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Estonia

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European Disability Expertise (EDE) provides independent scientific support to the Commission's policy unit responsible for disability issues. It aims to mainstream disability equality in EU policy processes, including implementation of the United Nations Convention on the Rights of Persons with Disabilities.

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¹ For an introduction to the Semester process, see:
<https://www.consilium.europa.eu/en/policies/european-semester/how-european-semester-works/>.

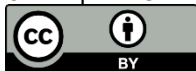
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1 Executive summary and recommendations

1.1 Key points and main challenges for Estonia in 2022

Disability and the labour market

Labour force participation and employment rates in Estonia are above the EU average but the gap between persons with and without disabilities remains almost two-fold. During 2018-2020 disability unemployment rates remained at the lowest level ever, but again the gap remains more than two-fold. In 2021 unemployment rates started to increase, while activity and employment rates decreased, partly due to COVID-19 measures. In view of the Ukrainian war and overall economic downturn, this trend may continue. It will be essential to provide adequate safety-net measures for persons with disabilities and older persons, who have the highest at-risk-of-poverty rates in Europe. A one-time increase in unemployment benefits and pensions indexation is not enough.

Disability, social policies and healthcare

Risk of poverty for persons with disabilities remained largely stable at 41-43 % in 2015-2020, indicating that policies have not been successful in breaking the trend. Women are more likely to be at risk than men. Persons with disabilities still report higher unmet needs for medical examinations than other persons. The share of social protection expenditure on disability benefits (cash etc.) amounted to 1.8 % of GDP in 2021 (about 11 % of social protection). This is slightly below the EU average (2.1 % in 2019) and largely stable. Rates of benefit did not change in 2022 and no increase is planned for 2023, despite the rising consumer price index. On the contrary, total expenditure on social benefits for persons with disabilities is projected to decrease in 2023. The state budget report links this decrease to 'more orderly procedures of granting disability status' which reduces the number of persons granted disability status.

Disability, education and skills

2021 saw some increase in staffing through the *Rajaleidja* (Pathfinder) system but had not increased to pre-pandemic levels of 2019. New mental health challenges have arisen due to COVID-19, notably among pupils with special needs. Neither in schools nor in the *Rajaleidja* system are there enough psychologists to deal with these problems. An additional governmental allowance to enhance digital learning in schools has improved distance learning. In the annual monitoring report on the Education Development Plan for 2021-2035 an increase in pupils with special needs in ordinary schools is acknowledged, but more than a quarter still do not benefit from inclusive education. The main bottleneck remains the relevant training for teachers. Only 46 % of teachers in primary schools feel they are educated to cope with children with special needs, in secondary schools only 43 % of teachers feel the same.

Investment priorities for inclusion and accessibility

During the 2014-2020 EU funding period, 79.2 % (or 76.9 % in case of measures related to care and social participation of persons with disabilities) of the total budget was spent. According to the evaluation report (2022) of the Work Ability Reform ordered by the Ministry of Social Affairs, the monetary effect in terms of public spending is assessed to be positive (or in surplus) in general. The surplus amount is estimated to be EUR 192 million (in 2020 prices), mostly as a function of savings thanks to the number of people with work incapacity participating in the labour market increasing between 2016-2020 because of the reform.

1.2 Recommendations for Estonia

These recommendations are based on the evidence and analysis presented in the following sections of our report.

Recommendation: Index and increase social expenditure on social protection for disability purposes, including for benefits, corresponding to consumer price changes.
Rationale: The share of social protection expenditure on benefits under the disability function is slightly below the EU average and remained stable over the time period of 2015-2021. The rates of benefit did not change in 2022 and no increase is planned for 2023, despite the increasing consumer price index.

Recommendation: Improve availability of medical examinations for persons with disabilities, paying particular attention to the cost and availability of such examinations.
Rationale: Persons with disabilities still report higher unmet needs for medical examinations (too expensive or too far to travel or waiting list) compared to other persons.

Recommendation: Increase the number of students in the fields of psychology and psychiatry in order to meet the increasing needs of society in the mental health area.
Rationale: COVID-19 and remote learning challenges increased mental health problems in the society in general and specifically for persons with disabilities, especially for pupils with special needs. However, the schools and *Rajaleidja* centres lack psychologists to meet the need. Mental health problems have for a long time been underestimated in Estonian society, but more attention is now being paid to this.

Recommendation: Increase training for teachers on the specifics of inclusive education.

Rationale: More than half of teachers in elementary and general schools do not feel that they are sufficiently trained to cope with children with special needs in ordinary classes and this remains the main bottleneck on the pathway to inclusive education.

Recommendation: Annual monitoring of educational outcomes for persons with disabilities needs to become routine statistics.

Rationale: Since 2014, when Statistics Estonia launched the section on persons with disabilities in statistics, it has not been able to provide routine tables on the educational outcomes of persons with disabilities (drop-out rates from general education, rates of tertiary education, or rates of students in inclusive education by educational levels). Each time researchers have to ask for these extra tables for extra charge.

2 Mainstreaming disability equality in the 2022 Semester documents

2.1 Country Report (CR) and Country Specific Recommendation (CSR)

The following key points highlight where a disability perspective was considered, or should be considered, in the CR/CSR. We address the most relevant of these in the next sections.

The 2022 CR contains several references to relevant disability issues:

- p. 2 ‘While poverty has been gradually decreasing, it remains high in certain groups, including unemployed people, older people and people with disabilities.’ The same idea has been indicated on p. 5 in relation to SDG1, and on p. 43 ‘In addition, 40.4 % of people with disabilities are at risk of poverty or social exclusion, which is one of the highest rates in the EU (compared to the EU average of 28.9 % in 2020).’
- p. 8 ‘However, the adequacy of the minimum income is low, and the at risk of poverty or social exclusion rate for older people and for people with disabilities is one of the highest in the EU (see Annex 12). (...) Estonia has taken some steps to improve social protection of older people and people with disabilities, notably by increasing pensions and unemployment benefits.’
- p. 9 ‘In 2020 the rate of early leavers from education and training fell below the EU average. However, this hides significant differences: there is a higher rate for men, those in rural areas and amongst youth with disabilities.’ The same was touched on p. 42 ‘Early school leaving was also higher in rural areas (12.3 %), and among young people with disabilities (16.2 %).’
- p. 21 Through European Structural and Investment Funds (ESIF) 2014-2020 some aspects have been targeted: ‘It is also promoting social inclusion through better welfare and social services, such as affordable childcare and care services for older people and people with disabilities (EUR 169 million) (...) The ESF also invested EUR 241 million for a more cohesive labour market, including EUR 157.5 million to reform the Work Ability system that helps people with disabilities join the labour market.’
- p. 2 ‘The reported unmet need for medical care is one of the highest in the EU, pointing to gaps in access to and coverage of healthcare services.’
- p. 2 ‘Population ageing is putting pressure on the long-term care system, which is already unable to meet the current demand.’

Disability is also mentioned in the 2022 CSR in relation to the high risk of poverty and social exclusion, but some of the general recommendations are clearly of high relevance from a disability perspective, such as:

- targeted support to households most vulnerable to energy price hikes;
- support to people fleeing Ukraine;

- investment for the green and digital transition;
- implementation of recovery and resilience plan and previous CSRs;
- this includes actions on earlier recommendations concerning healthcare, labour market and social policy, education and skills, such as:
 - extending coverage of unemployment benefits;
 - affordability and quality of long-term care; and
 - integrating health and social services.

2.2 National Reform Programme (NRP) and Recovery and Resilience Plan (RRP)

The following key points highlight where the situation of people with disabilities or disability policies is relevant to the NRP/RRP. We analyse the most relevant of these in the next sections.

In the NRP one of the indicators refers the perceived risks of the population (based on the OECD Risks That Matter Survey). The worries of people of becoming ill or disabled decreased in 2020 (52.3%) compared to 2018 (60.7%), Annex (p. 4) NRP. According to the NRP, the 2035 target for this perceived risk is to remain below the baseline (2018) value.

- p. 6 ‘While in 2019, the share of the population with a high care burden was 2.1 %, it has increased to 2.3 % in 2021. This means that there are just over 25,000 people in Estonia with a high care burden. Achieving the 2035 target (1.3 %) will require continued focus on both the comprehensive development and the funding of care services.’
- p. 14 ‘A reform of the support system for children with special needs was launched to provide children with faster, more effective, and more comprehensive care. Amendments are also being prepared on the consolidation of national responsibilities for the assessment and assistance of children with special needs and on the principles for determining disability and rehabilitation services. Specific proposals will be completed during 2022.’
- p. 18 ‘Amendments to the Social Welfare Act were approved, which create a more uniform basis for identifying the need for support for people with a care burden. Thanks to the changes, the state and local governments will be able to provide the necessary assistance to people with disabilities faster and more comprehensively.’
- p. 18. ‘A legislative intent for the organisation and modernisation of funding for special care services is being prepared and will be completed in the summer of 2022. The proposed changes focus on the organisation and funding of special care services that support living at home; in the case of round-the-clock special care services, the focus is on changes in their content.’
- p. 18. ‘The draft legislation on the accessibility of electronic products and services was also approved, which will facilitate the independent coping of people with special needs. When developing and offering electronic products and services,

businesses will also have to take into account special needs, such as visual or hearing impairments or problems with motor skills.’

- p. 23 ‘Increasing accessibility is also one of the goals of the amendment to the Media Services Act passed by the Riigikogu in February 2022, pursuant to which service providers are required to prepare accessibility action plans to improve access to audio-visual media services for people with disabilities.’

There is no direct reference to disability in the RRP summary actions but several key measures could be assessed from a disability perspective, such as:

- a common transport system for the Tallinn capital region;
- provision of digital skills;
- digitalising public administration;
- increasing the resilience and accessibility of the healthcare system;
- incentivising youth employment through wage and training support;
- extending unemployment benefits in periods of high unemployment;
- improving the provision of long-term care, in particular for children with higher care needs; and
- example project: ‘My first job’.

2.3 Semester links to CRPD and national disability action plans

It is important that Semester plans align with national disability strategy. In Estonia, this refers to the Welfare Development Plan 2016-2023. Disability issues (as well as gender equality) were addressed in the broader Welfare Development Plan 2016-2023, which focuses on employment, social protection and support for independent living. In April 2021, the UN CRPD Committee recommended that Estonia ‘Adopt a comprehensive disability strategy and a national action plan for implementing the rights of persons with disabilities in the Convention, across all government sectors and levels, in order to address attitudinal and environmental barriers that hinder participation of persons with disabilities in society’. The new Welfare Development Plan for 2023-2030, which is being drafted also addresses the issues for persons with disabilities.²

Relevant recommendations arising from participation in the United Nations Convention on the Rights of Persons with Disabilities (CRPD) are highlighted in the following sections. The last UN CRPD Committee recommendations to Estonia were in 2021, the most recent submission by Estonia was in 2019 and the most recent response from the Committee was the 2021 Concluding Observations.

² See: <https://www.valitsus.ee/media/3946/download>.

3 Disability and the labour market – analysis of the situation and the effectiveness of policies

In 2021, the UN CRPD Committee made the following recommendations to Estonia:

[Article 27 UN CRPD](#) addresses 'Work and Employment'.

'53. The Committee recommends that the State party, in line with target 8.5 of the Sustainable Development Goals: (a) Strengthen measures to ensure work and employment of persons with disabilities in the open labour market, and inclusive work environments, including for persons with disabilities taking part in deinstitutionalization processes, those living in rural areas, persons with intellectual, persons with hearing impairments, and persons with psychosocial disabilities; (b) Adopt a strategy to abolish sheltered workshops. The State party should review labour conditions of all persons with disabilities, and ensure that persons with disabilities are not paid below the minimum wage; (c) Adopt measures, alongside with the workability reform to combat attitudinal barriers among employers, and adopt an action plan to assess periodically accessibility at the work place, including access to transportation, alternative means of information and communication, sign language and speech to text interpretation, and pictograms for job seekers and employees. The State party should adopt policies and procedures that establish and support the infrastructure for the provision of personal assistance at the workplace; (d) Ensure that the right to seek reasonable accommodation in the workplace is recognised for employees in the public and private sector; (e) Develop a comprehensive system of vocational and professional training for persons with disabilities and effective transitions from vocational and tertiary education to work and employment.'

3.1 Summary of the labour market situation of persons with disabilities

According to the Social Scoreboard indicator, cited in the Semester package, the disability employment gap in Estonia is considered 'Better than average'.

Data from EU-SILC indicate an employment rate for persons with disabilities in Estonia of 61.0 % in 2020, compared to 83.9 % for other persons. This results in an estimated disability employment gap of approximately 21 percentage points (estimated EU27 average gap 24.5, see Tables 2-4) or an employment chances ratio of 0.7. Statistics published on the Eurostat database indicate a disability employment gap of 20.6 percentage points in 2020, using a slightly different methodology, falling to 18.7 in 2021.³

The same data indicate unemployment rates of 10.9 % and 5.6 %, respectively in 2020 (see Tables 5-7) and the economic activity rate for persons with disabilities in Estonia was 68.4 %, compared to 88.9 % for other persons (see Tables 8-10). These indications are broken down by gender and age in the respective tables in Annex.

According to national data sources,⁴ labour force participation rates reached the highest rates ever by 2021 for those without disabilities. The long-term trends for persons with disabilities have also been favourable throughout recent years. This has

³ Eurostat, Disability employment gap by level of activity limitation and sex (source EU-SILC), 2022, https://ec.europa.eu/eurostat/databrowser/view/hlth_dlm200/default/table.

⁴ Statistics Estonia: https://andmed.stat.ee/en/stat/sotsiaalelu_tervishoid_puudega-inimesed_puue-tooheive/THV601.

primarily been due to economic growth, as mentioned in previous reports, and also the Work Ability Reform launched in 2016 and evaluated in the report (2022) commissioned by the Ministry of Social Affairs.⁵ However, there is an indication of the labour market slowing down, which possibly affects more vulnerable groups like those with disabilities first. So since the highest rate of 46.7 % in 2019, the participation rate for persons with disabilities has fluctuated around 45 %. The latter is almost half the rate of that for persons without disabilities (86.7 %). As concerns another definition – those with limited in their daily activities, more in line with the EU-SILC for the EU average, their participation rate in the age range 20-64 seems to be above the EU average (67.6 % in Estonia vs EU 62 %, EU non-disabled 82.5 %). For persons with disabilities, the employment rate is decreasing and the unemployment rate is increasing; for those without disabilities, the year of pandemic in 2020 was the worst in terms of unemployment, recovering somewhat by 2021. For 2018-2020 persons with disabilities had the lowest ever unemployment rates, which in 2021 started to increase, but the rate remains half what it was 13 years ago (27.2 % in 2009 vs 13.1 % in 2021). However, it is still more than twice the level of those without disabilities (5.8 % in 2021).

Due to the impact of the COVID-19 crisis on employment in 2020-2021, some caution is needed when interpreting trend data.

3.2 Analysis of labour market policies relevant to the Semester

For reference, see the 2022 National Reform Programme, the Recovery and Resilience Plan for Estonia and the Welfare Development Plan 2016-2023.

The Work Ability Reform, which has started to be implemented gradually since 2016-2017, may have had the effect of bringing more persons with disabilities into the labour market. The overall shortage of labour in recent years in Estonia has also had the effect of increasing employment rates for persons with disabilities. Since persons with disabilities are engaged in different branches of industry from those without disabilities, the pandemic did not have an increasing effect on unemployment rates of persons with disabilities. However, the economic downturn might have had this effect and the first signs of this seem to be appearing.

There have been no special measures taken during the last few years with regard to persons with disabilities and their activity in the labour market. Since 2016, the Work Ability Reform has been carried out. Each year the daily rate of the Work Ability benefit is indexed and since 1 April 2022 the daily rate amounts to EUR 16.33.⁶ Due to the COVID-19 pandemic, the Estonian government announced an emergency situation in March 2020. This may have hindered the rights of those who needed their work ability assessed during this period. As a consequence, there was an amendment made to the Work Ability Allowance Act, introducing the possibility, in extraordinary circumstances like an emergency situation, a state of emergency or a state of war,

⁵ Centar & Praxis (2022). *Töövõime toetamise süsteemi loomise ja juurutamise makromajandusliku mõju hindamine. Lõpparuann* (Evaluation of the macroeconomic effect of creating the Work Ability support system. Final report), <https://sm.ee/media/1996/download>.

⁶ Unemployment Insurance Fund: Work Ability Allowance, <https://www.tootukassa.ee/en/services/work-ability-allowance/amount-work-ability-allowance>.

and for the following six months, that an evaluation by a doctor made 12 months prior to the assessment would continue to be valid.⁷

The UN CPRD report raises some important questions like sheltered workplaces, addressing the issue from the viewpoint of granting workers salaries which are at least at the minimum level. As the sheltered workplace service is offered by the Unemployment Insurance Fund, first those with lower ability to work have to be registered as unemployed and their work ability has to be assessed, thus they get Work Ability benefit and a salary.⁸ Work Ability benefit and salary together have a ceiling, which is higher than the average salary.⁹ Thus, the authors of the current report think that there is a need for sheltered workplaces. Similarly, adaptation of workplaces is addressed through the Unemployment Insurance Fund,¹⁰ although the number of these adaptations and the amount of money is very low.

The Commission addresses in its communication the fact that unemployment benefits have been low in general for Estonia. This was amended by the Labour Market Services and Benefits Act,¹¹ which came into force on 1 January 2021 and stipulates that the 31-fold daily rate for the unemployment rate has to remain annually at the level of 50 % of the minimum wage established in the Employment Contracts Act in force on 1 July of the preceding budgetary year.

⁷ Work Ability Allowance Act, <https://www.riigiteataja.ee/en/eli/ee/530042020009/consolide>.

⁸ Unemployment Insurance Fund: sheltered workplaces, <https://www.tootukassa.ee/en/services/person-decreased-work-capability/sheltered-employment>.

⁹ Unemployment Insurance Fund: Work Ability Allowance, <https://www.tootukassa.ee/en/services/work-ability-allowance/amount-work-ability-allowance>.

¹⁰ Unemployment Insurance Fund: adapting the workstation, <https://www.tootukassa.ee/en/services/person-decreased-work-capability/adapting-workstation>.

¹¹ Labour Market Services and Benefits Act, <https://www.riigiteataja.ee/en/eli/510032022003/consolide>.

4 Disability, social policies and healthcare – analysis of the situation and the effectiveness of policies

In 2021, the UN CRPD Committee made the following recommendations to Estonia:

[Article 28 UN CRPD](#) addresses ‘Adequate standard of living and social protection’.

‘55. Taking into account the links between article 28 of the Convention and target 1.3 of the Sustainable Development Goals, the Committee recommends that the State party: (a) Mainstream the rights of persons with disabilities within the national strategy for poverty eradication with concrete expeditious measures and earmarked budgets to address situations of disadvantage and exclusion concerning older persons with disabilities, in particular older women; (b) Prioritize persons with disabilities in the socio-economic response to the COVID-19 pandemic, and ensure the access to appropriate and affordable services and facilities for the general population, assistance, transportation and to public housing programmes for persons with disabilities, particularly to women with disabilities.’

[Article 19 UN CRPD](#) addresses ‘Living independently in the community’.

‘39. The Committee recalls its General comment No. 5 (2017) on living independently and being included in the community, and recommends that the State party: (a) Adopt a strategy, including awareness raising activities to promote understanding of the right to choose and self-determination of persons with disabilities concerning living arrangements, the right to not be obliged to live in a particular living arrangement, and the value of inclusion in the community, as opposed to segregation from the community; (b) Implement a moratorium of new institutionalization of children and adults with disabilities, revise its deinstitutionalization strategy, and redirect the use of public funds, including the European Regional Development funds to developing individualized support for living independently, and transition programmes from congregated settings, such as ‘home-like institutions’, ‘family-type houses’ and ‘special care villages’ to inclusion in the community; (c) Develop a system for self-managed personal assistance, which include the person-directed tools for supporting living independently in the community, according to an individual’s requirements and preferences; (d) Set up a timeframe and benchmarks for achieving accessibility to mainstream services in the community by persons with disabilities on an equal basis with others.’

[Article 25 UN CRPD](#) addresses ‘Health’.

‘49. Taking into account the links between article 25 of the Convention and targets 3.7 and 3.8 of the Sustainable Development Goals, the Committee recommends that the State party: (a) Strengthen action plans to ensure accessibility and availability of health care services and equipment for persons with disabilities; (b) Provide women and girls with disabilities with access to sexual and reproductive health care and services, and ensure supported decision-making for women with intellectual or psychosocial disabilities reaffirming their sexual and reproductive autonomy and self-determination; (c) Develop training for health care professionals on the rights of persons with disabilities, including their skills, support measures and information and communication means and methods; (d) Allocate human, technical and financial resources for developing quality health services, and health supervision for persons requiring higher levels of support; (e) Improve health outcomes for persons with disabilities affected by COVID-19, including access to health care facilities for the general population; (f) Ensure that persons with disabilities can access to medical services on the basis of the free and informed consent.’

4.1 Summary of the social situation of persons with disabilities

Data from EU-SILC indicate that the poverty risk rate for working age persons with disabilities in Estonia was 25.6 % in 2020, compared to 12.8 % for other persons of similar age – an estimated disability poverty gap of approximately 13 percentage points (see Table 14). For people aged over 65, the disability poverty gap was 16.7 points (48.1 % for older persons with disabilities and 31.4 % for other persons of similar age). The tables in the Annex also indicate the respective rates of risk of poverty or social exclusion and break these down by gender as well as age. Recently updated data from Eurostat confirm the relative risk levels in 2020, reducing slightly to 24.5 % in 2021 for the working age disabled population and 46.1 % for the older age group.¹²

For all age groups combined, the at-risk-of-poverty rate for persons with disabilities has remained largely stable at the level of 41-43 % over the time period of 2015-2020, indicating that the policies have not been successful in breaking the trend.¹³ Over the same time period, the at-risk-of-poverty rate for women with disabilities (46-48 %) has been about 10 percentage points higher than for men with disabilities (34-37 %).¹⁴ The higher poverty risk for persons with disabilities is also confirmed by data on income distribution, as persons with disabilities are strongly overrepresented in the lower income quintiles. Among women with disabilities, 45.6 % are in the first (lowest) income quintile and 25.1 % are in the second income quintile, whereas only 5.4 % are in the highest income quintile. Among men with disabilities, 35.6 % are in the lowest income quintile and 32.8 % in the second income quintile, while again only 5 % are in the highest income quintile.¹⁵ Accordingly, there is a clear association between low income and disability prevalence.

For persons with disabilities of working age in Estonia (aged 18-64) the risk of poverty before social transfers was 47.4 % and 25.6 % after transfers. The in-work poverty rate for persons with disabilities in this age range was 13.9 %, in 2020 and in 2021.

Of interest regarding health policy are the data on self-reported unmet needs for medical examination (too expensive or too far to travel or waiting list). Disability equality gaps are evident here too and, on this basis, the rate for persons with disabilities in Estonia was 20.4 %, compared to 9.4 % for other persons.

4.2. Analysis of social policies relevant to the Semester

For reference, see the 2022 National Reform Programme,¹⁶ the Recovery and Resilience Plan for Estonia and the Welfare Development Plan 2016-2023.

¹² Eurostat, People at risk of poverty by level of activity limitation, sex and age, 2022, https://ec.europa.eu/eurostat/databrowser/view/HLTH_DPE020_custom_3348056.

¹³ See: https://andmed.stat.ee/et/stat/sotsiaalelu_sotsiaalne-kaitse_sotsiaalkaitse-kogukulutused/SKK02.

¹⁴ See: https://andmed.stat.ee/en/stat/sotsiaalelu_tervishoid_puudega-inimesed_puue-toimetulek/THV41.

¹⁵ See: https://andmed.stat.ee/en/stat/sotsiaalelu_tervishoid_puudega-inimesed_puue-toimetulek/THV46.

¹⁶ See: https://ec.europa.eu/info/sites/default/files/nrp_2022_estonia_en.pdf.

The share of social protection expenditure on benefits (cash and in kind) under the disability function amounted to 1.8 % of GDP in 2021 (about 11 % of total social protection expenditure in Estonia).¹⁷ This share is slightly below the EU average (2.1 % in 2019) and has remained largely stable over the time period of 2015-2021.

As regards cash benefits payable to persons with reduced work ability and / or disability, the mechanism for upgrading the benefit rate differs between the two main benefit schemes. The rates of Work Ability allowances payable to persons of working age (from 16 to pension age) are indexed annually from 1 April 2022 with the same index as state pensions.¹⁸ From 1 April 2022 the applicable benefit rates are EUR 279.24 per month for a person with partial work ability and EUR 489.90 per month for a person with no work ability.¹⁹ On the other hand, there is no automatic upgrading of benefits payable under the Social Benefits for Disabled Persons Act.²⁰ The rates of benefit did not change in 2022 and no increase is planned for 2023, despite the increasing consumer price index. On the contrary, according to the 2023 draft state budget (which passed the first reading in Parliament in October 2022) the total expenditure on social benefits for persons with disabilities was projected to decrease in 2023. The explanatory report of the State budget links this decrease (from EUR 72.4 million in 2022 to EUR 62.6 million in 2023) to the 'more orderly procedures of granting disability status' which has reduced the number of persons granted disability status.²¹

Concerning needs assessment for adult persons with disabilities, the Social Welfare Act was amended, effective from May 2022. In the case of adult persons with profound disabilities, the local municipality is now obliged to assess the need for assistance on their own initiative, approaching the person with the offer to assess their needs and provide assistance within 30 days of when the municipality became aware of the person in their municipality. In the case of adult persons with moderate and severe disabilities, the local municipality is not under the same obligation, but may initiate an assessment of the need for assistance on their own initiative, i.e. without the individual having to apply for assistance themselves.²² However, the assessment procedure and the provision of assistance can only take place with the consent of the person concerned.

From May 2022, with amendments to the Social Benefits for Disabled Persons Act, for persons of pension age with stable or progressive conditions which cannot be compensated for with treatment, pharmaceuticals, technical aids or services, disability status may be granted for their lifetime.²³ Formerly, disability status for persons in of pension age could be granted for a maximum of five years, with the possibility of re-assessment after the expiry of this period. The amendment is easing the burden of re-assessment for older persons with disabilities.

¹⁷ See: https://andmed.stat.ee/et/stat/sotsiaalelu_sotsiaalne-kaitse_sotsiaalkaitse-kogukulutused/SKK02.

¹⁸ See: <https://www.riigiteataja.ee/en/eli/510032022004/consolide>.

¹⁹ See: <https://www.tootukassa.ee/et/uudised/1-aprillist-touseb-toovoimetoetuse-paevamaar-0>.

²⁰ See: <https://www.riigiteataja.ee/en/eli/509052022002/consolide>.

²¹ See: <https://www.fin.ee/media/7579/download> (p. 347).

²² See: <https://www.riigiteataja.ee/akt/128042022001>.

²³ See: <https://www.riigiteataja.ee/akt/128042022001>.

The Ministry of Social Affairs has been coordinating the process of drafting the Welfare Development Plan 2023-2030. The final draft was to be presented to the Government for adoption in December 2022.²⁴ The current draft (from June 2022) refers to persons with disabilities on several occasions, including:²⁵

- the development of a community-based and person-centred care model for delivery of services for persons with special psychological needs;
- securing accessibility of the physical environment, information and services for all members of society, including persons with special needs;
- simplification of the needs assessment and care management processes, in particular for children with special needs; and
- raising the quality of care, renewing the content of rehabilitation services and developing integrated support measures for children with high care needs, reducing the care burden of parents.

The Ministry has piloted a new, person-centred special care model for persons with special psychological needs, which is aiming to integrate various service components into a holistic care plan, with consideration of the various levels of care needs. In 2021, Civitta Eesti AS made a cost assessment analysis comparing the costs of the current special care and rehabilitation services with the costs of the provision of person-centred special care according to the level of needs.²⁶ The analysis indicated that, with the new service model, the total costs of special care services would increase about threefold (from EUR 37 million to circa EUR 120 million). The projected increase is mainly explained by the current underfinancing and the limited availability of special care services.

In 2022, Civitta Eesti AS also assessed the impact and effectiveness of measures and initiatives to develop social welfare services which have been financed from the EU cohesion policy funds, including:²⁷

- piloting of the integrated and person-centred care model for persons with special psychological needs;
- reorganisation of special care institutions; and
- adaptation of residential dwellings for persons with disabilities.

The analysis finds that the process of deinstitutionalisation and reorganisation of special care institutions has significantly improved the living conditions in new service locations and the floor plans of new premises permit a more personalised approach and support greater independence. On the other hand, while one of the aims of the reform has been to facilitate the integration of residents of special care institutions into local communities, this has not materialised to any significant degree and more active collaboration with local communities is still to be developed. The analysis also indicates that the construction of new service locations is rather expensive, in particular in Tallinn and its surrounding areas, even if the maintenance (heating and electricity) costs of the new premises are lower. By the end of 2020 the service location

²⁴ See: <https://www.sm.ee/heaolu-arengukava-2023-2030>.

²⁵ See: <https://www.sm.ee/media/2024/download>.

²⁶ See: <https://www.sm.ee/media/2312/download>.

²⁷ See: <https://www.sm.ee/media/2313/download>.

was renewed for 1 342 persons, which is 79 % of the target set for 2023. As to the adaptation of dwellings for persons with disabilities, 2 254 homes were adapted during the period of 2017-2020 (exceeding the initial target of 2 000 homes by 13 %). A survey of beneficiaries of the service indicated that 88 % of the respondents assessed the quality of adaptations as good or very good, and considered that the service met their needs. The analysis also offered some recommendations for further development of the services initiated with funding from EU cohesion policy funds.

5 Disability, education and skills – analysis of the situation and the effectiveness of policies

In 2021, the UN CRPD Committee made the following recommendations to Estonia:

[Article 24 UN CRPD](#) addresses 'Education'.

'47. Recalling its general comment No. 4 (2016) on the Right to inclusive education and the Sustainable Development Goal 4, target 4.5 and indicator 4 (a), the Committee recommends, that the State party: (a) Develop the strategy for implementing quality inclusive education with specific targets, timelines, budget allocation, and share of responsibilities between national and municipal levels; (b) Establish a policy framework that recognises the right of persons with disabilities to seek individualized supports as reasonable accommodation in education, when so required; (c) Ensure education is an area of life covered under ant-discrimination and includes the denial of reasonable accommodation as a form of discrimination; (d) Provide students with disabilities with assistive compensatory aids and learning materials in alternative/accessible formats, including inclusive digital access, modes and means of communication, including Easy Read, communication aids and assistive and information technology, and ensure teachers fluent in Estonian Sign Language; (e) Take measures, including the provision of technical equipment, and the adoption of regulations to ensure that children with disabilities receive the individualized support required within the quality and inclusive education system during the COVID-19 pandemic period, especially in rural areas and those facing economic hardship, and guarantee for children with chronic diseases equal access to school.'

5.1 Summary of the educational situation of persons with disabilities

The EU-SILC 2020 estimates concerning educational attainment should be treated with caution due to relatively wide confidence intervals but they consistently indicate disability equality gaps (an average of 2-3 years provides a more stable indication). Table 16 indicates early school leaving rates disaggregated by disability status in Estonia. Young people with disabilities (aged 18-24) tend to leave school early significantly more than non-disabled peers of the same age groups (and this is reinforced by widening the sample size to age 18-29). Table 17 shows completion rates of tertiary education disaggregated by disability and age group. Persons with disabilities (aged 30-34) are less likely to complete tertiary education than their peers (and this is reinforced in the wider age range 30-39).

At the basic level of education, according to the Ministry of Education and Research report, the number of support persons has increased and even exceeds the target of 72 % for 2021, being 74 % of the identified need.²⁸ The same report mentions that in 2021 34.4 % of pupils with special needs were studying in regular classes. The level of teachers' knowledge about how to cope with pupils with special needs has risen to 46 % of teachers according to the same report. However, the gap is still enormous and needs constant addressing.

²⁸ Ministry of Education and Research report (2022) on 2021 results of the 'Tark ja tegus rahvas' programme, https://www.hm.ee/sites/default/files/tuv_tark_ja_tegus_rahvas_2021_tulemusaruanne.pdf.

The last few years in education have been challenged by multiple crises. Firstly, the COVID-19 pandemic has certainly had an impact on the quality of education received in schools. Secondly, in 2022 the system was further challenged by the crisis related to the war in Ukraine which, for the education system, has meant accommodating the Ukrainian refugee children²⁹ at the same time as the transition to Estonian-language-centred schooling has been adopted by the Government.³⁰

5.2 Analysis of education policies relevant to the Semester

For reference, see the 2022 National Reform Programme, the Recovery and Resilience Plan for Estonia and the Welfare Development Plan 2016-2023. A new plan for 2023-2030 has been drafted but not yet approved by the Government.

In the Education Development Plan 2021-2035, inclusive education is one of the targets related to students with special needs. Since 2022, the Ministry of Education and Research has been monitoring the main indicators in the Plan. In relation to inclusive education, the main problem remains that pupils with special needs are studying in separate classes rather than in mainstream classes and schools. The main issue at both the primary level of education and at the secondary level has been the scarcity of support persons to help pupils with special needs in their transition to mainstream schools. The Chancellor of Justice, who is also the ombudsman for persons with disabilities, has had to solve problems at the kindergarten level due to lack of support persons and the ending of funding from the European Social Fund.³¹ The Chancellor had to remind the local authority that 'a local authority is responsible for assistance to a child both in kindergarten as well as in providing social services, and in situations causing dispute must find the best solution for the child'. She also highlighted that it is the task of the authorities to monitor their field and ensure the functions laid down by law are actually carried out. Thus she recalled that 'the Social Insurance Board must exercise supervision in the field of child protection as well as social services; the Ministry of Education and Research is tasked with verifying the activities of kindergartens and schools'.³²

The lack of support personnel in schools is still a problem. However, besides schools, *Rajaleidja* (Pathfinder) centres³³ deliver the support upon request. In 2021 the number of consultations at *Rajaleidja* grew compared to 2020 which was hampered by the COVID-19 pandemic. The need for psychologists has risen even more due to the COVID-19 impact on mental health; the need for psychologists still exceeds the possibility of fulfilling these requests.³⁴

²⁹ Ministry of Education and Research information on Ukrainian refugees' education, <https://www.hm.ee/et/ukraina>.

³⁰ See: <https://www.hm.ee/en/transition>; <https://www.hm.ee/en/news/government-has-approved-activities-ensure-quick-transition-estonian-language-education>.

³¹ Chancellor of Justice annual report 2020, <https://www.oiguskantsler.ee/annual-report-2020/equal-treatment>.

³² Chancellor of Justice annual report 2020, <https://www.oiguskantsler.ee/annual-report-2020/equal-treatment>.

³³ *Rajaleidja* (Pathfinder) website, <https://rajaleidja.ee/>.

³⁴ Ministry of Education and Research report (2022) on 2021 results of the 'Tark ja tegus rahvas' programme, https://www.hm.ee/sites/default/files/tuv_tark_ja_tegus_rahvas_2021_tulemusaruanne.pdf.

COVID-19 highlighted the need to enhance digital materials for learning. For this, the Government provided a one-off allowance of EUR 1.5 million (EUR 10 per student) for schools to develop digital learning materials in order to better cope with the challenges of remote learning.³⁵

Another challenge in Estonia is related to poor knowledge of the Estonian language among students (including those with special needs) with a first language other than Estonian, and in 2021 a downward trend was seen in this regard.³⁶ With the new strategy towards Estonian-language-centred schools,³⁷ challenges arise for all those who are not integrated into Estonian society. However, the focus on Estonian-centred schools might take attention away from the needs of pupils with other special needs.

The report of the Ministry of Education and Research of 2021 on the Development Plan goals in the field of education makes no mention of Estonian Sign Language and its development. The Association of Estonian Sign Language delivers e-materials for learning the language and other appropriate materials.³⁸

³⁵ Ministry of Education and Research report (2022) on 2021 results of the ‘*Tark ja tegus rahvas*’ programme, https://www.hm.ee/sites/default/files/tuv_tark_ja_tegus_rahvas_2021_tulemusaruanne.pdf (p.18).

³⁶ Ministry of Education and Research report (2022) on 2021 results of the ‘*Tark ja tegus rahvas*’ programme, https://www.hm.ee/sites/default/files/tuv_tark_ja_tegus_rahvas_2021_tulemusaruanne.pdf.

³⁷ Ministry of Education and Research press release (14 October 2022), <https://www.hm.ee/en/news/government-has-approved-activities-ensure-quick-transition-estonian-language-education>.

³⁸ Sign Language e-materials: <https://viipekeel.ee/e-materjalid/>.

6 Investment priorities in relation to disability

In terms of the 2014-2020 funding period, EUR 2.9 billion or 79.2 % of the total budget has been paid out (as of 31 August 2022).³⁹ Regarding the measures (under points 2 and 3) that mostly cover developing different (health) care services to increase labour force and social participation for people with disabilities as well as carers of people (including children) with disabilities, a total of EUR 438 million, or 79.6 % of the budget, has been spent.

The list of all funded projects from EU funds is available and updated monthly.⁴⁰ Out of the funded (but not yet finished) projects most are oriented towards implementing (health) care measures. Examples include several municipalities developing home-based care services; some others focus on developing day-care or activities and support groups for people with disabilities.

According to the evaluation report (2022) of the Work Ability Reform commissioned by the Ministry of Social Affairs,⁴¹ the monetary effect in terms of public spending is assessed to be positive (or in surplus) in general. The surplus amount is estimated to be EUR 192 million (in 2020 prices), mostly as a function of savings thanks to the increase in the number of people with reduced work capacity participating in the labour market between 2016 and 2020 because of the reform.

There are no known investments in digitalisation with a focus on disability.

³⁹ Structural funds overview, <https://pilv.rtk.ee/apps/onlyoffice/s/YTRE88H2o2wBWwQ?fileId=61519>.

⁴⁰ Finished and funded projects from EU funds, <https://rtk.ee/media/4185/download>.

⁴¹ Centar & Praxis (2022). *Töövõime toetamise süsteemi loomise ja juurutamise makromajandusliku mõju hindamine. Lõpparuann* (Evaluation of the macroeconomic effect of creating the Work Ability support system. Final report), <https://sm.ee/media/1996/download>.

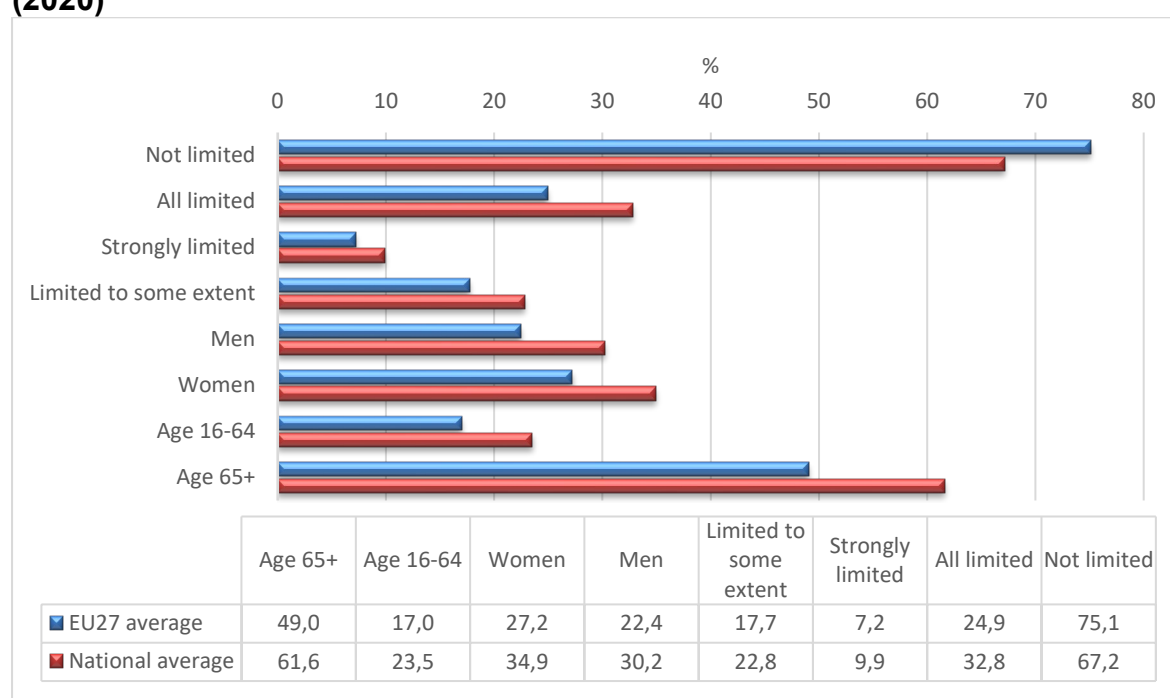
7 Annex: disability data relevant to the Semester

See also disability data published in the Eurostat database⁴² and statistical reports.⁴³

Unless specified, the summary statistics are drawn from the most recent EU-SILC data available to researchers from Eurostat. The EU-SILC sample includes people living in private households and does not include people living in institutions (congregative households). The sampling methods vary somewhat in each country.

The proxy used to identify people with disabilities (impairments) is whether ‘for at least the past 6 months’ the respondent reports that they have been ‘limited because of a health problem in activities people usually do’.⁴⁴

Table 1: Self-reported ‘activity limitations’ as a proxy for impairment / disability (2020)



Source: EU-SILC 2020 Release April 2022

In subsequent tables, these data are used to indicate ‘disability’ equality gaps and trends relevant to the analytical sections – for the labour market, social policies and healthcare, and education – by comparing outcomes for persons who report and do not report ‘activity limitations’.⁴⁵ National estimates for Estonia are compared with EU27 mean averages for the most recent year.⁴⁶

⁴² Eurostat Health Database: <https://ec.europa.eu/eurostat/web/health/data/database>.

⁴³ Eurostat (2019) Disability Statistics: https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Disability_statistics.

⁴⁴ The EU-SILC survey questions are contained in the Minimum European Health Module (MEHM), [https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Special:WhatLinksHere/Glossary:Minimum_European_Health_Module_\(MEHM\)](https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Special:WhatLinksHere/Glossary:Minimum_European_Health_Module_(MEHM)).

⁴⁵ This methodology was developed in the annual statistical reports of ANED, available at: <http://www.disability-europe.net/theme/statistical-indicators>.

⁴⁶ The exit of the United Kingdom from the EU changed the EU average. EU27 averages have also been affected by time series breaks in other large countries, such as Germany.

7.1 Data relevant to disability and the labour market

Table 2: EU and Estonia employment rates, by disability and gender (aged 20-64) (2020)

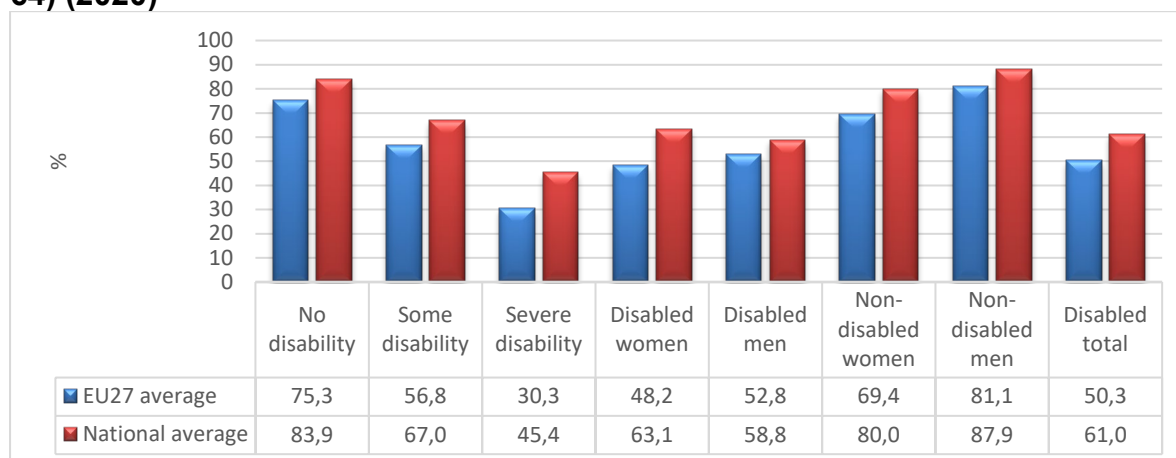


Table 3: Employment rates in Estonia, by disability and age group (2020)

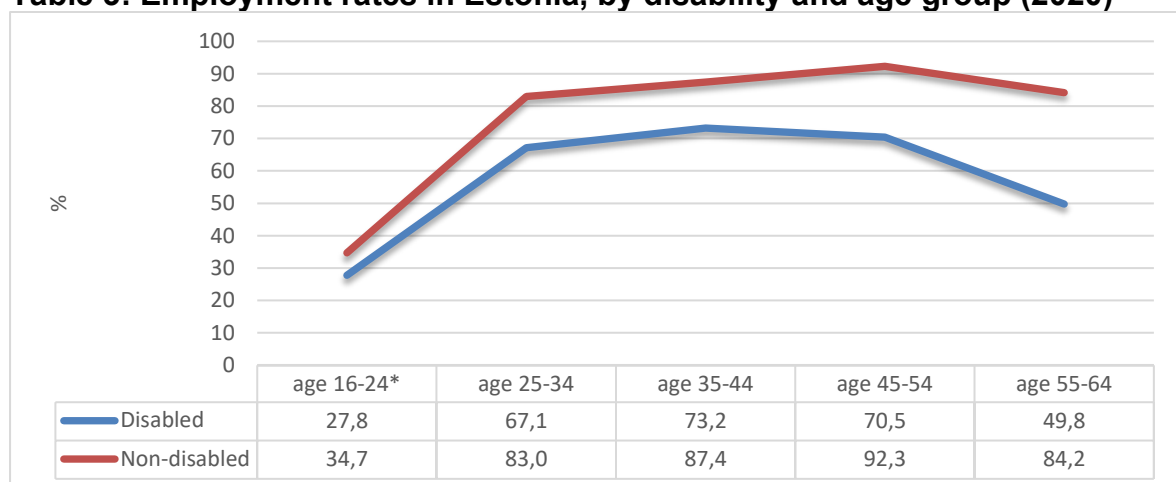
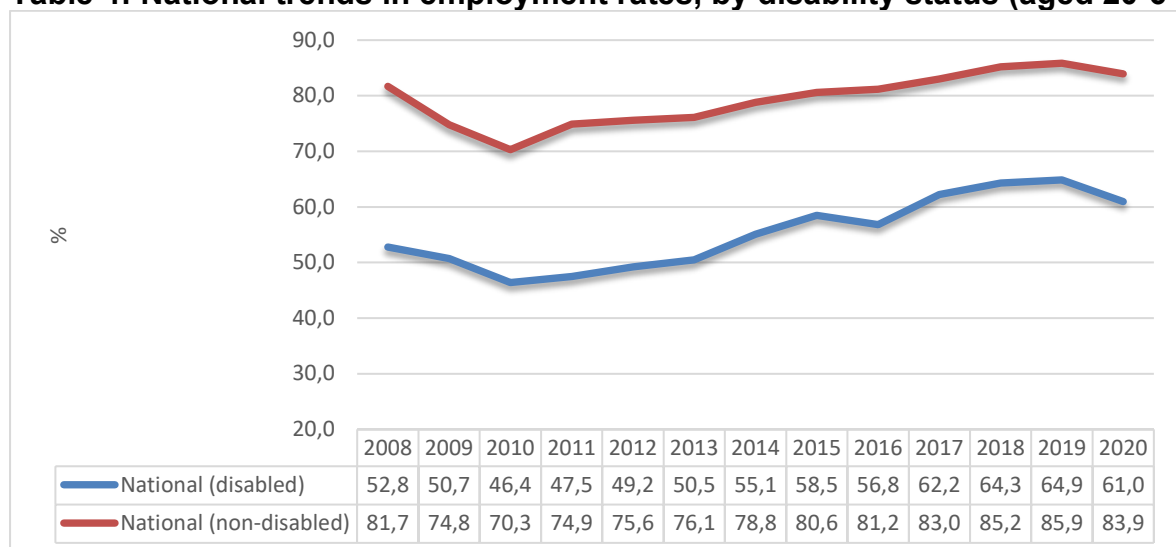


Table 4: National trends in employment rates, by disability status (aged 20-64)



Source: EU-SILC 2020 Release April 2022 (and preceding UDBs)

Note: Microdata concerning employment status was not available for Germany and Italy in this data release, which affects the EU27 average (which is therefore estimated).

7.1.1 Unemployment

Table 5: Unemployment rates by disability and gender (aged 20-64) (2020)

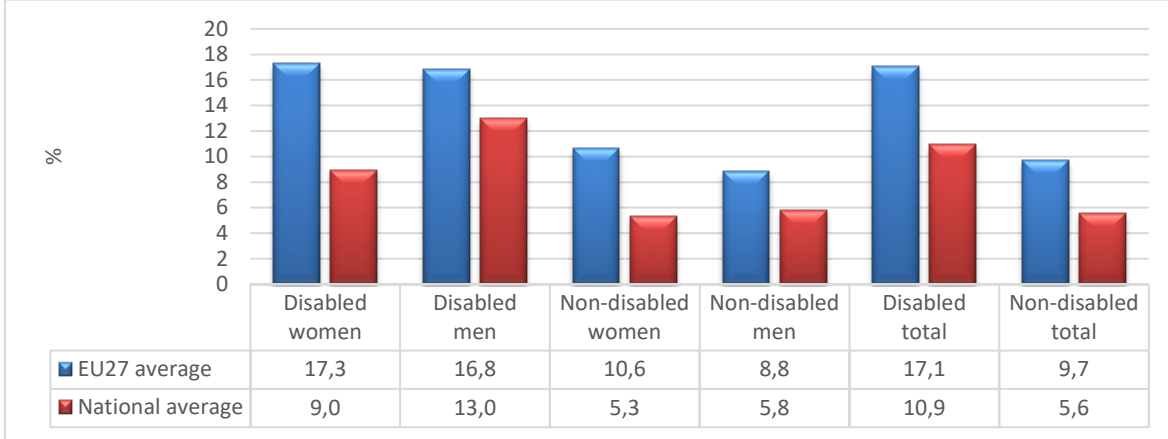


Table 6: Unemployment rates in Estonia, by disability and age group (2020)

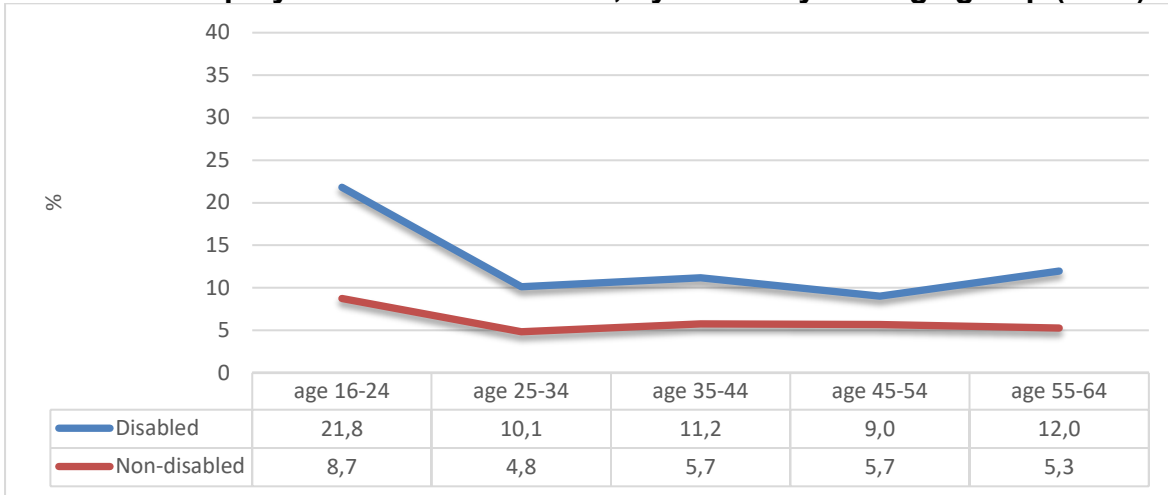
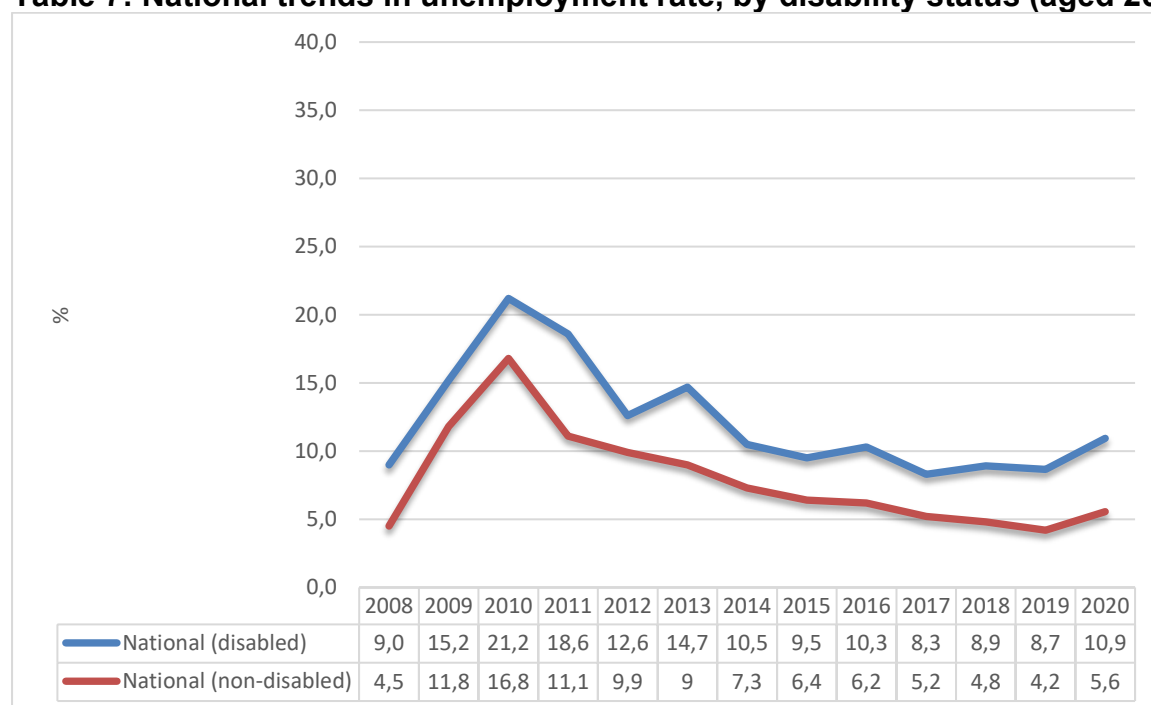


Table 7: National trends in unemployment rate, by disability status (aged 20-64)


Source: EU-SILC 2020 Release April 2022 (and preceding UDBs)

7.1.2 Economic activity

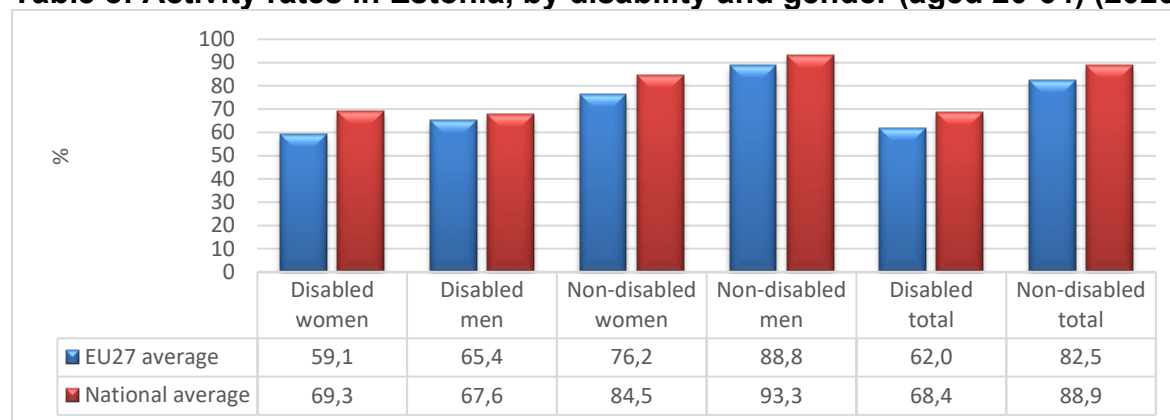
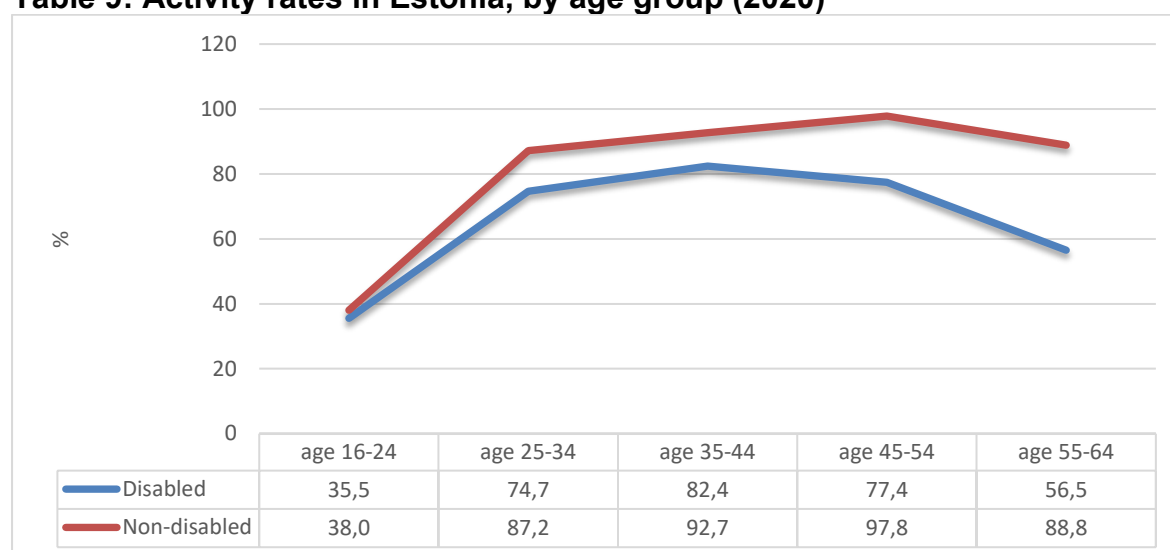
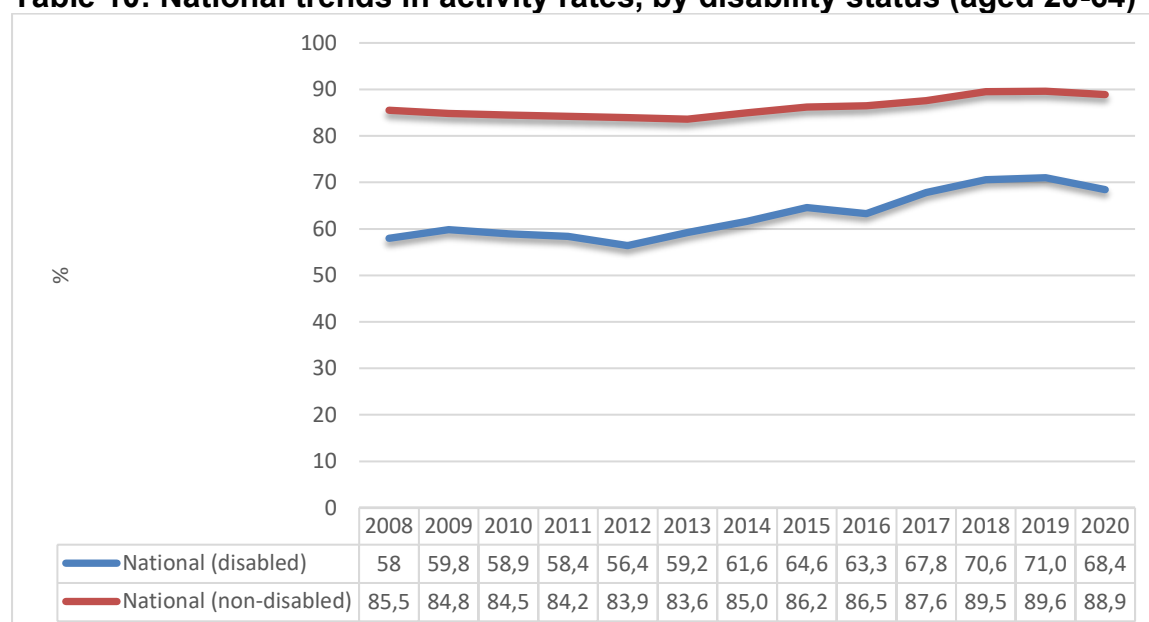
Table 8: Activity rates in Estonia, by disability and gender (aged 20-64) (2020)


Table 9: Activity rates in Estonia, by age group (2020)**Table 10: National trends in activity rates, by disability status (aged 20-64)**

Source: EU-SILC 2020 Release April 2022 (and preceding UDBs)

7.1.3 Alternative sources of labour market data in Estonia

Disability data are not yet available from the core European Labour Force Survey (LFS) but labour market indicators for Estonia were disaggregated from *ad hoc* modules conducted in 2001 and 2011. These can be found in the Eurostat disability database.⁴⁷

In Estonia, Statistics Estonia delivers data on labour market participation by persons with disabilities.⁴⁸ They have five different definitions for those with disabilities. Persons with disabilities are those who are officially registered by the Social Insurance

⁴⁷ Eurostat Health Database: <https://ec.europa.eu/eurostat/web/health/data/database>.

⁴⁸ Statistics Estonia: https://andmed.stat.ee/en/stat/sotsiaalelu_tervishoid_puudega_inimesed_puue-tooheive/THV601.

Board as disabled, those with activity restrictions may have either moderate or severe activity limitations, as defined by LFS Estonia, those with limited capacity to work and incapacity to work are those who have undergone and passed new assessment of their work ability by the Unemployment Insurance Fund and those with 40-100 % loss of capacity to work are those evaluated previously among the working-age population by the Social Insurance Board.

Table THV601: Labour status of working-age population by disability / capacity for work, Indicator, Age group and Reference period

	Age/ Year	Labour force participation rate, %			Employment rate, %			Unemployment rate, %		
		15 to 74	16 to 64	20 to 64	15 to 74	16 to 64	20 to 64	15 to 74	16 to 64	20 to 64
Persons without disabilities	2008	70.4	77.7	83.9	66.6	73.4	79.5	5.4	5.5	5.2
	2009	70.3	77.6	83.5	61.0	67.0	72.7	13.3	13.6	13.0
	2010	70.0	77.2	83.0	58.5	64.3	69.4	16.4	16.8	16.3
	2011	71.2	77.9	83.0	62.5	68.2	73.0	12.1	12.4	12.0
	2012	71.7	78.3	83.0	64.7	70.5	74.9	9.7	10.0	9.7
	2013	72.3	79.0	83.5	66.2	72.2	76.5	8.4	8.6	8.4
	2014	72.4	79.1	83.6	67.2	73.3	77.6	7.1	7.3	7.1
	2015	73.6	80.4	84.7	69.1	75.4	79.7	6.1	6.2	6.0
	2016	74.5	80.9	85.0	69.7	75.5	79.5	6.5	6.7	6.5
	2017	75.9	82.7	86.7	71.8	78.1	82.1	5.4	5.6	5.3
	2018	76.1	83.2	87.2	72.3	78.9	83.0	5.0	5.1	4.8
	2019	75.8	83.1	87.2	72.7	79.6	83.8	4.1	4.2	4.0
	2020	75.5	83.1	87.5	70.6	77.4	81.8	6.6	6.8	6.5
	2021	74.5	83.0	87.6	70.1	77.9	82.5	5.9	6.2	5.8
Persons with disabilities	2008	17.3	25.6	26.8	16.0	23.8	24.9	..	..	..
	2009	18.6	26.8	27.7	13.9	19.5	20.2	25.3	27.1	27.2
	2010	18.9	26.6	27.2	13.1	17.7	18.2	30.7	33.4	33.1
	2011	18.8	26.3	27.4	14.5	19.8	20.8	23.1	24.7	24.2
	2012	19.2	27.0	27.9	15.0	20.6	21.4	22.0	23.8	23.2
	2013	20.5	27.8	28.2	17.0	22.6	22.9	17.0	18.9	18.6
	2014	21.5	29.6	30.1	18.0	24.7	25.3	16.6	16.4	15.9
	2015	25.8	33.8	34.5	23.3	30.4	31.2	9.7	9.9	9.5
	2016	30.4	40.4	41.8	26.4	34.9	36.3	13.2	13.7	13.2
	2017	31.3	40.8	42.1	27.2	34.7	35.7	13.2	15.1	15.2
	2018	34.8	43.8	45.1	30.6	38.6	39.8	12.0	11.9	11.7
	2019	35.5	45.5	46.7	31.5	40.3	41.5	11.2	11.4	11.2
	2020	32.8	43.8	45.0	29.0	38.5	39.9	11.8	12.0	11.5
	2021	34.4	44.7	45.5	30.0	38.5	39.5	12.6	13.9	13.1
Persons with activity limitations	2008	..	38.2	38.7	..	33.2	33.8	..	13.0	12.7
	2009	..	41.4	41.9	..	30.7	31.2	..	25.9	25.6
	2010	..	..	..	..	..	..	..	..	..
	2011	..	46.1	46.7	..	33.4	34.0	..	27.6	27.2

	2012	..	..	..	..	..	..	..	..	..
	2013	..	..	..	..	..	..	..	..	..
	2014	..	..	..	..	..	..	..	..	..
	2015	42.7	55.4	56.5	37.6	48.3	49.4	12.0	12.8	12.6
	2016	47.5	60.9	62.1	42.1	53.6	54.7	11.4	12.1	11.9
	2017	50.1	62.9	64.1	44.6	55.7	56.7	10.9	11.6	11.6
	2018	53.9	66.4	68.0	48.8	60.0	61.5	9.4	9.7	9.6
	2019	51.9	64.5	66.0	48.0	59.5	61.0	7.5	7.8	7.6
	2020	52.0	66.0	67.6	46.6	59.0	60.5	10.3	10.7	10.5
	2021	..	..	..	..	..	..	..	..	..
Persons with limited capacity for work	2008	42.8	43.3	44.5	38.8	39.3	40.4	9.3	9.3	9.1
	2009	44.2	44.3	45.6	32.8	32.8	33.7	25.8	25.9	26.0
	2010	47.9	48.3	49.4	32.2	32.5	33.3	32.9	32.7	32.6
	2011	49.1	49.8	51.4	37.3	37.8	39.2	24.0	24.0	23.8
	2012	48.5	49.1	50.3	40.0	40.5	41.7	17.4	17.4	17.0
	2013	50.6	51.2	51.9	42.7	43.2	43.9	15.6	15.6	15.5
	2014	51.7	52.2	53.0	45.1	45.6	46.4	12.8	12.8	12.5
	2015	54.6	54.8	55.6	48.5	48.7	49.5	11.3	11.3	11.1
	2016	57.3	57.9	59.3	49.9	50.4	51.7	12.9	12.9	12.7
	2017	58.3	58.8	60.1	50.5	50.9	52.0	13.4	13.4	13.5
	2018	58.4	58.8	60.2	51.1	51.4	52.7	12.5	12.5	12.4
	2019	57.4	57.8	59.2	51.8	52.1	53.4	9.8	9.8	9.7
	2020	58.2	58.6	59.9	50.5	50.7	52.1	13.3	13.4	13.1
	2021	58.1	58.5	59.4	50.3	50.6	51.7	13.4	13.4	13.0
Persons with incapacity for work	2008	42.8	43.3	44.5	38.8	39.3	40.4	9.3	9.3	9.1
	2009	44.2	44.3	45.6	32.8	32.8	33.7	25.8	25.9	26.0
	2010	47.9	48.3	49.4	32.2	32.5	33.3	32.9	32.7	32.6
	2011	49.1	49.8	51.4	37.3	37.8	39.2	24.0	24.0	23.8
	2012	48.5	49.1	50.3	40.0	40.5	41.7	17.4	17.4	17.0
	2013	50.6	51.2	51.9	42.7	43.2	43.9	15.6	15.6	15.5
	2014	51.7	52.2	53.0	45.1	45.6	46.4	12.8	12.8	12.5
	2015	54.6	54.8	55.6	48.5	48.7	49.5	11.3	11.3	11.1
	2016	57.2	57.7	59.2	50.0	50.5	51.8	12.6	12.6	12.4
	2017	57.2	57.8	58.9	50.1	50.6	51.5	12.4	12.4	12.5
	2018	55.1	56.0	56.6	50.4	51.2	51.9	8.5	8.6	8.3
	2019	44.6	46.0	46.4	42.5	43.9	44.2	.	.	.
	2020	46.3	48.7	48.7	43.3	45.5	45.5	.	.	.
	2021	41.5	48.3	48.3	36.6	42.5	42.5	.	.	.
Persons with 40-100 % of incapacity to work	2008	42.0	42.6	43.8	38.1	38.7	39.8	9.2	9.2	9.0
	2009	43.5	43.7	44.9	32.8	33.0	33.8	24.6	24.6	24.7
	2010	48.0	48.3	49.2	32.1	32.4	33.1	33.1	32.9	32.8
	2011	48.7	49.2	50.7	37.3	37.7	39.0	23.4	23.5	23.2
	2012	47.6	48.2	49.3	39.2	39.7	40.8	17.7	17.7	17.3

	2013	49.7	50.2	50.9	42.0	42.4	43.0	15.7	15.7	15.6
	2014	51.0	51.5	52.3	44.6	45.1	45.9	12.5	12.5	12.2
	2015	54.2	54.4	55.2	48.0	48.2	49.0	11.3	11.3	11.1
	2016	56.6	57.1	58.5	49.5	49.9	51.3	12.6	12.6	12.5
	2017	56.6	57.2	58.3	49.7	50.2	51.2	12.1	12.1	12.2
	2018	54.7	55.5	56.1	50.2	50.9	51.6	8.3	8.3	8.0
	2019	44.5	45.7	46.1	42.4	43.5	43.9	.	.	.
	2020	46.9	48.6	48.6	43.8	45.3	45.3	.	.	.
	2021	41.8	48.3	48.3	36.9	42.5	42.5	.	.	.

7.2 EU data relevant to disability, social policies and healthcare (2020)

Table 11: People at risk of poverty or social exclusion, by disability and risk (aged 16-64)⁴⁹

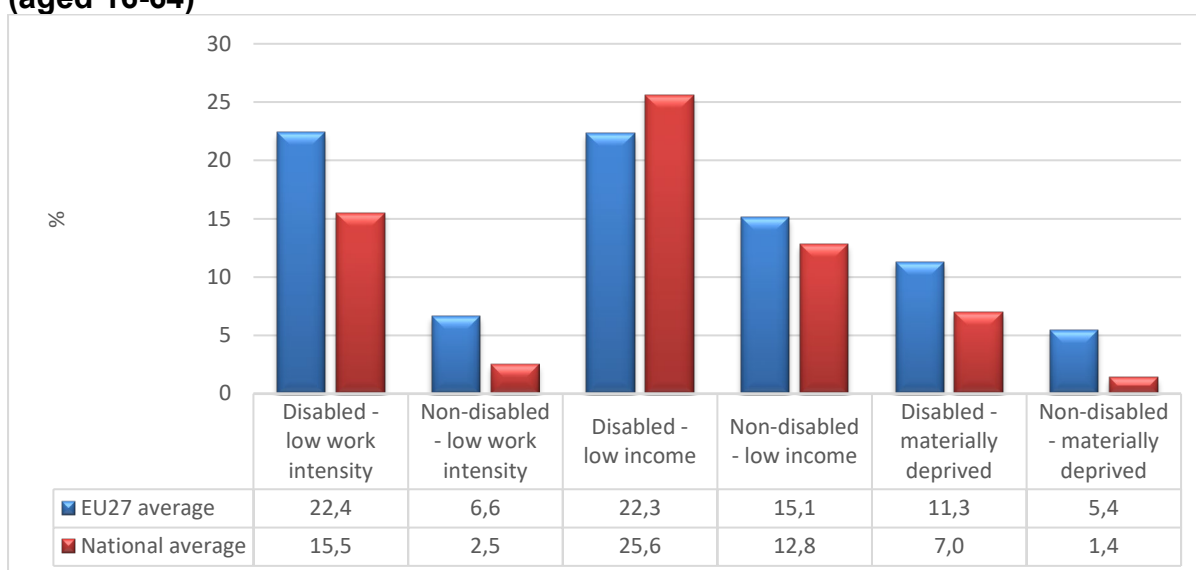
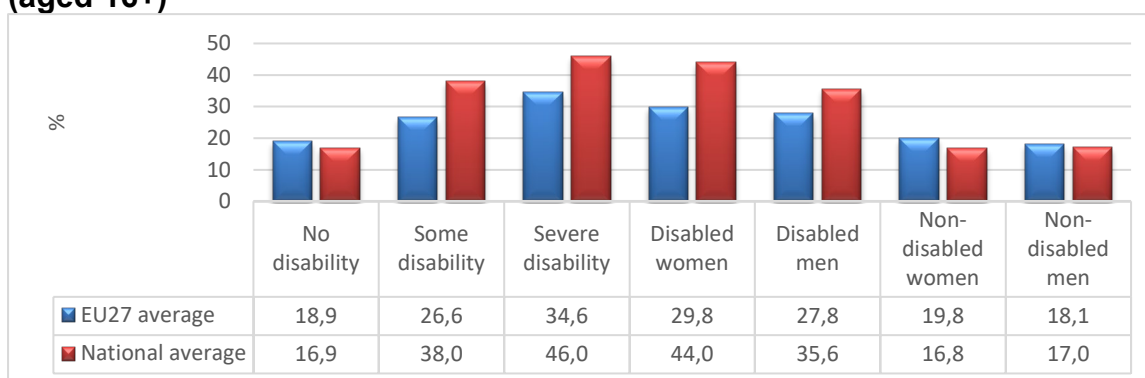
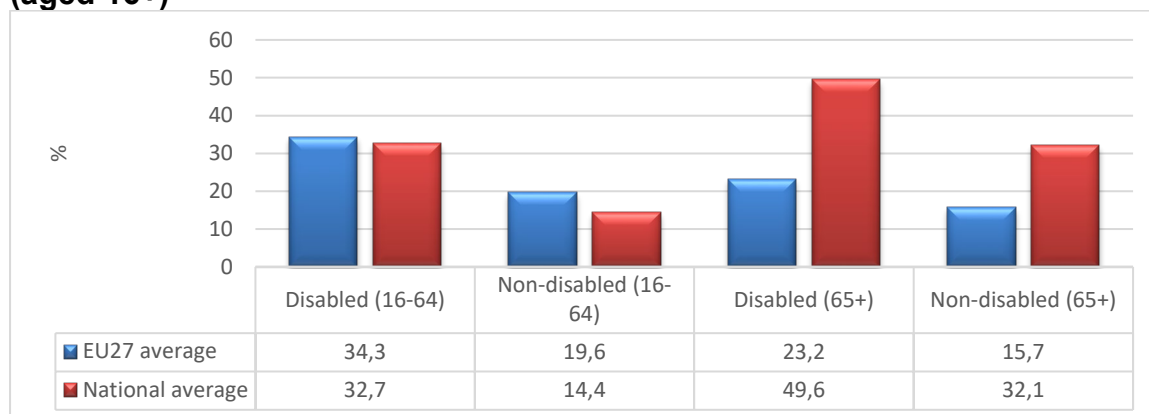


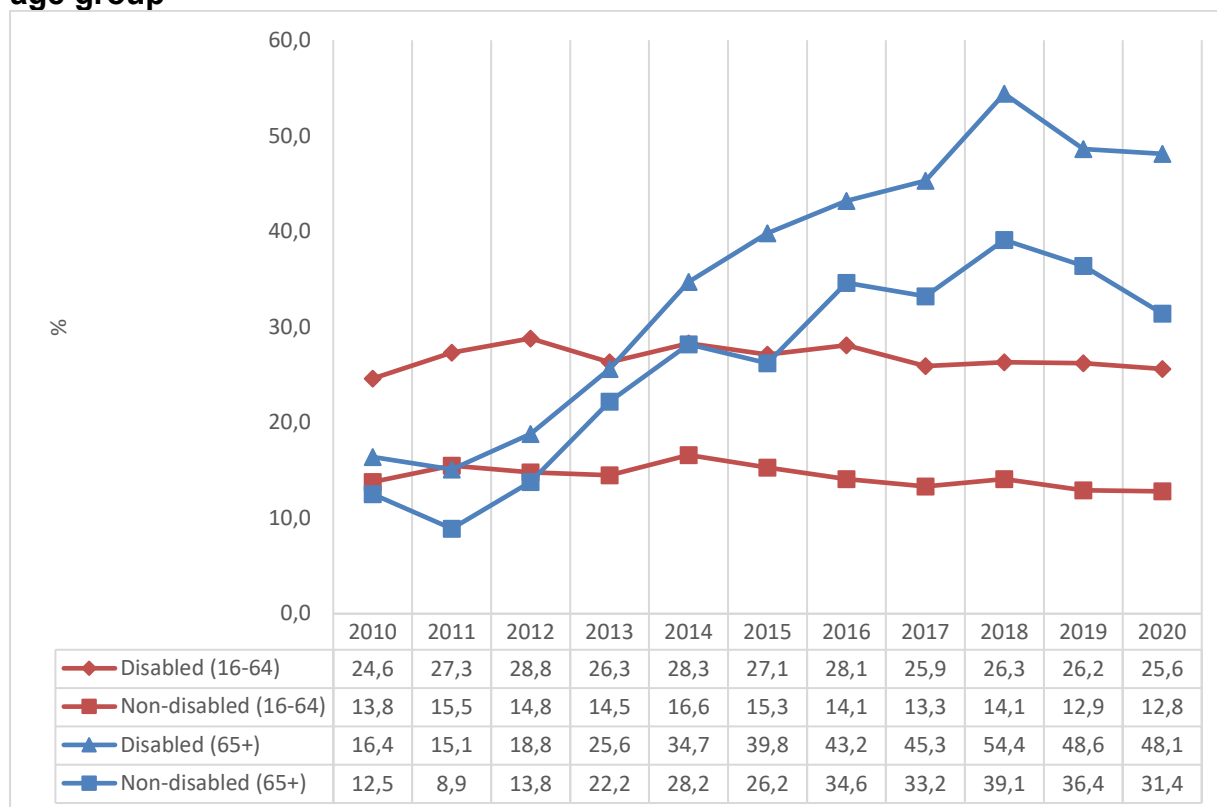
Table 12: People at risk of poverty or social exclusion, by disability and gender (aged 16+)



⁴⁹ Aged 16-59 for Low work intensity.

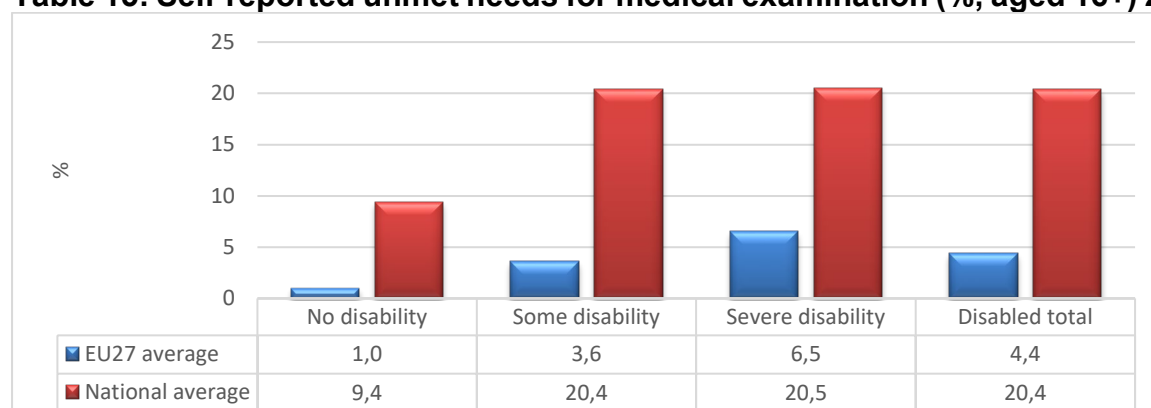
Table 13: Overall risk of household poverty or exclusion by disability and age (aged 16+)

Source: EU-SILC 2020 Release April 2022 (and previous UDB)

Table 14: Trends in the risk of poverty after social transfers, by disability and age group

Source: Eurostat Health Database [hlth_dpe020] – People at risk of poverty

Note: This table shows national trends in financial poverty risk, rather than the general AROPE indicator (which is not as comparable between age groups due to the effect of paid employment); the survey does not distinguish 'activity limitation' for children under 16.

Table 15: Self-reported unmet needs for medical examination (% , aged 16+) 2020

Source: Eurostat Health Database [hlth_dh030] – ‘Too expensive or too far to travel or waiting list’

Note: EU mean averages are also skewed by high values in a minority of countries within disability groups but median averages for the total disability and no disability groups in 2020 are consistent with the three-year mean values.

7.2.1 Alternative sources of poverty or healthcare data in Estonia

The EU-SILC data provide a comprehensive and reliable source concerning poverty or social exclusion rates. In addition to the summary tables presented so far, the Eurostat disability database also contains breakdowns concerning disability and poverty before and after social transfers, as well as in-work-poverty.⁵⁰

Table THV41. Poverty Rate by Year, Indicator, Age group, Sex and Disability

			Persons with and without disabilities	Persons with disabilities	Persons with incapacity for work	Persons with activity limitations
2017	At-risk-of-poverty rate, %	Total	21.9	42.7	34.0	36.3
		65 and older	46.4	52.6	..	51.1
	Absolute poverty rate, %	Total	2.7	1.1	4.5	2.5
		65 and older	..	..	..	..
	Material deprivation rate, %	Total	11.6	22.1	24.5	20.1
		65 and older	15.0	20.1	..	19.2
	Severe material deprivation rate, %	Total	4.1	8.1	9.4	8.3
		65 and older	6.0	8.0	..	8.3
2018	At-risk-of-poverty rate, %	Total	21.7	43.5	35.4	35.6
		65 and older	43.7	54.7	..	48.6
	Absolute poverty rate, %	Total	2.2	1.2	..	2.2
		65 and older	..	..	..	..

⁵⁰ Eurostat Health Database: <https://ec.europa.eu/eurostat/web/health/data/database>.

	Material deprivation rate, %	Total	9.9	18.6	18.2	15.7
		65 and older	11.6	15.2	..	14.4
	Severe material deprivation rate, %	Total	3.8	7.6	6.5	6.6
		65 and older	4.4	6.7	..	5.8
2019	At-risk-of-poverty rate, %	Total	20.7	40.7	39.0	35.8
		65 and older	41.4	50.5	..	48.1
	Absolute poverty rate, %	Total	2.3	..	..	2.1
		65 and older	..	..	..	..
	Material deprivation rate, %	Total	..	..	..	..
		65 and older	..	..	..	..
	Severe material deprivation rate, %	Total	..	..	..	..
		65 and older	..	..	..	..
2020	At-risk-of-poverty rate, %	Total	20.6	42.3	45.5	33.9
		65 and older	40.6	51.9	..	46.2
	Absolute poverty rate, %	Total	2.2	..	..	1.7
		65 and older	..	..	..	..
	Material deprivation rate, %	Total	..	..	..	..
		65 and older	..	..	..	..
	Severe material deprivation rate, %	Total	..	..	..	..
		65 and older	..	..	..	..
2021	At-risk-of-poverty rate, %	Total	22.8	51.7	..	44.2
		65 and older	52.4	66.2	..	61.1
	Absolute poverty rate, %	Total	1.4	..	..	..
		65 and older	..	..	..	..
	Material deprivation rate, %	Total	..	..	..	..
		65 and older	..	..	..	..
	Severe material deprivation rate, %	Total	..	..	..	..
		65 and older	..	..	..	..

7.3 EU data relevant to disability and education

Table 24: Early school leaving rates, by disability status (aged 18-24 and 18-29)⁵¹

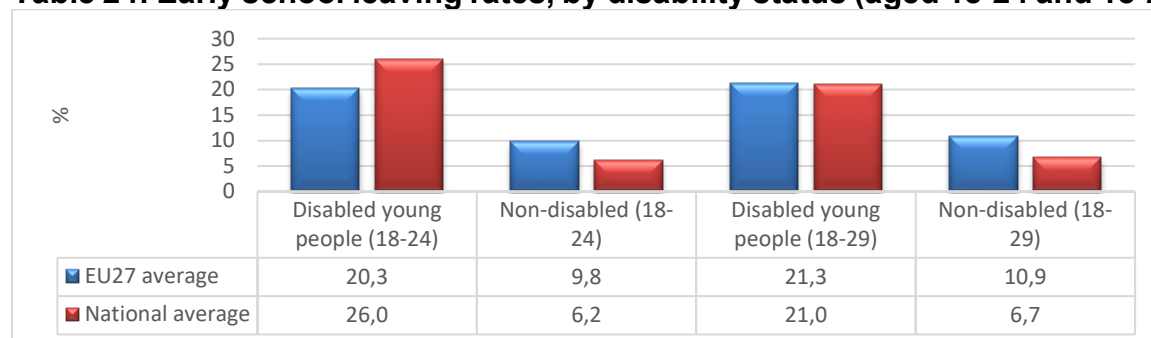
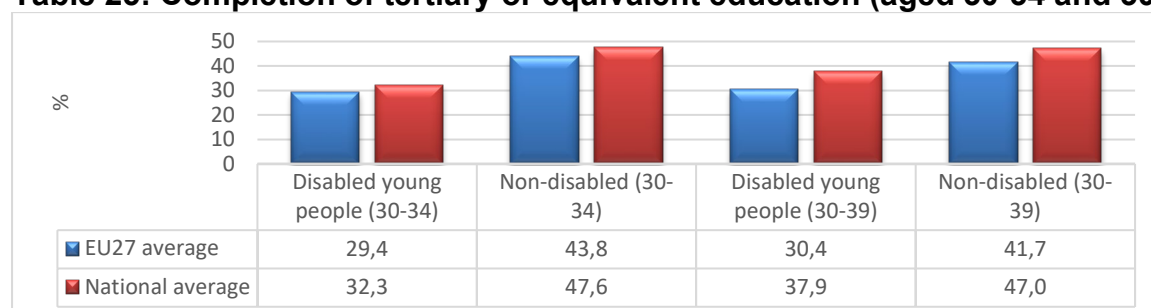


Table 25: Completion of tertiary or equivalent education (aged 30-34 and 30-39)



Source: EU-SILC 2020 Release April 2022 (and preceding UDBs)

Note: Confidence intervals for the disability group are large and reliability low (due to the small sample size in the target age group). An average of several years may be needed to establish trends or to compare breakdowns by gender.

7.3.1 Alternative sources of education data in Estonia

Officially, Statistics Estonia does not publish the data by different definitions of persons with disabilities in its database.⁵² However, it does produce this kind of compilation upon request, based on LFS Estonia and linked data to the Social Insurance Board (disabled) and Unemployment Insurance Fund (with loss of work ability).

TABLE 18-39-year-olds by educational level and disability status (thousands)

Age			Annual average		3 year moving average 2018-2020	
			2018	2019	2020	2018-2020
18-24	Total	Educational levels total	86.3	84.5	82.7	84.5
		First level education or lower	27.7	26.8	24.6	26.4
		Secondary level education and post-secondary	52.4	49.5	50.4	50.8
		Tertiary level education	6.2	8.2	7.7	7.4

⁵¹ There was a change from ISCED 1997 to ISCED 2011 qualification definitions in 2014, although some Member States continued to use the older definition after this time.

⁵² See: www.stat.ee.

	Persons with disabilities	Educational levels total	3.2	4	3.8	3.7
		First level education or lower	2.4	2.2	2.5	2.4
		Secondary level education and post-secondary	0.9	1.7	1.2	1.3
		Tertiary level education	..	..	..	..
	Persons without disabilities	Educational levels total	83.1	80.5	78.9	80.8
		First level education or lower	25.3	24.6	22.1	24
		Secondary level education and post-secondary	51.5	47.8	49.2	49.5
		Tertiary level education	6.2	8.2	7.6	7.3
	With reduced work ability (including without ability to work)	Educational levels total	4.9	6.6	5.8	5.8
		First level education or lower	3	3	3.3	3.1
		Secondary level education and post-secondary	1.8	3.5	2.4	2.6
		Tertiary level education	..	..	..	0.1
	Working-able population	Educational levels total	81.4	77.9	76.9	78.7
		First level education or lower	24.7	23.8	21.3	23.3
		Secondary level education and post-secondary	50.6	46	48.1	48.2
		Tertiary level education	6.2	8.1	7.6	7.3
	With reduced work ability and persons with disabilities	Educational levels total	3.3	4	3.8	3.7
		First level education or lower	2.4	2.2	2.5	2.4
		Secondary level education and post-secondary	0.9	1.7	1.2	1.3
		Tertiary level education	..	..	..	..
	Working-able population and persons without disabilities	Educational levels total	81.4	77.9	76.9	78.7
		First level education or lower	24.7	23.8	21.3	23.3
		Secondary level education and post-secondary	50.6	46	48.1	48.2
		Tertiary level education	6.2	8.1	7.6	7.3
30-34	Total	Educational levels total	96.9	98.9	101	98.8
		First level education or lower	14.1	13.6	13.8	13.8
		Secondary level education and post-Secondary	39.6	41.8	45.2	42.2
		Tertiary level education	43.2	43.6	41.8	42.9
	Persons with disabilities	Educational levels total	3.6	4.1	5	4.2
		First level education or lower	2	2.3	2.7	2.3
		Secondary level education and post-secondary	1.4	1.3	1.7	1.5
		Tertiary level education	..	..	..	0.4
	Persons without disabilities	Educational levels total	93.3	94.8	95.7	94.6
		First level education or lower	12.1	11.3	11.1	11.5
		Secondary level education and post-secondary	38.2	40.5	43.5	40.7
		Tertiary level education	43	43	41.1	42.4
	With reduced	Educational levels total	5.6	6.3	7.5	6.5
		First level education or lower	2.2	2.8	3	2.7

	work ability (including without ability to work)	Secondary level education and post-secondary	2.6	2.4	3	2.7
		Tertiary level education	..	1.1	1.5	1.3
	Working-able population	Educational levels total	91.3	92.7	93.2	92.4
		First level education or lower	11.9	10.8	10.7	11.1
		Secondary level education and post-secondary	37	39.4	42.2	39.5
		Tertiary level education	42.3	42.5	40.3	41.7
	With reduced work ability and persons with disabilities	Educational levels total	3.6	4.1	5	4.2
		First level education or lower	2	2.3	2.7	2.3
		Secondary level education and post-secondary	1.2	1.1	1.4	1.2
		Tertiary level education	..	..	..	0.7
	Working-able population and persons without disabilities	Educational levels total	91.3	92.7	93.2	92.4
		First level education or lower	11.9	10.8	10.7	11.1
		Secondary level education and post-secondary	37	39.4	42.2	39.5
		Tertiary level education	42.3	42.5	40.3	41.7
35-39	Total	Educational levels total	90.1	92.3	94.6	92.3
		First level education or lower	12	11.5	10.6	11.4
		Secondary level education and post-secondary	37.7	39.2	42.7	39.9
		Tertiary level education	40.4	41.6	41.3	41.1
	Persons with disabilities	Educational levels total	3.9	5	4.2	4.4
		First level education or lower	1.9	3	2.3	2.4
		Secondary level education and post-secondary	0.9	1.3	1.3	1.2
		Tertiary level education	1.1	..	..	0.8
	Persons without disabilities	Educational levels total	86.2	87.3	90.4	88
		First level education or lower	10.1	8.5	8.3	9
		Secondary level education and post-secondary	36.8	37.9	41.4	38.7
		Tertiary level education	39.3	40.9	40.7	40.3
	With reduced work ability (including without ability to work)	Educational levels total	7.4	7	6.7	7
		First level education or lower	3.1	3.7	2.8	3.2
		Secondary level education and post-secondary	2.6	2.2	2.4	2.4
		Tertiary level education	1.7	1.1	1.5	1.4
	Working-able population	Educational levels total	82.7	85.3	87.9	85.3
		First level education or lower	8.9	7.8	7.7	8.1
		Secondary level education and post-secondary	35.2	37	40.3	37.5
		Tertiary level education	38.6	40.5	39.8	39.6
	With reduced work ability and	Educational levels total	3.9	5	4.2	4.4
		First level education or lower	1.9	3	2.3	2.4
		Secondary level education and post-secondary	0.9	1.3	2.3	1.4

	persons with disabilities	Tertiary level education	..	..	..	0.6
	Working-able population and persons without disabilities	Educational levels total	82.7	85.3	87.9	85.3
		First level education or lower	8.9	7.8	7.7	8.1
		Secondary level education and post-secondary	35.2	37	40.3	37.5
		Tertiary level education	38.6	40.5	39.8	39.6
30-39	Total	Educational levels total	187	191	195	191.2
		First level education or lower	26.1	25.1	24.3	25.2
		Secondary level education and post-secondary	77.3	81	87.9	82.1
		Tertiary level education	83.6	85.2	83.1	84
	Persons with disabilities	Educational levels total	7.5	9.1	9.2	8.6
		First level education or lower	4	5.3	5	4.8
		Secondary level education and post-secondary	2.2	2.5	3	2.6
		Tertiary level education	1.3	1.3	1.3	1.3
	Persons without disabilities	Educational levels total	180	182	186	182.6
		First level education or lower	22.1	19.8	19.4	20.4
		Secondary level education and post-secondary	75.1	78.4	84.9	79.5
		Tertiary level education	82.3	83.9	81.8	82.7
	With reduced work ability (including without ability to work)	Educational levels total	13	13.3	14.2	13.5
		First level education or lower	5.3	6.5	5.9	5.9
		Secondary level education and post-secondary	5.1	4.6	5.4	5
		Tertiary level education	2.6	2.2	2.9	2.6
	Working-able population	Educational levels total	174	178	181	177.7
		First level education or lower	20.8	18.5	18.5	19.3
		Secondary level education and post-secondary	72.2	76.4	82.5	77
		Tertiary level education	81	83	80.2	81.4
	With reduced work ability and persons with disabilities	Educational levels total	7.5	9.1	9.2	8.6
		First level education or lower	4	5.3	5	4.8
		Secondary level education and post-secondary	2.2	2.5	3	2.6
		Tertiary level education	1.3	1.3	1.3	1.3
	Working-able population and persons without disabilities	Educational levels total	174	178	181	177.7
		First level education or lower	20.8	18.5	18.5	19.3
		Secondary level education and post-secondary	72.2	76.4	82.5	77
		Tertiary level education	81	83	80.2	81.4
18-24	Total	Educational levels total	100	100	100	
		First level education or lower	32.1	31.7	29.7	31.2
		Secondary level education and post-secondary	60.7	58.6	60.9	60.1

		Tertiary level education	7.18	9.7	9.31	8.7
	Persons with disabilities	Educational levels total	100	100	100	
		First level education or lower	75	55	65.8	65.2
		Secondary level education and post-secondary	28.1	42.5	31.6	34.1
		Tertiary level education	..	..	..	0.7
	Persons without disabilities	Educational levels total	100	100	100	
		First level education or lower	30.4	30.6	28	30
		Secondary level education and post-secondary	62	59.4	62.4	61.2
		Tertiary level education	7.46	10.2	9.63	9
	With reduced work ability (including without ability to work)	Educational levels total	100	100	100	
		First level education or lower	61.2	45.5	56.9	54.5
		Secondary level education and post-secondary	36.7	53	41.4	43.7
		Tertiary level education	..	..	..	1.8
	Working-able population	Educational levels total	100	100	100	
		First level education or lower	30.3	30.6	27.7	29.5
		Secondary level education and post-secondary	62.2	59.1	62.5	61.2
		Tertiary level education	7.62	10.4	9.88	9.3
	With reduced work ability and persons with disabilities	Educational levels total	100	100	100	
		First level education or lower	72.7	55	65.8	64.5
		Secondary level education and post-secondary	27.3	42.5	31.6	33.8
		Tertiary level education	..	..	..	1.7
	Working-able population and persons without disabilities	Educational levels total	100	100	100	
		First level education or lower	30.3	30.6	27.7	29.5
		Secondary level education and post-secondary	62.2	59.1	62.5	61.3
		Tertiary level education	7.62	10.4	9.88	9.3
30-34	Total	Educational levels total	100	100	100	
		First level education or lower	14.6	13.8	13.7	14.0
		Secondary level education and post-secondary	40.9	42.3	44.9	42.7
		Tertiary level education	44.6	44.1	41.5	43.4
	Persons with disabilities	Educational levels total	100	100	100	
		First level education or lower	55.6	56.1	54	55.2
		Secondary level education and post-secondary	38.9	31.7	34	34.9
		Tertiary level education	..	..	..	10.0
	Persons without disabilities	Educational levels total	100	100	100	100.0
		First level education or lower	13	11.9	11.6	12.2
		Secondary level education and post-secondary	40.9	42.7	45.5	43.0
		Tertiary level education	46.1	45.4	42.9	44.8
		Educational levels total	100	100	100	100.0

	With reduced work ability (including without ability to work)	First level education or lower	39.3	44.4	40	41.2
		Secondary level education and post-secondary	46.4	38.1	40	41.5
		Tertiary level education	..	17.5	20	18.7
	Working-able population	Educational levels total	100	100	100	
		First level education or lower	13	11.7	11.5	12.1
		Secondary level education and post-secondary	40.5	42.5	45.3	42.8
		Tertiary level education	46.3	45.8	43.2	45.1
	With reduced work ability and persons with disabilities	Educational levels total	100	100	100	
		First level education or lower	55.6	56.1	54	55.2
		Secondary level education and post-secondary	33.3	26.8	28	29.4
		Tertiary level education	..	..	..	15.4
	Working-able population and persons without disabilities	Educational levels total	100	100	100	
		First level education or lower	13	11.7	11.5	12.1
		Secondary level education and post-secondary	40.5	42.5	45.3	42.8
		Tertiary level education	46.3	45.8	43.2	45.1
35-39	Total	Educational levels total	100	100	100	
		First level education or lower	13.3	12.5	11.2	12.3
		Secondary level education and post-secondary	41.8	42.5	45.1	43.2
		Tertiary level education	44.8	45.1	43.7	44.5
	Persons with disabilities	Educational levels total	100	100	100	
		First level education or lower	48.7	60	54.8	54.5
		Secondary level education and post-secondary	23.1	26	31	26.7
		Tertiary level education	28.2	..	..	18.8
	Persons without disabilities	Educational levels total	100	100	100	
		First level education or lower	11.7	9.74	9.18	10.2
		Secondary level education and post-secondary	42.7	43.4	45.8	44.0
		Tertiary level education	45.6	46.8	45	45.8
	With reduced work ability (including without ability to work)	Educational levels total	100	100	100	
		First level education or lower	41.9	52.9	41.8	45.5
		Secondary level education and post-secondary	35.1	31.4	35.8	34.1
		Tertiary level education	23	15.7	22.4	20.3
	Working-able population	Educational levels total	100	100	100	
		First level education or lower	10.8	9.14	8.76	9.6
		Secondary level education and post-secondary	42.6	43.4	45.8	43.9
		Tertiary level education	46.7	47.5	45.3	46.5
	With reduced	Educational levels total	100	100	100	
		First level education or lower	48.7	60	54.8	54.5

	work ability and persons with disabilities	Secondary level education and post-secondary	23.1	26	54.8	34.6
		Tertiary level education	..	..	..	10.9
	Working-able population and persons without disabilities	Educational levels total	100	100	100	
		First level education or lower	10.8	9.14	8.76	9.6
		Secondary level education and post-secondary	42.6	43.4	45.8	43.9
		Tertiary level education	46.7	47.5	45.3	46.5
30-39	Total	Educational levels total	100	100	100	
		First level education or lower	12	10.4	10.2	10.9
		Secondary level education and post-secondary	41.5	42.9	45.6	43.3
		Tertiary level education	46.6	46.7	44.3	45.8
	Persons with disabilities	Educational levels total	100	100	100	
		First level education or lower	53.3	58.2	54.3	55.3
		Secondary level education and post-secondary	29.3	27.5	32.6	29.8
		Tertiary level education	17.3	14.3	14.1	15.2
	Persons without disabilities	Educational levels total	100	100	100	
		First level education or lower	12	10.4	10.2	10.9
		Secondary level education and post-secondary	41.5	42.9	45.6	43.3
		Tertiary level education	46.6	46.7	44.3	45.8
	With reduced work ability (including without ability to work)	Educational levels total	100	100	100	
		First level education or lower	40.8	48.9	41.5	43.7
		Secondary level education and post-secondary	39.2	34.6	38	37.3
		Tertiary level education	20	16.5	20.4	19.0
	Working-able population	Educational levels total	100	100	100	
		First level education or lower	12	10.4	10.2	10.9
		Secondary level education and post-secondary	41.5	42.9	45.6	43.3
		Tertiary level education	46.6	46.7	44.3	45.8
	With reduced work ability and persons with disabilities	Educational levels total	100	100	100	
		First level education or lower	53.3	58.2	54.3	55.3
		Secondary level education and post-secondary	29.3	27.5	32.6	29.8
		Tertiary level education	17.3	14.3	14.1	15.2
	Working-able population and persons without disabilities	Educational levels total	100	100	100	
		First level education or lower	12	10.4	10.2	10.9
		Secondary level education and post-secondary	41.5	42.9	45.6	43.3
		Tertiary level education	46.6	46.7	44.3	45.8

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