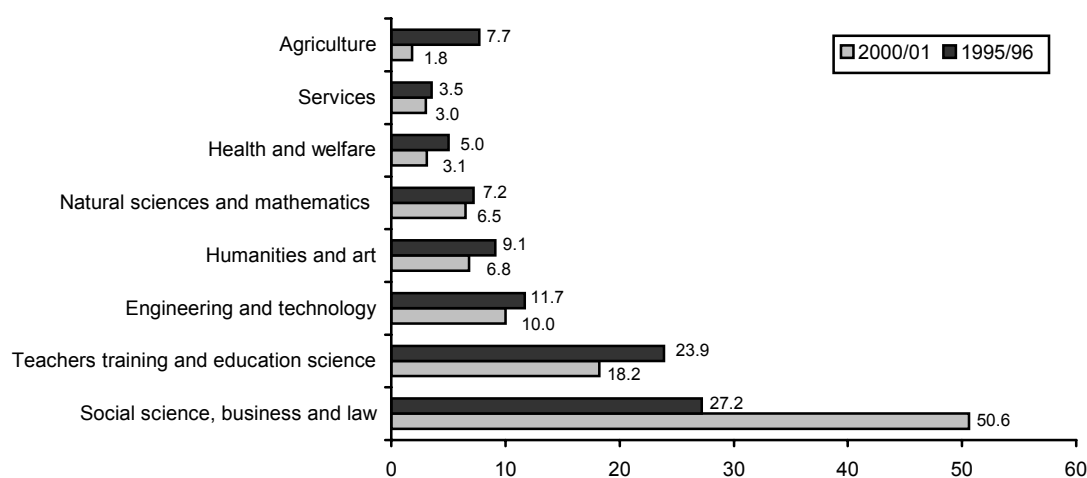
In the last six years the possibility to take budget-financed studies has remained almost the same in Latvia: in the academic year 2000/2001 34.1 thsd students or 34% of the total number of students had a possibility to have their studies financed from the state budget. In other words, two thirds of the students cover the cost of studies from their own purse. In this case, the student has to find a salaried job or give up studying if the resources are not sufficient. On one hand, this provides a possibility of studying to the most talented but reduces this possibility to those young people, most often from rural areas, for whom studying is an escape from poverty.

Unfortunately the rapid increase of students was not followed by a corresponding investment in the development of academic staff and the infrastructure of higher education institutions. The number of professors at higher education institutions does not align with the number of students therefore it is not possible to fully guarantee the acquisition of a qualitative education.

The range of training programmes has undergone a substantial change. Social sciences and business administration are the most popular choice. The number of students willing to study the agriculture-related programmes is decreasing rapidly.

Figure 2.3

Enrolment in higher education institutions by field of study, in percent



Financing of education

One of the cornerstones of education quality is its financing. The sources of funding of Latvian education institutions are the central and local government budgets, resources of natural and legal persons as well as foreign support to specific educational projects. As only a comparatively small number of children attend private education institutions, the source of funding of the educational system is the general government budget.

Table 2.4

	Expenditures for education (thsd Ls)	Per cent of general budget	Per cent of GDP
1990	2806	12.8	4.5
1991	5852	16.9	4.1
1992	45701	22.2	4.5
1993	89145	16.9	6.1
1994	125138	16.1	6.1
1995	161783	17.0	6.9
1996	162586	14.6	5.7
1997	184916	14.6	5.6
1998	246526	15.7	6.9
1999	262716	15.1	6.7
2000	294231	16.9	6.8

Although educational funding in the last ten years has been growing every year, it still is not sufficient to raise the teachers' salaries at least to the average wage level of the employed in the country. The insufficient funding does not allow the planning of effective development of education and the differences between the participation of local governments in financing general education are still persistent. Concerning higher education, if the number of students financed from the state budget is not raised, Latvia will to a great extent lose the possibility to prepare specialists necessary for the country even in the state-founded institutions of higher education.

According to the data of the Living Conditions Survey (1999), approximately 11% of households were unable to pay for the education. There were 14,8% of such families among the married couples with children and 27.4.% among the single-parent families. Looking at this problem from the point of income we see that in the households of the 1st (the lowest) quintile the proportion of such answers was as high as 23.7%. This means that for a part of households there are many obstacles in the road to education.

Part III

INCOME AND EMPLOYMENT

The positive macroeconomic changes such as strengthening of the private sector and considerable progress in economic growth in the last 2 years brought about positive changes in employment and economic resources of the population. Economic growth, however, does not always guarantee equal increase in the wellbeing of the population. As a result of the cardinal changes part of the population enjoy the benefits of economic progress and advantages of the new economic system while the other part has to cope with unemployment and poverty.

Although at the end of 1998 Latvia has recovered from the after-effects of the Russian financial crisis, the situation in employment is not a simple one. Unfortunately social inequality has deepened and only the most economically active people, those who were able to adapt to the changing conditions of the market economy, can enjoy the fruits of economic progress. Poverty in recent years has not diminished. All this can make a negative impact on the country's sustainable development.

Employment

The number of unemployed in recent years tends to decrease. According to the data of the Labour Force Survey, although the number of employed from November 1996 to November 1997 increased by 49.4 thsd it nevertheless decreased gradually by 48.1 thsd persons from 1997 to 2000 and there were 966.8 thsd persons at the age of 15 and over in employment in November 2000. In other words, in the last four years the number of employed has increased only by 1.3 thsd persons.

Of the total number of employed, the majority was employees: 84.8% in November 1996 and 81% in 1997; this proportion grew gradually and in November 2000 reached 85.3%. It is worth noting that although the number of employees in the total number of employed persons was growing it nevertheless decreased by 13.3 thsd during the last year. The number of self-employed and unpaid family members in the total number of employed between 1996 and 1997 rose by 1.7 and 1.6 percentage points but in the next years it gradually decreased and in 2000 was 6.7% and 3.5%, respectively. The proportion of employers has not changed essentially and only in the last two years a small increase can be observed. To a great extent this points to a low level of self-employment in the country. One of the reasons behind this might be insufficient government support to small businesses or the disarrayed environment in this sector.

The evaluation of changes in the number of employed persons broken down by kind of activity allows drawing a conclusion that the percentage of the employed in the services sector tends to go up (it rose by 7.5 percentage points from 1997 to 2000 and was 60.1% in November 2000); the percentage of employed persons in industry and construction was within the range of 27% - 26% (26.8% in 1997, 26.2% in 1998, 26.5% in 1999 and 26.3% in 2000) but in agriculture and fishing the percentage of employed went down (from 20.6% in 1997 to 13.5% in 2000).

The relatively high unemployment rate and extensive poverty promotes a practice of concluding short-term job contracts and people's entering into labour relations without any contract at all. According to the Living Conditions Survey (October 1999) a permanent standard labour contract was signed with 73% of the employed (the lowest level in the Baltic's) but in 17% of cases there was a temporary job contract and in 10% of cases the respondents answered that they had no job contract or that there had been an oral understanding about the work to be done; this means that approximately one tenth of the employed persons are socially unprotected.

As opposed to the public sector where 84% of the employed persons had concluded a permanent job contract, only two thirds (66%) in the private sector had such a contract. On the other hand, in the private sector a temporary job contract is more often used (19% of the employed) than in the public sector (14%); even more often work is being done with no contract but only with verbal agreement.

Job insufficiency is still felt in the country and the labour market is rather small.

Wages and salaries

In 2000 the average gross wage was 149.53 lats of which net wage was 108.55 lats or 72.6%. Compared with 1995, net wage of the employed in 2000 rose by 105.4% and this is the steepest rise within this period.

Unfortunately it should be admitted that there is a considerable segment of hidden economy in the country but the estimations are rather contradictory. One of the aspects of the hidden economy is to pay part or even the whole of the wage ignoring tax legislation and social tax payments. There are, however, no grounds for an assumption that the employed in the hidden economy sector always earn high wages.

The government-established minimum monthly wage in 2000 was 50 lats. According to the results of accounting of employed persons by the size of their wages, almost 5 thsd persons or 0.8% of the total number of employees in the country were paid less than the government-set minimum monthly wage. The majority of them were employed in agriculture, hunting and forestry as well as in manufacturing.

For 79 thd employed persons or 13% labour remuneration was calculated to the amount of the minimum monthly wage (50 lats). Almost for half of the employed (46%) the calculated wage did not exceed 100 lats. In several districts there was a large proportion of employed in the private sector enterprises whose wage was calculated to the amount of the government-set minimum wage or even lower (50% in the Rēzekne district, 45% in the Ludza district, 36% in the Gulbene district, 34% in the Ventspils district and 32% in the Balvi district. Except for the Ventspils district, all these districts are situated in the country's eastern region where economic problems are very serious.

By contrast, the share of employees who earned higher wage (300.1-500.00 lats per month) was 6% but only 2% of the total number of employed persons earned more than 500 lats.

The evaluation of the breakdown of employees by wage and sector shows that labour remuneration both to the amount of the government-set minimum wage and lower was predominantly calculated for the employees in the private sector and the number of such persons was 8 times higher than in the public sector (73.8 thsd and 9.6 thsd persons or 22% and 4% of the total number of employed, respectively).

There are considerable regional differences in respect of labour remuneration. The majority of employees (85%) whose wage exceeds 300 lats work in Riga, the capital, in Ventspils (one of the largest ports in the Baltic region) and in the district of Riga.

A comparison of distribution of wages of men and women shows that 50% of working women and 42% of men do not earn more than 100 lats. At the same time the wage of 48% of men and 45% of women was from 100.01 to 300.00 lats. 7% of men and 4% of women earned from 300.01 to 500.00 lats but 3% of men and only 1% of women received more than 500 lats.

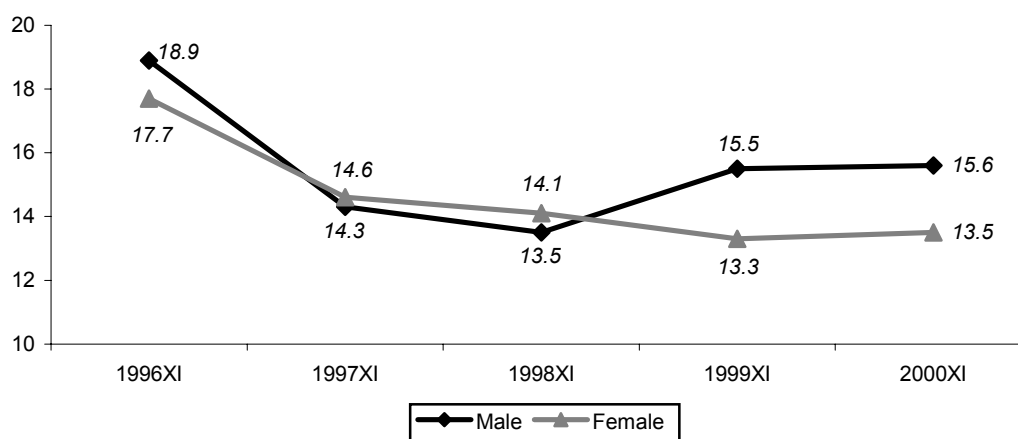
According to the Living Conditions Survey (1999) data two thirds of the employees (67%) feel their salary is too low. This is a subjective evaluation but it reflects the dissatisfaction of the employed concerning not only themselves but also the insufficient financial resources at the disposal of their families.

Job seekers

There are two indicators describing unemployment: information of the State Employment Board on the registered unemployment and information obtained during the Labour Force Survey by interviewing the inhabitants allowing to identify the number of persons who are jobless and seeking it not only with the help of the State Employment Board but also using other possibilities – inquiring their relatives and friends, applying directly to the employers, making use of job advertisements and trying to set up their own business. Henceforward we will use the data of the Labour Force Survey.

Both the number and rate of job seekers (unemployed persons both registered and not registered with the State Employment Board who want to find a job and can start it within the next two weeks) to the number of economically active population have fallen sharply in the period between 1996 to 1998 (by 56.1 thsd persons or 4.5 percentage points, respectively). Next years witness a slight increase and in November 2000 the total number of job seekers was 165.1 thsd or 14.6%). It is typical of Latvia that the percentage of job seekers is higher among men and in November 2000 it was 15.6% for men and 13.5% for women. Nevertheless, women constituted more than half (58%) of the total number of unemployed in the country.

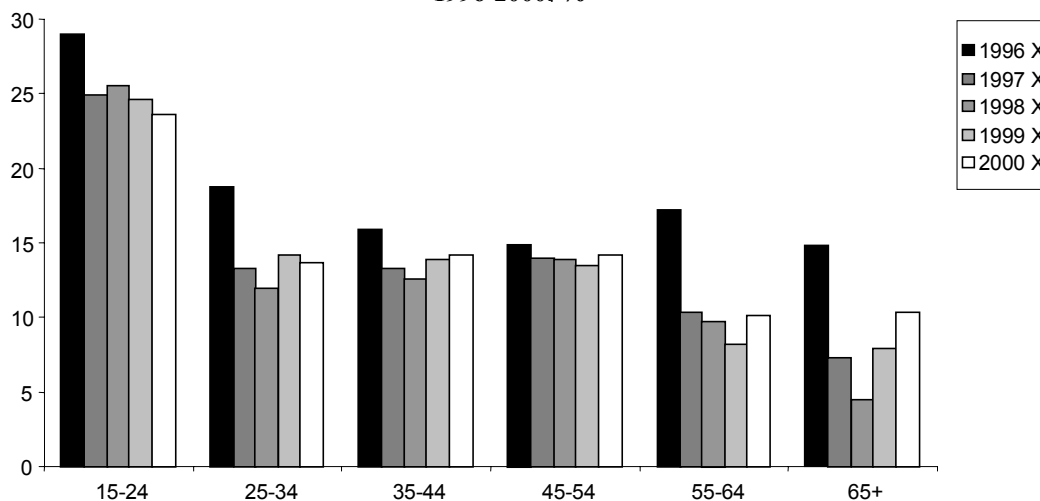
Figure 3.1
Rate of job seekers to the number of economically active population, in per cent



The majority of job seekers were aged between 35 to 44 years (27.7% of the total number of job seekers) and between 25-34 years (24.2%). It is worthy of notice that almost two thirds (64.5%) of the job seekers had either secondary or secondary vocational education, every fourth (24.7%) of the jobless persons had only basic education but 7.3% had higher education. The assessment of the situation from the point of gender shows that among female job seekers the percentage of those with secondary or secondary vocational education is higher while among men the majority has obtained only basic education.

Figure 3.2

Rate of job seekers to the number of economically active population, by age group, 1996-2000, %



It takes more and more time for a jobless person to find a new job: the average duration of job search has increased from 24 months in November 1996 to 29 months in November 2000. It is noteworthy that all these years the most popular way of job search was registration with the State Employment Board (32.6% of job seekers indicated this as the main way).

According to the State Employment Board, since the beginning of registration of jobless persons in early 1992, the highest official unemployment figures were observed at the end of April 1999 when due to the impact of the Russian financial crisis 121.8 thsd persons or 10.2% of the economically active population acquired the status of unemployed person. In the next years the registered unemployment level decreased gradually and was 7.8% at the end of 2000.

At the end of 2000 more than half of the registered unemployed (52.4%) were at the age of 30 – 49 years. Every 7th unemployed was a young persons under 25 years.

Labour safety

During the Living Conditions Survey the respondents were asked to remember and assess the overall working conditions five years ago in comparison with the period of the survey in October 1999. The percentage of respondents who said that their working conditions had considerably or slightly improved (30%) was higher than the percentage of those who admitted that their working conditions had worsened or worsened considerably (25%). 45% of the employed respondents said that their working conditions practically had not changed. All this is an indication of problems persisting in the area of labour safety.

According to the data of the State Labour Inspection, there were 1312 persons injured as a result of work accidents in 2000. The cause of every third accident (31%) was a violation of labour safety regulations.

Table 3.1

Persons injured as a result of work accidents					
	1996	1997	1998	1999	2000
Persons injured as a result of registered work accidents	1572	1328	1364	1422	1312
Of which deaths	68	57	58	64	49

Table 3.2

Distribution of injured persons by sector in 2000		
	Gadījumu skaits	%
Total for all sectors	1312	100
Manufacture of wood and articles of wood	346	26
Construction and restoration works	116	9
Food industry	116	9
Transport and taxi services and operation	79	6
Metalworking and machine building	61	5
Shipping services, port operations	60	5
Trade	49	4
Other	485	36

The analysis of data on sickness allowances is somewhat difficult due to the changes in legislation in this field. Beginning in 1997, the calculation of quantitative indicators does not cover the sickness period paid for by the employer (first 14 days of sickness). Since 1997 expenditures for sickness allowances in the country have increased and in 2000 reached 8.7 mln lats, 1.5% of the actual expenditures on social insurance. The number of sick pay recipients also tends to increase – 67.6 thsd persons in 2000 received the sickness pay in 2000, an increase of 4.7% compared with 1999. The number of lost workdays paid for from the sickness allowance has rapidly decreased in the period from 1991 to 1996 and this can be explained by the socio-economic changes during the transition to the market economy. Feeling unsafe under the conditions of rising unemployment, the employee is quite often forced to continue working during a less serious illness. This situation led to an increase of neglected and chronic illnesses and unsubstantiated decrease in the average duration of illness. Beginning in 1997, along with a more stable economic situation in the whole country and particularly in the area of employment, an increase can be seen in the number of paid sick days and in the amount of allowance paid per one sick

Social protection

Since 1989 the total number of pensioners including the old age and disability pension recipients in the country has increased and at the end of 2000 there were 271 pensioners per every 1000 inhabitants. The majority of pensioners are the recipients of old-age pensions and at the end of 2000 the share of old-age pensioners in the total number of all pensioners reached 78% or 513.8 thsd. Since 1989 the average size of old age pension has increased several times yet it cannot ensure a sufficient level of welfare to the old people. Thus, in 2000 the average size of old-age pension was only 53% of the average net wage of the employed and constituted approximately 68% of the value of the complete minimum consumer basket of goods and services.

The financial position of disabled persons is even worse as the average size of the disability pension in 2000 was 53.25 lats (8 percentage points less than the average size of old-age pension) and constituted only 63% of the above complete minimum basket. Beginning in 1996, a very rapid decrease can be seen in the number of disability pension recipients and this can be explained by the item in the law adopted in 1996 according to which disabled persons who have reached the law-defined retirement age, are allotted the old-age pension instead of the disability pension.

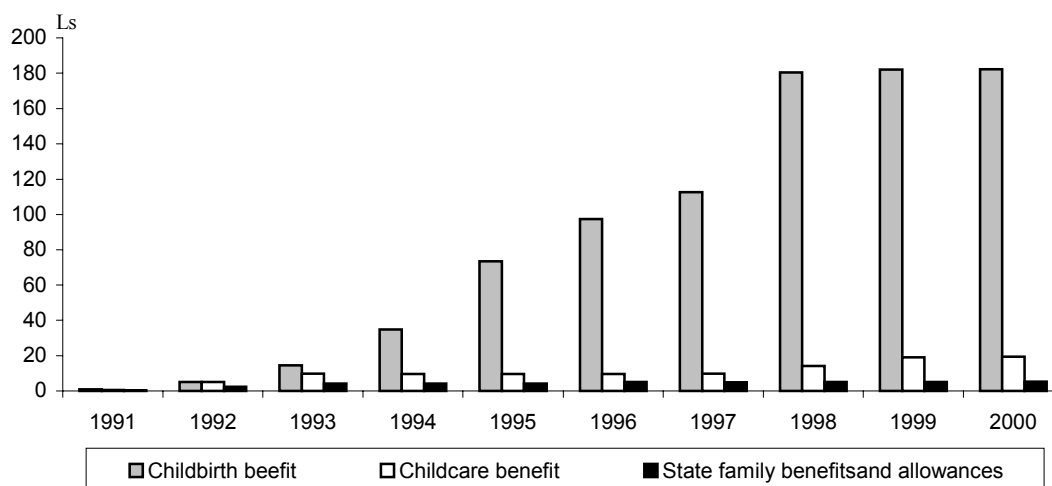
If no social tax payments have been made for an individual the government grants a social security benefit (social pension until 1996) which is financed from the central government basic budget. In case of disability, the social security benefit is granted to the person who has been identified as a disabled person and is over 16 years of age. The number of recipients of state social benefit has a tendency to grow – in the period from 1996 to 2000 it has increased by 0.3 percentage points. The growth rates of the social security benefits lag behind the growth rates of pensions. Since 1996 this benefit has increased by 28% and in 2000 was 32.09 lats per month representing only 56.5% of the average pension.

Expenditures from the state social security budget for maternity benefits (see the Appendix) are increasing, especially in 1998 and 1999, by 47% and 22%, respectively. The paid number of maternity days and the increased size of the benefit accounted for a rapid increase in expenditures. Compared with 1999, expenditures for maternity benefits in 2000 continued to grow although only by 1.4%. The size of the maternity benefit payable has also stabilised – in 2000 it remained on the same level as in 1999, 4.01 lats per day. In 2000 20.2 thsd babies were born in Latvia but the maternity benefit was granted to 11.5 thsd recipients. The calculation of the Ministry of Welfare shows that only 57% of the mothers who gave birth to babies have received the maternity benefit. This is an indication of the fact that a large number of babies are born to non-working mothers for whom compulsory contributions were not made.

In Latvia, either both or one parent is entitled to a universal childbirth benefit and the childcare benefit. However unevenly, expenditures on social insurance and government social assistance benefits to families with children in the period from 1991 to 2000 have increased. The analysis of the dynamic of expenditures is hampered by the fact that data on all kinds of benefits for all years, especially prior to 1996, are not available. Nevertheless, although total expenditure for benefits to families with children has increased, its share in the gross domestic product has decreased and from 1996 to 2000 has been within the range of 1.2 to 1.3% (see the Appendix). The analysis of the dynamic of the number of childbirth and childcare benefits shows that in the period from 1992 to 1998 it has been going down all the time (see the Appendix). Only in the last two years a slight increase can be observed that can be explained by the slight increase in the birth rate in the respective period of time.

Figure 3.3

Average size of the government social benefit (paid per month)



The analysis of benefits granted to families with children in the period of ten years allows drawing a conclusion that the growth rates of these benefits have been considerably slower than the increase in consumer prices. However, in the last four years in order to lessen the financial problems of families in the event of the birth of a child and to stimulate the birth rate, certain changes have been made in legislation. As a result of this, the size of childbirth benefit in the period from 1997 to 2000 has increased 1.6 times (see the Appendix). Beginning in 1 July 1998, the size of the childcare benefit is also increased, however, this refers to childcare benefit for a child aged up to year and a half.

The state family benefit is also quite often crucially important to the income structure of families with children (especially to those living in rural areas) and it is paid to the person who raises the child up to the age of 15 years or over if the child attends the general school but not after the day when the child becomes 20 years old. The size of this regularly paid benefit was not changed for a long time (from 1993 to 1 August 1996). Beginning in 1 August 1996, the state family benefit depends on the order of birth in the family. Although the differentiation of the family benefit size is aimed at promoting the formation of families with multiple children, the overall low amount of the benefit did not stimulate the increase in the birth rate and hence the improvement of the demographic situation in the country. Following the amendments to the law the size of the benefit to children born after 1999 was raised but remained unchanged for other children. It is planned to change the situation that is socially unjust to children born before 1999.

Income and consumption of households

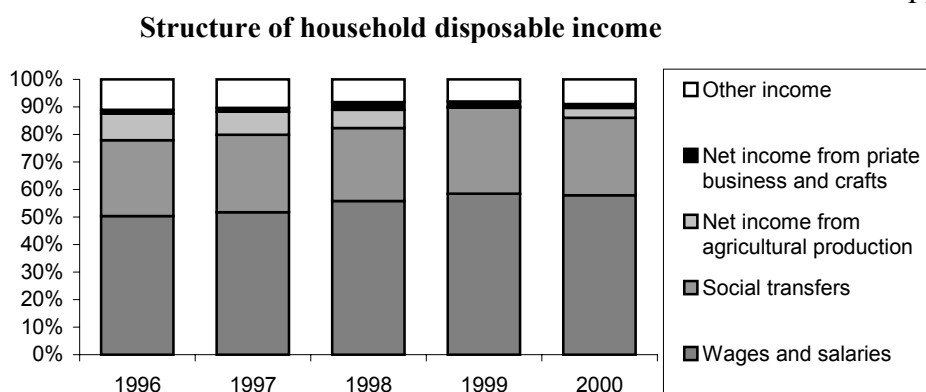
In recent years the disposable income of households¹ in Latvia has increased (see the table 3.3). Compared with 1996, the purchasing power of population in 2000 increased by 13%. Income has increased mainly in cities and towns whereas income in the countryside rose very slightly not exceeding the increase in consumer prices. In other words, the purchasing power of rural population has decreased. Income inequality between urban and rural areas deepened, as did the differentiation among the regions, particularly between the Riga region and others.

Table 3.3

	(lats, per household member per month)					
	1996	1997	1998	1999	2000	2000.g. % pret 1996.g.
All households	51.50	55.45	62.33	64.73	69.19	134
Urban	53.11	57.80	67.26	70.93	76.79	145
Rural	47.71	49.86	51.40	50.93	52.13	109.3

The households' budgets are still formed from the main two sources of income. These are wages and salaries and social transfers². The survey data show that within the period from 1996 to 2000 the role of wages and salaries in the household income is gradually increasing while net income from agricultural production is going down. Net income from private business activities and crafts constitutes quite a small part in the income of households.

Figure 3.4

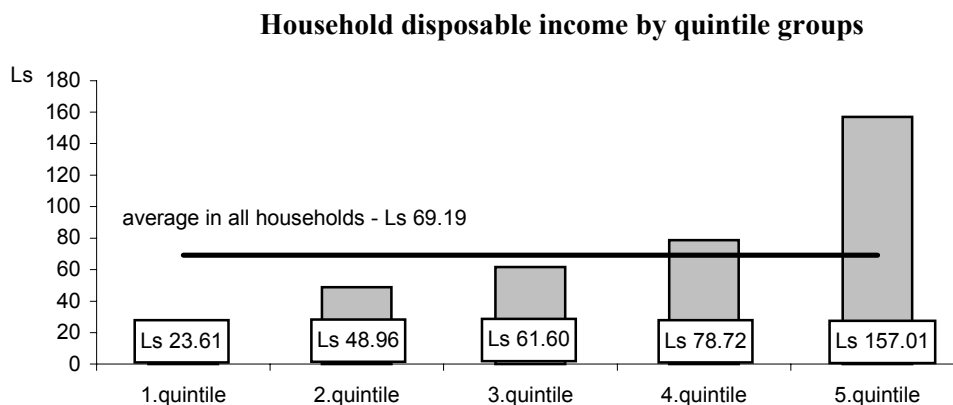


¹ Household disposable income represents income in cash and the in-kind value of products and services recalculated into money that were received in the form of wages and salaries, other incomes for work done (after tax payments), social transfers, net income (income after the deduction of production costs) from business and agricultural production, income from property, sale of personal belongings, etc.)

² Social transfers consist of the amounts paid in the form of pensions, scholarships, social insurance and security and local government social benefits as well as the material assistance (in cash and in kind) provided by local governments, humanitarian aid and social assistance institutions, alimonies, assistance from the workplace and so on.

The distribution of household disposable income into quintile groups testifies to the material inequality of households. According to the data of the Household Budget Survey, 20% of the most needy households (these households were larger than the national average) in 2000 had 9.2% of the gross disposable income of all households and 27% of the total household members within the country lived in these households. The more so, 41% of children aged under 15 years lived in these households. By contrast, 39% of the total household disposable income was at the disposal of 20% of the most well-off (17% of persons and 11% of children).

Figure 3.5



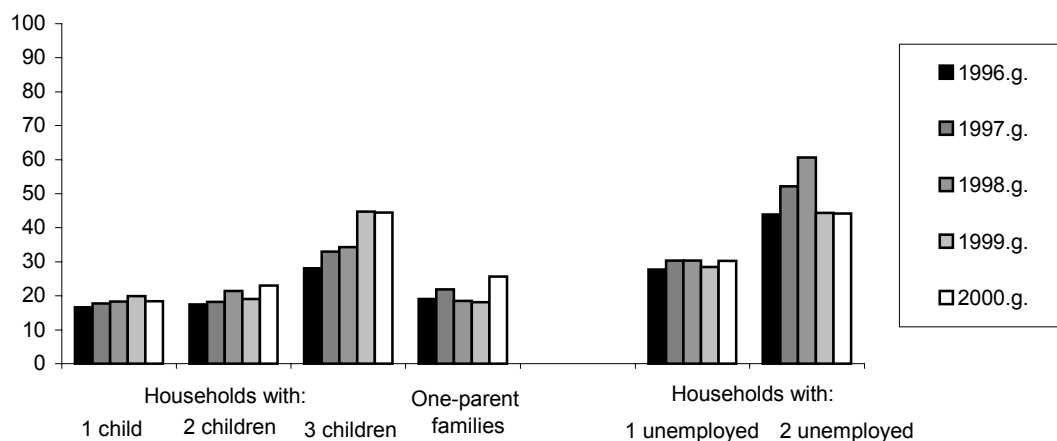
The Gini Index (calculated according to consumption expenditure) in the country has increased from 0.30 in 1996 to 0.34 in 2000.

Not all households face the risk of poverty equally. Families with children, households with unemployed household members and one-parent families confront the highest risk of becoming poor.

The risk of becoming poor increases with the increasing number of children in the household. Applying the very lowest poverty threshold (50% of the equivalized consumption expenditure), the proportion of poor to the total number of persons living in the households of this type can be seen in the figure below:

Figure 3.6

Change in the proportion of poor in households of various compositions with consumption below 50% of the average consumption expenditure (per cent of equivalent consumers).



Part IV

CHILDREN AT RISK

In the changing political and economic situation families with children find themselves in the most difficult situation. Unemployment and poverty are the driving factors to a situation when the family is not able to perform its functions adequately and provide adequate upbringing, education and support to children. Quite frequently the climate in the family is encouraging for the development of antisocial behaviour such as alcoholism, drug addiction and violence.

Up until 1999 the number of unfavourable families was increasing, as did the number of those children whose parents were deprived or adjourned of parental rights. In 2000, the number of problem families slightly decreased and there were 8937 families registered with the custody courts. There was a decrease of 7.4% in the number of those parents who according to the decision of the custody court were deprived of parental rights yet at the same time the number of parents whose adjourned parental rights were restored to them has increased. In 2000, parental rights were restored to 337 parents, an increase of 6.7% compared with 1999. Hopefully the improvement in the situation that has been observed lately will not be of short duration. In such conditions children often feel tensed up and lonely. According to a survey on the health and health habits of schoolchildren, conducted in the school year 1997/1998 19-30% of girls and 16-17% of boys aged 11, 13 and 15 years “very often” or “fairly often” feel lonely. Compared with the survey of 1993/1994, the indicators are higher.

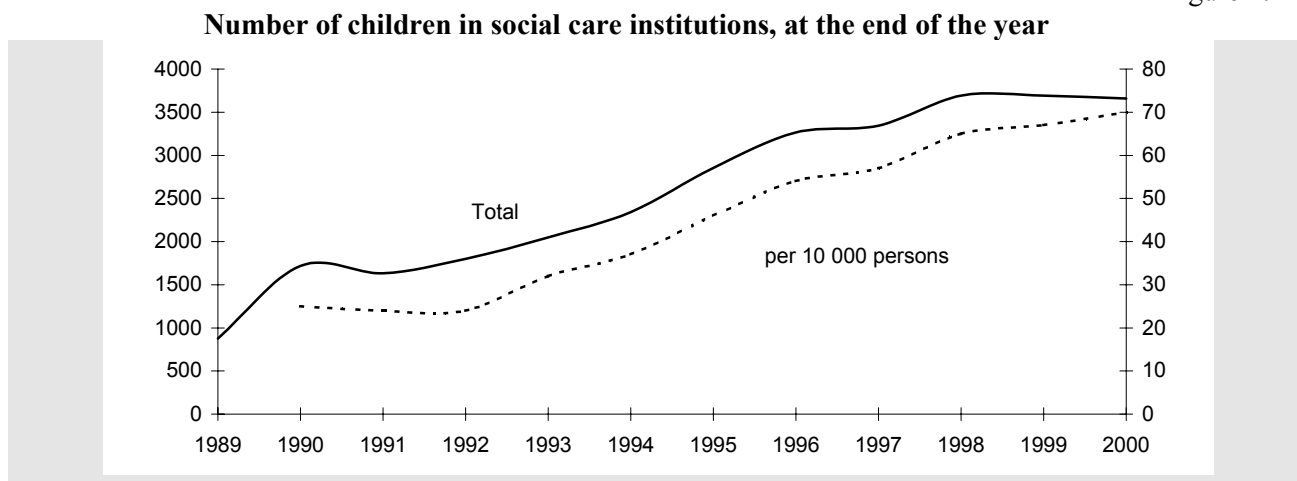
At any rate, a child who lives in the family can better adapt to the surrounding environment. The situation for children left without parental care and orphans is much more complicated. Although children are more or less protected in childcare institutions yet after leaving these institutions they are practically helpless.

Institutionalised care

Children left without parental care and children with special needs are provided with the necessary living conditions, social care and healthcare, rehabilitation and upbringing in three different kinds of institutions depending on the child's age and state of health. Institutionalised childcare is currently the best known and for the time being the most widespread form of social care of children. In spite of the rather high costs of this care, the number of social care institutions for children in the period from 1990 to 2000 has increased from 15 to 57. The number of orphanages-shelters has rapidly increased – since 1990 this number has increased 6 times and in 2000 there were 48 such institutions in Latvia. This can be explained both by the substantial necessity to find home for the increasing number of children from socially unfavourable families and the tendency established still in the soviet time to consider the placing of a child into an institution to be the simplest way-out of the situation.

Since 1989 the number of children in all kinds of social care institutions has been growing incessantly and in 1998 it exceeded the level of 1989 more than 4 times. Beginning in 1999 the number of children in social care institutions has stabilised.

Figure 4.1

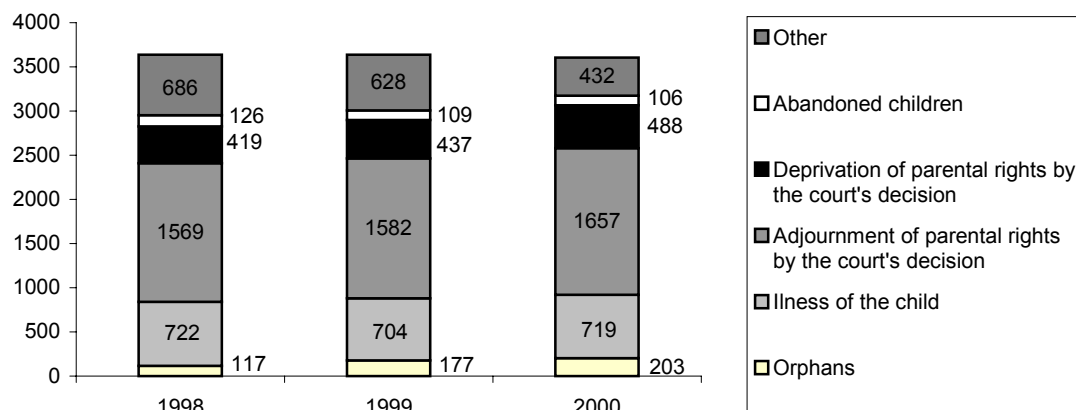


Despite the fact that since 1989 the population in the age group of 0-17 years has been decreasing, the number of children in social care institutions per 10 000 population in the age group of 0-17 years has increased in the period between 1990 – 2000 from 25 to 70, or 2.8 times. This negative trend may be explained by the situation in the period of transition, when economic reforms outpace the development of social reforms. The effectiveness of the latter, in turn, becomes apparent with some delay.

The analysis of the reasons why a child is in an institution shows that the proportion of orphans in the children’s social care institutions was only 5.6% although the dynamic pointed to an increasing number of orphans. In 2000, the reason for almost 60% of children having been placed in an institution was the deprivation or adjournment of parental rights but 3% of the children were abandoned.

Figure 4.2

Reasons for the placing of children in care institutions, at the end of the year



The fact that the number of disabled children and children infected with tuberculosis and sexually transmitted diseases has increased in absolute numbers is an indication of the antisocial environment from which the majority of children in care institutions have come. Tuberculosis and sexually transmitted diseases as a negative inheritance from the previous environment most often affect the youngest children and in this group there are also HIV-infected children. Taking into account the increasing number of HIV-infected persons, one of the childcare institutions for orphaned children has arranged a special section for HIV-infected children and in 2000 there were 5 inmates in this section.

Central and local government funding for childcare institutions is rising year by year. In comparison with 1999, expenditures in 2000 also rose by 0.5% although the number of children in care institutions in that year had even decreased. Expenditures per one child in 2000 have gone up by 14% in comparison with 1999.

Table 4.1

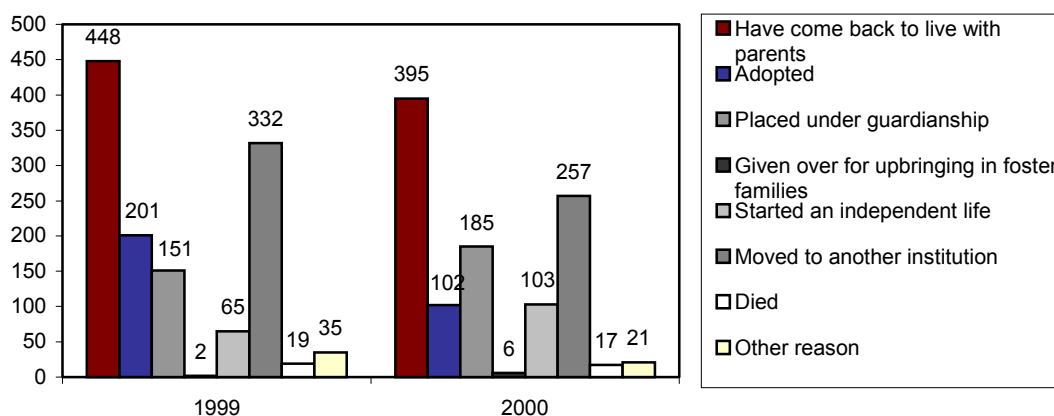
Expenditure per child, lats

	1997	1998	1999	2000
Expenditure per child per month, total	175.54	172.5	157.9	179.9
Feeding	0.97	0.97	0.97	1.00
Purchase of medicines, per day	0.06	0.09	0.06	0.07
Purchase of upholstered inventory, per year	24.64	15.53	29.81	31.22

In 1998 minimum requirements to the providers of services were established. The set norms made the local governments allocate more financing to the maintenance of children's homes-shelters since in previous years the amount of resources per child in these institutions was lower than in the central government-financed institutions. The increase of the financial burden may in turn stimulate the necessity to replace the expensive institutionalised care with various forms of alternative care as well as to improve work with the problem families, so that a child should be taken out of the family as rarely as possible.

Figure 4.3

Leaving social childcare institutions: indicators and causes



Even the best childcare institution is unable to give the child what the family can give. The evaluation of the indicators of children's leaving the institution shows that in the last two years approximately 48% of all children that left social care institutions have returned to their families.

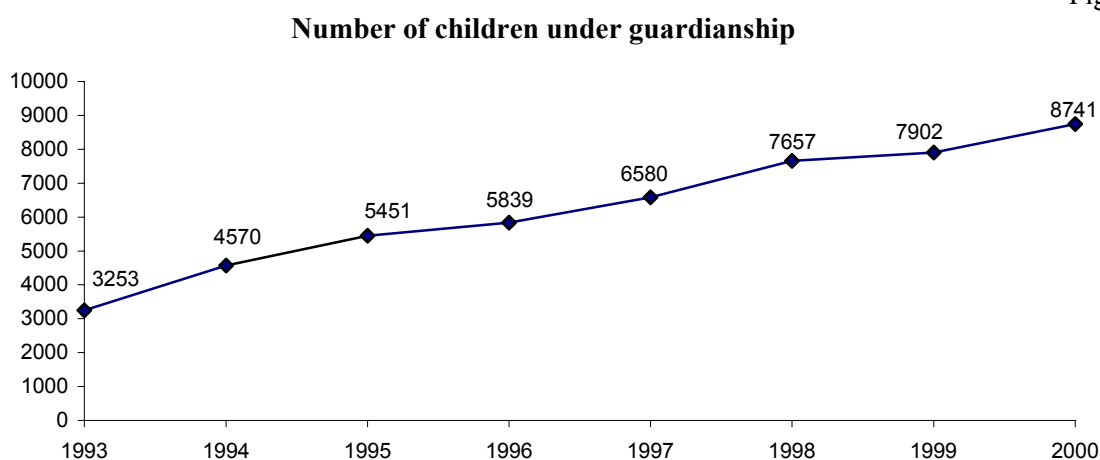
Compared with 1999, the share of adopted children in the number of leaving children dropped in 2000 from 22% to 12% but the number of children given over to guardianship rose by 6%. The number of children given to foster families for upbringing also increased. This trend when the institutionalised care of a child is replaced by some other form of alternative care should be assessed positively since this allows to secure upbringing in family thus alleviating and upgrading the process of socialisation of children.

Forms of alternative care

In Latvia children can avail themselves of such alternative forms of social care as day centres for disabled children, home care for children with physical or mental disorders, guardianship, foster families and adoption. The government's social policy supports the development and improvement of alternative forms of care regardless of the fact that the implementation of selected alternative forms of care is rather cumbersome. The introduction and financing of the alternative forms of care are under the competence of local governments the financial resources of which are in the majority of cases insufficient. Very often this is the reason behind the indifferent attitude of local governments to the introduction of the alternative forms of care preferring to use institutionalised care where financing comes from the state budget (childcare centres for orphaned children and specialised social care centres for children). The government with its budgetary resources takes part only in the financing of selected forms of care, for example, day care centres for persons with mental disorders, guardianship and foster families. The divided mechanism of funding acts in a contradictory way hindering the provision of alternative care for children with mental disorders and children with special needs and also hinders placing of a child in a foster family.

Foster families are specially trained families that provide temporary (up to 1 year) care and upbringing for a child who for various reasons cannot stay with his or her family. Foster families receive compensation from the state to the amount of 38 lats per month for the execution of the duties of foster family but all expenditures for the upkeep of the child are covered from the local government budget. In 2000, the status of foster family was assigned to 6 families (17 in 1998 and 7 in 1999) and 10 children were given over to foster families (10 in 1998 and 9 in 1999). Only 2 families fulfilled the duty of a foster family longer than one month (2 in 1998 and 3 in 1999). Statistical data show that the introduction of this type of care is not successful. This can be explained both by a lack of professional social workers who would work with the families, the peculiarities of financing and the unwillingness of society to participate in this process. Local governments are willing to appoint a guardian to children left without parental care as the state guaranteed social benefits to the guardian are paid from the central government budget and the child continues to grow up in a family environment. The total number of children under guardianship and the number of guardians continue to increase in Latvia.

Figure 4.4



Compared with 1999, the number of children given over to the guardian's care has decreased by 15%. The decrease may be explained by the decrease in the number of cases when parental rights have been taken away or adjourned. For several years the size of compensation for the execution of guardian's duties has not changed, 38 lats per month, and in 2000 it was only 35% of the average net wage of the employed in the economy.

Adoption, another form of alternative care, is not developing as successfully as guardianship. The "Law on the Protection of Children's Rights" that was passed in 1998 supports the adoption of children so that children that are left without the care of their biological parents should have a possibility of growing up in a family. On 14 September 2000 Latvia joined the Council of Europe Convention on the Adoption of Children. Regardless of the fact that the adoption-related issues are solved on the governmental level, the number of adoptions continues to go down. This negative trend could be observed as early as in 1991. Since 1998 the proportion of adoptions to foreign countries has also been on a downward trend (54.2% in 1998, 40.2% in 1999 and 24.6% in 2000). The reason behind this is the amendments to the law (adoption to foreign countries was even temporarily discontinued in 2000) as well as adoption-related lawless actions discovered in 1999 that created an uproar in mass media. All children adopted in 2000 to foreign countries came from the childcare institutions.

Table 4.2

Number of adopted children

	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
Number of adopted children	589	584	641	615	469	422	387	384	404	373	378	228
Of which to foreign countries	-	-	-	-	86	105	144	195	212	202	152	56

Adoption from childcare institutions decreased almost twofold (201 children in 1999 and 102 in 2000) and as a result of the decrease a new previously not observed fact emerged – the majority of children were adopted from families. Regarding adoption from childcare institutions, the adopters are still interested in children aged less than 3 years.

With regard to families and persons who have taken charge of children left without parental care, the government awards benefits to the guardian for the upkeep of the child and compensation for the execution of guardian's duties and also compensation for the duties of the foster family. With the number of children taken under guardianship rising year by year, expenditures from the state budget for these benefits also increase correspondingly (in 2000 expenditures for the benefits to the guardians exceeded the expenditures of 1996 3 times).

Juvenile delinquency

Offenders that are more advanced in age often involve children in criminal activities. On the other hand, under the conditions when the child does not even receive the most necessary from the family (parents without any source of livelihood or alcoholics or drug addicts), he seeks it on the street. Children whose parents are people with antisocial behaviour are subject to suffering and humiliation: they are hungry, get involved in begging, thefts and other offences; they are also forced to earn money by prostitution. Coming to this environment a child gets involved in criminal activities more easily. A factor to be reckoned with is the reluctance of juveniles in the risk group to continue education and their inability to enter into the labour market owing to the low level of education.

Criminality in Latvia began to expand rapidly at the end of the 1980s and the beginning of the 1990s. It peaked in 1992 when 62 thousand offences were recorded. At the same time trends in overall criminality and juvenile delinquency differ. The apex of the overall crime level in the country was reached in 1992 while that of juvenile delinquency - only in 1998.

A considerable criminal activity among the juveniles has been observed since the mid-1990s. In the last 10 years the number of offences committed by juveniles increased by 63%.

Table 4.3

Trends in juvenile delinquency

	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
Number of offences committed by juveniles	2410	2933	3300	2542	2171	2591	3025	3634	4023	3757	3923
Per cent of the total crimes committed	6.9	7.0	5.3	4.8	5.3	6.7	7.9	9.9	11.0	8.5	7.8

Most often juveniles commit property crimes and 80% of them are convicted of property crimes. A dangerous trend to commit crimes in organised groups persists among the juveniles. More than a half of the crimes is committed in-group and every fourth/fifth offence is committed under the influence of alcohol. The proportion of serious crimes in the total number of crimes is high (see Appendix).

According to the current legislation in Latvia persons who have reached the age of 14 years can be called to criminal account. Underage boys who are sentenced to deprivation of liberty serve their time in the Cēsis Reformatory for Juvenile Delinquents but girls are placed in the women's prison in Ilūciems (see Appendix).

The share of juvenile delinquents in the total number of convicted persons is between 11% and 15%. In recent years the number of convicted juveniles has increased.

Table 4.4

	Number of convicted juveniles										
	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
Number of convicted juveniles	1098	975	1149	1221	1143	1063	1238	1676	1678	1795	1797
Juveniles sentenced to deprivation of liberty	311	268	391	341	288	245	210	390	275	366	382
Per cent of total convicted juvenile delinquents	28.3	27.5	34.0	27.9	25.2	23.0	17.0	23.3	16.4	20.4	21.3

Data on the number of convicted incarcerated juveniles are given in the Appendix. According to the court verdict, part of the juveniles is in the reformatory and training institutions. Five such institutions operate in Latvia and in the school year 2000/2001 there were 266 boys and 20 girls.

Violence against children

Not only juvenile delinquency is on the increase but violence against the juveniles is also rising. Data on the children that have been exposed to violence are compiled only beginning in the last few years. 935 children fell victims to criminal activity in 2000 (760 in 1999 and 701 in 1998).

In Latvia, beginning in 2000, assistance is provided to children who have been exposed to any kind of violence so that they should recover physical and mental health and better integrate in society; this assistance is financed from the state budget. The children can get psychological assistance from eight institutions.

Following the decision of the psychologist or social worker the child can receive social rehabilitation both at his or her place of residence and at a rehabilitation institution. In 2000 social rehabilitation at the place of residence was provided to 300 children but institutionalised rehabilitation – to 577.

Taking into account the rising number of cases of violence including sexual violence to juveniles, a special government programme was worked out in Latvia to prevent sexual violence against children.

Part V

HEALTH

1. The state of children's health depends on many factors such as the parents' state of health, the quality of healthcare received by the child's mother during pregnancy and by the child since the moment of birth.

To a great extent the child's health and further development depends on the newborns state of health at the moment of birth. Assessing the state of health of newborns it should be mentioned that only 45.7% of infants are recognised as absolutely healthy. 49.8% of the new-borns though practically healthy are nevertheless susceptible to diseases (the risk group). One of the indicators for evaluating an infant's health is the body weight at birth. A small body weight at birth is linked with a risk of bad physical and mental health.

Table 5.1

Proportion of live births with a weight less than 2500 g to the total number of live births, in percent

1994	1995	1996	1997	1998	1999	2000
5.1	4.8	5.2	5.0	5.0	5.3	5.4

Taking care of the health of mothers and newborns, various educational materials are released in Latvia for expectant and young mothers to stimulate breastfeeding. Unfortunately, the rate of breastfed infants in Latvia is low. Only every fifth infant at the age of up to full six months has been breastfed.

Table 5.2

Feeding of year-old infants registered with a health care facility, in percent

	1995	1998	1999	2000
Was breastfed				
full 4 weeks	...	...	...	32.4
up to 6 weeks	38.2	34.7	32.2	...
up to 3 months	29.9	32.4	34.0	...
full 4 months	...	...	...	25.8
up to 6 months	18.3	23.2	27.5	...
full 6 months	...	...	...	20.4
full 12 months	...	...	...	8.8

During the first year of life diseases of the respiratory system occupy the first place among of all other illnesses. These diseases represent 53.5% of the total diseases. In 2000 on average every infant under the age of one year has suffered from an illness 2.7 times.

Table 5.3

Structure of children's morbidity during their first year of life

Disease	Number of cases		
	1995	1999	2000
Total	56940	54318	50585
Of which (in per cent)			
Certain infectious and parasitic diseases	3.5	2.1	2.7
Endocrine, nutritional and metabolic diseases	2.0	1.7	1.7
Diseases of the nervous system and sense organs	15.2	6.2	7.2
Diseases of the respiratory system	51.7	54.1	53.5
Diseases of the digestive system	7.1	8.3	8.3
Diseases of the genitourinary system	0.7	0.8	0.9
Certain conditions originating in the perinatal period	8.5	13.1	12.5
Congenital anomalies	1.5	1.7	1.5
Accidents, injuries and poisonings	1.1	1.2	1.1
Other	8.7	10.8	10.6

Table 5.4

Maternal mortality

	1995	1996	1997	1998	1999	2000
Number of deaths	8	8	8	8	8	5
Per 100000 live births	37.0	40.4	41.9	43.2	41.5	24.8

The majority of causes of maternal deaths could be precluded if pathological conditions during pregnancy would have been timely diagnosed and treated. Any pregnant woman if she is interested in and takes care of her health can receive medical assistance and specialists' consultations during pregnancy. If a woman has applied to medical supervision before the 12th week of pregnancy she will be granted an increased amount of the one-off state matrimonial benefit. Nevertheless, only slight positive trends can be observed in the early health care indicators of pregnant women. In 2000 91% of women applied for antenatal care (until the 12th week of pregnancy). 2.6% of all pregnant women who have registered for antenatal care were adolescents. The antenatal follow-up is done by gynaecologists although the family doctors assume an ever-increasing responsibility for the reproductive health of women if pregnancy is normal.

3. There have been some changes in the mortality level during the past years. The mortality rates of children and adolescents (at the age of 1-19) were on a downward trend in the last ten years. However, as with the mortality rate in general, the mortality rates of children and adolescents due to malignant neoplasms are slightly increasing. It is worth noting that the mortality rate of young people has increased due to drug addiction, violence, self-harm and road accidents especially amid young men aged 15-19 years. At the beginning of the 1990s there was a relatively high infant mortality rate in Latvia. The rise in the relative indicators was mainly linked with the decreasing birth rates since the number of infant deaths at the age of up to one year has decreased. Since 1995 a trend of falling infant mortality rates can be observed.

Compared with 1999, infant mortality decreased by 9% in 2000. In the last years the proportion of infant deaths against live births was 1.4% - 1.9%, but in 2000 this indicator was essentially lower - 1.0%. The following table demonstrates the relative indicators of infant mortality in Latvia since 1990.

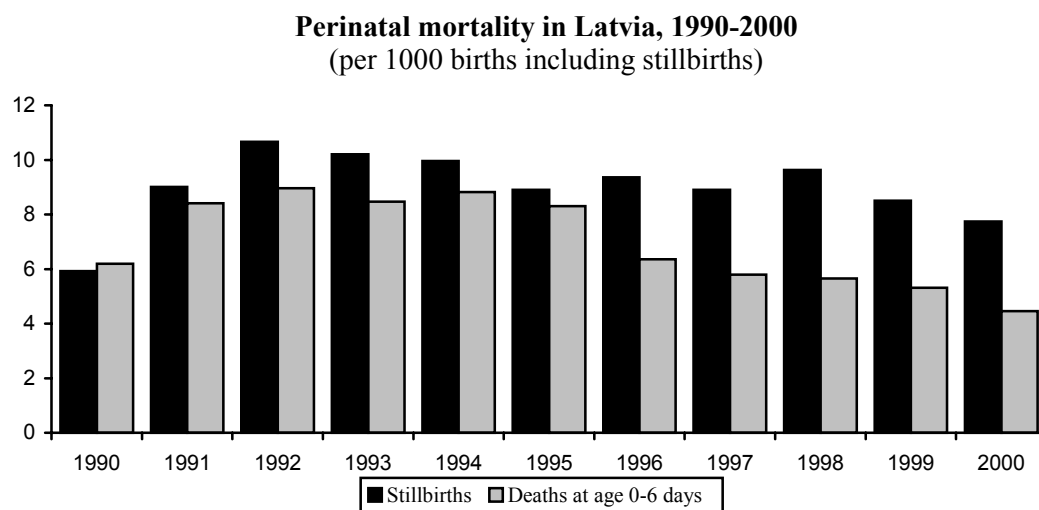
Table 5.5

Infant mortality in Latvia, 1990-2000

Year	Per 1000 live births		
	Total	Boys	Girls
1990	13.7	15.9	11.5
1995	18.5	20.6	16.3
1999	11.4	10.5	12.3
2000	10.4	11.8	9.0

The indicators of perinatal mortality (stillborn infants and infant deaths in the first week of life) are also decreasing. Besides, the decrease in infant mortality at the age of 0-6 days is more rapid.

Figure 5.1



In the previous year, 210 infants died before reaching the age of one year. 132 of them were aged 0-27 days and 91 of them died at the age of 0-6 days. 20 infant deaths occurred at the day of birth. The main causes of infant deaths are certain conditions originating in the perinatal period (46% of the total number of deaths under 1 year) and congenital malformations, deformations and chromosomal abnormalities (32%).

4. The mortality rates of women and men differ as can be seen in the next table.

Table 5.6

Mortality in Latvia, 1995-2000
(per 1000 population)

	Total	Males	Females
1995	15.7	17.7	13.9
1996	14.0	15.4	12.7
1997	13.8	14.8	12.9
1998	14.2	15.2	13.3
1999	13.7	14.9	12.7
2000	13.6	14.8	12.5

Analysis of data in a longer period shows that mortality due to malignant neoplasms is on the rise. Although somewhat fluctuating, the death rate due to the diseases of the circulatory system and external causes of death is still very high.

The diseases of the circulatory system are the most widespread cause of death in Latvia. These diseases accounted for 17866 deaths, or 55.5 % of the total number of deaths, in 2000. Mortality due to these diseases was widespread particularly among elderly persons.

The next largest group of the causes of death is neoplasms accounting for 5633 deaths in 2000 (5771 in 1999). One quarter of deaths occurred on average at the age of 15-60 years. In the majority of cases these were neoplasms of the respiratory system, stomach and intestinal tract. Per each 100 thousand population of the respective gender, 277 men and 203 women died from neoplasms in 2000.

External causes of death (accidents, poisonings, and injuries) are in the third place in the structure of death causes. In 2000, 3773 individuals died an unnatural death, 156 deaths less than in 1999. Mortality due to this group of causes was 159 deaths per 100 thousand population. People who die as a result of an accident are predominantly of working age: of the total number of deaths due to an accident in 2000 70% were at the age of 15-59 years, besides for men this indicator was higher than 75%.

Among the external causes of death, the percentage of suicides was the highest - 20.4 %. Last year 770 individuals (764 in 1999) died due to intentional self harms, of which 618 men and 152 women. Men committed suicides 4 times more often than women. The majority of men who committed suicide were of working age (75%). The number of suicides committed by young people and even children is rising year by year (in 2000 5 suicide deaths occurred at the age of 10-14 years).

In 2000, 699 individuals died in traffic accidents, 427 due to accidental poisoning, for 365 individuals the cause of death was incidental falls, 255 died due to accidental drowning, 297 died a violent death and 214 due to exposure to fire, smoke and flames. 3.4 times more men than women died in traffic accidents and almost 80% of them were of working age. In recent years the number of young people who died due to traffic accidents went up.

In all age groups mortality among men was higher than among women: in 2000 it was 1.4 times higher in the age group 0-14, 2.9 times higher in the age group 15-59 and 1.4 times in the age group over 60.

5. The summary indicator characterising the demographic situation and health of the population is the average life expectancy at birth. In comparison with other European countries, it is low in Latvia. In 2000 it was 64.9 years for men and 76.0 years for women. For example, calculations according to the life table show that for men who in 2000 had reached the age of 65 the further average life expectancy is 11.9 years but for women of the same age - 17.6 years.

6. In 2000 55.9% of children and 58.3% of adolescents were assessed as absolutely healthy. However, some statistical data indicate negative trends in the morbidity of children and adolescents. The results of preventive examinations that the number of children and adolescents with scoliosis and posture disorders is growing. Although a slight downward trend can be observed in the incidence of sexually transmitted diseases, the incidence level among children and adolescents remains high representing 4.8% of the total number of patients. Specialists believe that these data do not reflect the situation fully as possibly many patients do not apply to the doctor or undergo treatment unofficially.

The ever increasing spread of infectious diseases including HIV and tuberculosis also point to a negative trend in the state of health of population.

Table 5.7

Reported cases of active tuberculosis

	1990	1995	1996	1997	1998	1999	2000
New cases							
total	51	74	101	112	153	154	175
per 100000 children and adolescents of the respective age	7.5	12.0	16.8	19.1	26.9	27.9	33.1
Cases under the surveillance of disease prevention institutions (at end of year)							
total	99	89	111	114	156	168	169
per 100000 children and adolescents of the respective age	14.6	14.6	19.0	19.7	27.8	28.3	32.5

7. Until 1998 the recorded annual number of HIV and AIDS patients was rather small. However beginning in 1998 the growth rates of the new cases of HIV carriers rose very rapidly. There were 466 registered new cases of HIV, an increase of 1.9 times compared with 1999. The number of new cases per month has also increased. In 1998 14 new cases on average were registered whereas in 2000 the average number of new cases per month was 49. It is estimated that only part of the infected persons has been diagnosed as such while the real number of infected persons might be higher. (M.Baltiņš "An overview of public health in Latvia"). To restrict the spread of the epidemic and to ensure medical treatment of the infected persons, the procedure of controlling and diagnosing of the epidemic has been worked out.

The trend towards the rising number of HIV-positive women within the reproductive age will increase the danger that during pregnancy the child can get infected from its mother (vertical transmission).

Table 5.8

HIV-positive persons and AIDS cases (cumulative number)

	1995	1996	1997	1998	1999	2000
HIV-positive persons reported, total cumulative number	46	63	88	251	492	958
Of which children and adolescents (0-17)	2	2	4	6	12	59
HIV-positive persons who have developed AIDS	12	17	20	31	48	72
Of which deaths	4	4	4	8	13	22

The majority of HIV-positive persons come from the population groups with a high risk of infection such as narcotics addicts (in 2000 more of 80% of new cases of HIV infection were recorded in the environment of intravenous narcotics users), patients of the infectious diseases wards including those of sexually transmitted diseases and incarcerated persons. The first two HIV-positive children were registered already in 1994. In 2000 47 children and adolescents were recorded.

The use of intravenous narcotics is becoming widespread among young people and even children. This creates a heightened risk for HIV infection. The studies that were performed testify to the fact that this kind of risk is currently predominating. At the same time first cases of vertical transmission have already been identified. The first child who was discovered to be HIV-positive at birth was born in 1998.

Table 5.9

Main ways of HIV transmission to children and juveniles aged less than 17 years in 2000

Means of infection	Total
Sexual transmission (heterosexual)	4
Intravenous use of narcotics	39
Vertical transmission (mother-child)	1
Not known	3
Total	47

Source of data: The AIDS Prevention Centre.

The State AIDS Prevention Centre implements the state policy in controlling and containing the spread of HIV epidemic. Together with health care facilities and other interested institutions and organisations it develops, introduces and co-ordinates measures regarding HIV prevention, epidemiological surveillance and diagnostics; the Centre also implements medical and psychosocial care of HIV-positive persons and patients. There is also a HIV/AIDS register in the AIDS Prevention Centre.

8. Changes that have been made in the past years in the health care resources are still going on. The entrepreneurial health care forms are changing, as are the types of health institutions. The number of inpatient facilities and beds therein are decreasing. At the same time, according to the policy of primary health care the network of outpatient health care institutions is being upgraded. The proportion of family doctors increases year by year.

The health care system in Latvia is funded from the resources of the central and local government and central government special budgets. Health services are provided free of charge to selected groups of population including disabled children aged less than 16 years, children up to 18 years; these services are also free of charge for children's prophylactic tests in nurseries, schools, children's homes and homes for orphaned children.

The insufficient health care funding from the budget is a universally recognised problem not only from the side of physicians but also from that of social researchers. Moreover, the share of these expenditures in the state budget has practically decreased in recent years.

Table 5.10

Expenditures from the budget for health care

	Per cent of general government budget	Per cent of GDP	Expenditures for health care per capita from the general government budget, lats
1995	9.7	3.9	37.2
1996	9.9	3.9	45.0
1997	9.9	3.8	51.7
1998	9.4	4.1	61.7
1999	9.1	4.1	66.8
2000	8.9	3.6	65.0

In comparison with the other Baltic countries, paid forms of health care are more widespread in Latvia. According to the data of the Living Conditions Survey conducted within the framework of the NORBALT II project in 1999, in 36% of cases the patient paid in full for the visit to family doctor but in 45% of cases the payment was partial the rest being covered from the public health insurance funds. Quite often people who need medical assistance are unable to pay for it due to the limited financial resources. The most serious problems are related to the accessibility of dental services. According to the survey, 30% of respondents during the last 12-month had to give up teeth repair, in 23% of cases they had to give up a visit to a very good doctor and in 22% of cases - making dentures. The analysis of the situation by the type of the household shows that families with children confront the sharpest problems with the accessibility of medical services. For example, families with 2 and more children had to refuse from teeth repair in 57% of cases but a single-parent family with 3 and more children - in 43.4% of cases.

Part VI

THE INCIDENCE AND SEVERITY OF DIFFERENT TYPES OF DISABILITY, PARTICULARLY AMONG CHILDREN

It is written in the public health strategy documents that “people with specific needs due to certain health, social or economic conditions should be protected against social isolation and be provided with easy access to education, health care, social and other necessary services....”. Statistics on disabled persons or persons with specific needs are incomplete and fragmentary. According to the data of the State Social Insurance Agency (SSIA), the number of disabled persons in Latvia at the end of 2000 totalled 119 thsd, that is, 50 disabled persons per every 1000 inhabitants. The State Social Insurance Agency holds records of those disabled persons who according to legislation have been granted a pension or benefit. As can be seen in the table below, the total number of persons with special needs tend to go down. In the period from 1997 to 2000 the total number of disabled persons decreased by 4.3%.

Table 6.1

Number of disabled persons registered with the SSIA, at end of the year

	1997	1998	1999	2000
Number of disabled persons registered with the SSIA, total	124378	122502	120767	119033
of which				
Number of disabled persons in the country receiving pensions and state social benefits	117036	114667	112389	110969
of which:				
disabled persons receiving a pension	108689	105446	102262	100050
disabled persons receiving a state social benefit	8347	9221	10127	10919
Number of disabled children allotted additional payment to the state family allowance	7342	7835	8378	8064

An analysis of the number of disabled children aged less than 16 years reveals an opposite trend – since 1997 this number has increased by 9.8%. The number of disabled children in the total number of disabled persons in 2000 was 6.8%. In the last 10 years the number of disabled children increased threefold. This is a serious signal that the care of children in families on one side and the public health care system on the other side do not ensure an effective restriction of the causes of the problem and risk factors. The current government policy in the area of children’s health care is largely oriented toward the elimination of the consequences of the problem and less to investigation of causes and development of measures for the elimination of these causes.

Within the limits of information available, several institutions make records of disabled children so that these institutions could execute their specific functions. The register of disabled children built by the central rehabilitation services institution contains entries on disabled children up to the age of 16 years.

Table 6.2

Number of disabled children aged 0-16 years (data from the Register of disabled children)

	1995	1996	1997	1998	1999	2000
Number	6145	6637	7690	8007	8628	8461

8461 disabled children were recorded at the end of 2000. The breakdown by the kind of disability shows that the majority of causes are congenital malformations, deformations and chromosomal abnormalities (26.1%).

Table 6.3

Disabled children and adolescents by kind of disability, in per cent

		1997	1998	1999	2000
	Total	100.0	100.0	100.0	100.0
I.	Tuberculosis	0.1	0.1	0.1	0.1
II.	Malignant neoplasms	3.6	3.4	3.6	3.5
III.	Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	0.9	0.8	0.9	1.0
IV.	Endocrine diseases	5.0	5.0	4.8	4.4
V.	Mental and behavioural disorders	17.4	16.9	17.0	15.2
VI.	Inflammatory diseases of the CNS	24.1	23.4	20.3	19.1
VII	Diseases of the eye and adnexa	5.5	7.3	4.9	5.4
.					
VII	Diseases of the ear	8.4	8.0	7.2	6.7
I.					
IX.	Diseases of the circulatory system	0.2	0.2	0.2	0.2
X.	Diseases of the respiratory system	5.5	5.8	6.2	6.2
XI.	Diseases of the digestive system	2.6	2.5	3.2	5.2
XII	Diseases of the skin and subcutaneous tissue	0.4	0.4	0.4	0.4
.					
XII	Diseases of the musculoskeletal system and I. connective system	4.8	5.2	5.3	5.2
XI	Diseases of the genitourinary system	0.8	0.8	0.9	0.9
V.					
XV	Congenital malformations, deformations and chromosomal abnormalities	20.4	19.9	24.6	26.1
.					
XV	Consequences of injuries and poisoning	0.3	0.3	0.4	0.4
I.					

It can be seen from the kind of disability that those groups of illnesses, which cause severe consequences and create physical and social restrictions, are the dominant ones.

Starting with the age of 16 years, the Physicians' Commission for Health Control and Professional Capacity Experience determines new cases of disability and assigns the disability group. In 2000 there were 784 new cases of disability among adolescents who had reached the age of 16. This is by 8.9% more compared with 1999. Since 1995, when data analysis was made for specified ages, the number of new cases of disability among adolescents has increased.

Table 6.4

New cases of disability at the age of 16 years

	Total	Of which		Disability groups			
		males	females	I	II	III	0 (disability not established)
1995	488	274	214	75	242	149	22
1996	526	299	227	72	232	187	35
1997	534	308	226	74	229	193	38
1998	679	397	282	76	292	251	60
1999	720	402	318	79	249	313	79
2000	784	453	331	96	274	309	105

Families with a disabled child receive substantial support from the government. Family with a disabled child who has not yet reached 16 years of age receives an additional payment the size of which has been raised several times in line with the increase of the consumer price index. Beginning in 1998, the additional payment

to the state family benefit for a disabled child is 35 lats per month. Expenditures for this additional payment from the state budget in 2000 were as high as 3.7 mln lats (see the Appendix). According to the data of the State Social Insurance Agency, the number of recipients of this benefit in the period between 1991 to 2000 (until 1996 disabled children received a social pension) was on an upward trend reaching 8.1 thsd in 2000 testifying to the fact that the children's state of health is worsening year by year. The ratio of disabled children to the total number of children under 16 years of age in the period from 1990 to 2000 has also been growing incessantly mounting to 1.8% at the end of 2000 (see the table).

Table 6.5

Number of disabled children in Latvia, at end of the year

Year	Number of disabled children ¹	Per cent change over previous year	Ratio of disabled children to the total number of children aged up to 16 years, %
1990	2612	-	0.4
1991	3874	148.3	0.6
1992	4847	125.1	0.8
1993	5445	112.3	0.9
1994	5923	108.8	1.0
1995	6467	109.2	1.2
1996	7028	108.7	1.3
1997	7342	104.5	1.4
1998	7835	106.7	1.6
1999	8378	106.9	1.8
2000	8064	96.3	1.8

¹Source: State Social Insurance Agency.

When a disabled child reaches the age of 16, he or she receives the state social security benefit. In 2000 the average size of the state social security benefit per month was 34.32 lats.

Within the limits of their possibilities, local governments support the parents that take care of a disabled child. Families with a disabled child are one of the target groups of the social assistance services. In 2000, 4021 families with a disabled child received the social security benefit. Local governments allot a benefit to families with a disabled child if according to the physician's decision such care is necessary. The Law on Social Assistance obliges local governments to compensate transport charges to a person whose child has been assigned disability group and where a special transportation vehicle is necessary. Unfortunately, families with a disabled child are not reflected in statistics on the allocation and paying of benefits and compensations. The said Law on Social Assistance lays down that regional local governments are responsible for the creation and maintenance of social rehabilitation day centres for disabled children providing integrated services as far as possible. This alternative form of care ensures rehabilitation services, acquisition of knowledge and skills, passing of leisure time and integration into society to mentally retarded children or children with special needs without losing at the same time the children's link with the family. Unfortunately the process of creating and using the day centres is rather slow and this can be explained by a lack of funding in the local government budgets. In 2000, there were only 4 day centres for disabled children and during the year 64 children stayed there.

Table 6.6

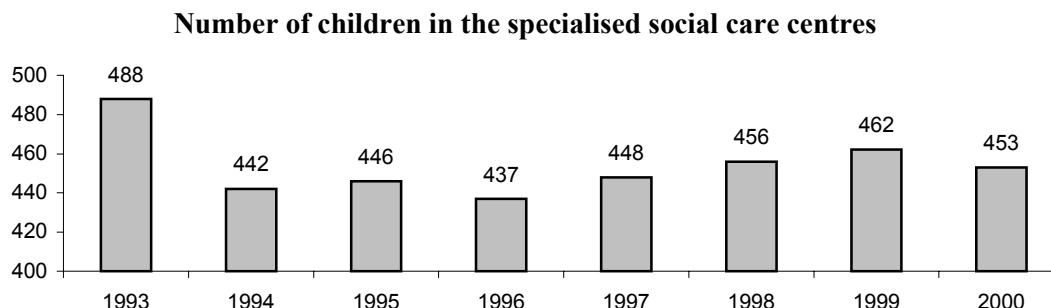
Day centres

	1998	1999	2000 ¹
Day centres for disabled children, number	1	4	4
Number of persons that used the services of day centres	12	480	209
Financing utilised for the maintenance of Day centres, thsd lats	39.0	58.2	59.6

*Data for 2000 do not include data on Riga. More precise information will be sent after 1 November this year.

In the situation when the state does not take part in the funding of day centres and lays all responsibility to the local government budgets, local governments are willing to place the seriously ill disabled children in the specialised social care centres. There were 3 specialised social care centres in Latvia. These childcare institutions receive state funding and they take care of children with mental and physical disorders at the age from 3 to 18 years. In 2000 there were 453 children in the specialised social care centres.

Figure 6.1



All children that are in these institutions are disabled persons with mental disorders. The reason for placing a child in a care institution is the child's state of health. In 2000 the number of children with heavy and deep mental disorders increased and represented 59.8% of the contingent of such establishments. In turn, compared with 1999, the proportion of children with light and medium degree mental disorders fell by 10.7 percentage points in 2000 and the proportion of such children was 40.2%.

Children at the institutions of care are provided with the necessary care, treatment, rehabilitation as well as training by special programs. 286 children from such care institutions attended school in 2000.

The number of special schools is rising proportionally to the increase in the number of children with mental and physical disorders. 54 comprehensive special schools in 1995, 56 such schools in 1999 and 64 in 2000 provided training to disabled children in Latvia. The particularly rapid increase in this type of schools in the last year can be explained by the fact that beginning with the school year 2000/2001 the boarding schools of sanatoriums are included in the number of special schools. In total 10.3 thsd pupils with mental and physical disorders attended secondary special schools in 2000. Training in these schools is available in two languages, Latvian and Russian.

Children whose state of health does not allow them to attend school every day can pursue learning at home and taking lessons at home. The number of such children tends to decrease: in 2000 1410 children acquired knowledge at home, 12% less than in 1995. With the attitude to persons with special needs changing in the positive direction and with increasing activities toward integrating disabled persons into society, this trend will likely continue. The conception "Equal possibilities for everybody" confirmed by the government in 1998 aims to develop social rehabilitation services and formulates the basic views how to better integrate people with special needs into society so that the quality of life of these people would become better.

APENDIX

Table 1
Expenditure for social protection benefits for families with children, thsd lats

	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
Maternity benefit ¹	165	1075	1738	2050	2449	2557	2689	3950	4827	4893
Expenditure for state social assistance benefits - Total	3441.5	20455.3	38105	37599	37728	40794	40728	44366.4	52283	53384
Of which:										
Child-birth grant	30	162	376	827	1601	1849	2195	3317	3426	2735
Child care benefit	565	4711	8924	7826	7110	6527	5608	8273	10729	11589
Family state benefit	2574	14990	27891	27511	27139	28653	28275	26747	29934	30351
Additional payment to the family state benefit for a disabled child ²	11.1	58	805	1259	1630	1935	2197	3227	3350	3701
Compensation to the guardian for the performance of guardian's duties	...	...	...	...	...	815	1184	1332	2834	2852
Benefit to the guardian for the maintenance of a child	...	...	...	...	...	747	996	1144	1630	1746
Compensation for the performance of foster family's duties	...	...	...	...	...	...	...	0.4	1.0	0.7
State social security benefit to a child in case of lost of a bread-winner ³	0.4	2.3	109	176	248	268	273	326	379	409
Benefits to families with children who do not use services of kindergartens	261	532	-	-	-	-	-	-	-	-
Expenditure for state social assistance benefits, in per cent of GDP	2.4	2.0	2.6	1.8	1.6	1.4	1.2	1.2	1.3	1.2

¹ Financed from the state social insurance budget.

² Till 1996: social pension to a disabled child aged less than 16 years.

³ Till 1996: social pension to a child in case of lost of a bread-winner.

Table 2
Social protection benefits to families with children, thsd recipients (benefits) monthly

	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
Maternity benefit ¹	...	...	...	...	...	...	13.3	16.8	10.7	11.5
Survivor's pension to underaged children ¹	24.2	23.2	24.8	27.5	29.2	30.6	4.6	5.0	5.8	6.3
Child-birth benefit – number of benefits	2.6	2.7	2.2	2.0	1.8	1.6	1.6	1.5	1.6	1.7
Child care benefit – number of recipients	83	85	77	68	58	55	51	45	46	43
Of which:										
for the child aged up to 1.5 years	46	43	38	32	27	25	24	22	24	23
for the child aged 1.5 to 3 years	37	42	39	36	31	30	27	23	22	20
Family state benefit – number of benefits	560	564	551	552	546	540	506	494	481	435
Social pension to a disabled child aged less than 16 years ²	3.9	4.8	5.4	5.9	6.5	-	-	-	-	-
Additional payment to family state benefit for a disabled child	-	-	-	-	-	6.4	7.3	7.6	8.4	8.1
State social security benefit to a child in case of lost of a breadwinner	0.3	0.4	0.6	0.8	1.0	0.9	1.0	1.0	1.1	1.2

¹ Financed from the state social insurance budget.

² Since 1996: additional payment to the family state benefit for a disabled child.

Table 3
Average amounts of social protection benefits to families with children, lats per month

	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
Maternity benefit (per day) ¹	0.06	0.53	1.32	2.11	2.91	3.35	2.98	3.49	4.01	4.01
Survivor's pension to children ¹	...	...	...	...	...	...	31.02	36.64	38.86	38.27
Child-birth benefit	0.97	5.08	14.51	34.81	73.37	97.54	112.61	180.40	181.98	182.19
Child care benefit	0.59	5.11	9.73	9.62	9.61	9.58	9.75	14.17	19.03	19.37
Of which:										
for the child aged up to 1.5 years	0.66	5.99	12.00	12.00	12.00	12.00	12.00	21.00	30.00	30.00
for the child aged 1.5 to 3 years	0.50	4.20	7.50	7.50	7.50	7.50	7.50	7.50	7.50	7.50
Family state benefit	0.39	2.32	4.15	4.15	4.15	5.00	4.93	5.00	5.12	5.30
Social pension to a disabled child aged under the age of 16 years ²	2.86	11.99	12.20	18.29	21.79	-	-	-	-	-
Additional payment to family state benefit for a disabled child (paid)	-	-	-	-	-	25.00	26.25	28.10	37.11	37.28
State social security benefit pension to a child in case of lost of a bread-winner ³	1.53	5.90	14.84	18.93	20.98	21.98	24.14	27.36	27.95	28.10

¹ Financed from the state social insurance budget.

² Since 1996: additional payment to the family state benefit for a disabled child.

³ Till 1996: social pension to a child in case of lost of a bread-winner.

Table 3

Distribution of children by somatic disorders or illnesses in various childcare institutions

	Children's homes-shelters			Social care centres for infant and orphaned children			Specialised social care centres for mentally disabled children		
	1998	1999	2000	1998	1999	2000	1998	1999	2000
Number of children in the institutions	2386	2456	2412	797	719	740	456	462	453
of which									
physically handicapped children	307	242	268	344	304	202	305	296	298
children with impaired eyesight	451	496	454	184	209	185	78	155	180
children with dull hearing	61	61	36	24	21	18	26	25	32
children with speech disorders	439	415	350	420	438	477	366	411	409
children recorded as sick with TB	258	273	248	21	19	34	4	5	8
children with other types of somatic disorders	260	390	512	107	153	154	114	86	119
children infected with sexually transmitted diseases	1	6	8	20	30	44	-	-	-
of which									
syphilis	1	3	4	20	30	44	-	-	-
other sexually transmitted diseases	-	3	4	-	-	-	-	-	-
HIV-infected children	-	-	-	1	1	5	-	-	-

Table 4
Dynamic of violent crimes committed by juvenile offenders

	1995		1996		1997		1998		1999		2000	
	Number	as percent of total ^{*)}	Number	as percent of total ^{*)}	Number	as percent of total ^{*)}	Number	as percent of total ^{*)}	Number	as percent of total ^{*)}	Number	as percent of total ^{*)}
Homicide ^{**)}	14	5.0	12	4.7	12	4.6	10	4.2	10	4.7	14	6.4
Aggravated assault	19	3.2	24	5.1	27	5.4	9	2.1	16	3.7	15	3.5
Rape ^{**)}	25	15.8	21	16.2	12	17.6	9	10.8	11	10.9	13	9.7
Robbery	69	7.6	97	15.3	116	14.0	69	11.3	232	8.9	219	6.9

^{*)} In the respective group of offences.

^{**)} Including attempts.

Table 5
Number of incarcerated juveniles

	1996	1997	1998	1999	2000
Number of incarcerated juveniles (14-21.g.v.)	801	818	849	770	749
of which women	15	16	20	20	16