
SOCIAL PROTECTION POLICY PAPERS

Paper 15

Social protection for maternity: Key policy trends and statistics

**Social Protection Department
International Labour Office**

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Abstract

This policy paper: (i) provides a global overview of the organization of maternity cash benefits and maternity care in 188 countries; (ii) analyses trends and recent policies, e.g. extension of maternity protection coverage in a large number of low- and middle-income countries; (iii) describes the negative impacts of fiscal consolidation and adjustment measures in a number of higher-income economies; (iv) presents the costs of a universal benefit to all pregnant women in 57 low and middle income countries; and (v) calls for the expansion of maternity protection to accelerate progress on women's rights and enhancing the well-being of new mothers, promoting inclusive development and social justice.

JEL Classification: H51, H53, H55, I18, I38, J13

Keywords: social protection, women's rights, maternity benefits, maternal health, social security, cash benefits for childbirth

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Preface

Maternity protection has long been seen by the international community as an essential prerequisite for the achievement of women's rights and gender equality. The right of all women to maternity protection is laid down in fundamental human rights instruments such as the *Universal Declaration of Human Rights*, the *International Covenant on Economic, Social and Cultural Rights* and the *Convention of the Elimination of All Forms of Discrimination against Women*.

The International Labour Organization (ILO) is mandated to “further among the nations of the world programmes which will achieve (...) the extension of social security measures to all in need of such protection and comprehensive medical care (...) and maternity protection”¹. Maternity protection is one of the very first policy area addressed by ILO standard-setting activity, as early as 1919, when the first Convention on this matter was adopted. Since then, it has made the object of three Conventions and one Recommendation, the most recent, Convention No. 183 and its accompanying Recommendation No. 191, adopted in 2000.

Maternity protection is multidimensional and encompasses different components that are of crucial importance from a health, income security and employment protection perspective. By safeguarding women's employment and income security during and after maternity, maternity protection is essential for ensuring women's access to equality of opportunity and treatment in the workplace, promoting gender equality and women's empowerment. Maternity protection further ensures effective access to quality maternal health care, thereby contributing to the health and well-being of mothers and their babies.

Social protection is a key element of national strategies to promote human development, political stability and inclusive growth. The ILO Social Protection Floors Recommendation, 2012 (No. 202), reflects a consensus on the extension of social security reached among governments and employers' and workers' organizations from 185 countries at all levels of development.

Based on the research conducted for the ILO's *World Social Protection Report 2014/15*, this report highlights key trends and challenges with regard to maternity protection. It focuses specifically on income security for women before and after childbirth and access to maternal health care. It also presents the results of a recent cost estimate on basic universal maternity cash benefits in a large number of developing countries. The important role of universal health protection including in the event of maternity, is addressed more in depth in a separate policy paper in this series.

As the global community discusses a new development framework post 2015, we hope that this policy paper will contribute to making the right to maternity protection a reality for all women.

Isabel Ortiz
Director
ILO Social Protection Department

¹ Declaration concerning the aims and purposes of the International Labour Organization (Declaration of Philadelphia), adopted by the International Labour Conference, 26th session, 10 May 1944. The Declaration forms part of the ILO Constitution.

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Executive summary

- Maternity protection is a human right and an essential prerequisite for the achievement of women's rights and gender equality. However, nearly 800 mothers die every day from childbirth, and most of their deaths are preventable by adequate social protection policies. Further, many women suffer from discrimination at the workplace because of inadequate maternity protection. Effective social protection during maternity ensures income security for pregnant women and mothers of newborn children, and effective access to quality maternal health care. It also promotes equality in employment and occupation.
- In order to allow women to fully recover after childbirth, 96 countries out of 188 provide at least 14 weeks' paid maternity leave, meeting the standards of Convention No. 183 in terms of level and duration. Worldwide, less than 40 per cent of women in employment are covered by law under mandatory maternity cash benefit schemes; 57 per cent if voluntary coverage (mainly for women in self-employment) is included.
- Due to the ineffective enforcement and implementation of the law in some regions (Africa, Asia and the Pacific in particular), effective coverage is even lower: only 28 per cent of women in employment worldwide are protected through contributory or non-contributory maternity cash benefits.
- Maternal mortality rates are very high despite efforts under the Millennium Development Goals. Access to free, affordable and appropriate antenatal and post-natal health care and services for pregnant women and mothers with newborns is an essential component of maternity protection, and key to reduce high maternal mortality rates. While inequalities between urban and rural areas exist worldwide, the differential is much larger in Africa and in Asia and the Pacific than in other regions.
- Fiscal consolidation and adjustment measures have temporarily or permanently reduced the level of maternity protection in several European countries.
- On the other hand, an increasing number of countries are improving maternity protection measures, for example, Argentina, Australia, Bangladesh, Bolivia, Brazil, Ghana, India, Indonesia, Jordan and South Africa have expanded maternity coverage to categories of women who were previously unprotected, such as women in the informal economy. Other countries such as Chile, China, Colombia, Malta and the Bolivarian Republic of Venezuela, have extended the duration of paid maternity leave in law and increased of the benefit level.
- According to ILO cost estimates, a universal maternity cash benefit that would ensure basic income security during the critical period before and after childbirth would require on average 0.41 per cent of national GDP in 57 low and lower middle income countries. Complementing universal access to maternal health care, such cash benefits would enhance social protection for mothers of newborn children and their families during a critical period of their lives.
- At a time that the world is discussing a post-2015 development agenda, it is essential that the development community identifies financing sources to prevent maternal mortality and ensure social protection for all mothers.

1. **Maternity protection: Ensuring income security, maternal health care and women's rights at work**

Maternity protection is multidimensional. From a social security perspective, it includes protection against suspension or loss of income during maternity leave, and access to maternal health care (see ILO, 2010). Maternity leave supported with cash benefits to fully or partially replace women's earnings during the final stages of pregnancy and after childbirth is of critical importance for the well-being of pregnant women, new mothers and their families. The absence of income security during the final stages of pregnancy and after childbirth forces many women, especially those in the informal economy, to return to work prematurely, thereby putting at risk their own and their children's health.

Another fundamental component of maternity protection is maternal health care, namely effective access to adequate medical care and services during pregnancy and childbirth, and beyond, to ensure the health of both mothers and children. As with health care in general (see ILO 2014a, Chapter 5; ILO, 2014b), a lack of effective access to maternal health care coverage not only puts the health of women and children at risk, but also exposes families to significantly increased risk of poverty.

According to ILO standards (see box 1), maternity protection also includes the protection of women's rights at work during maternity and beyond, through measures that safeguard employment, protect women against discrimination and dismissals, and allow them to return to their jobs after maternity leave under conditions that take into account their specific circumstances (ILO, 2010; 2013; 2014c; 2014d). It also includes occupational safety and health components that are essential to protect the health of pregnant and breastfeeding women and their babies, as well as women's reproductive capacity.

Box 1

International standards relevant to maternity protection

Maternity protection has long been regarded by the international community as an essential prerequisite for the achievement of women's rights and gender equality. Women's right to maternity protection is enshrined in a number of major human rights instruments. The Universal Declaration of Human Rights, 1948, notably states that motherhood and childhood are entitled to special care and assistance, as well as to social security. The International Covenant on Economic, Social and Cultural Rights, 1966, establishes the right of mothers to special protection during a reasonable period before and after childbirth, including paid leave or leave with adequate social security benefits. The Convention for the Elimination of All Forms of Discrimination Against Women, 1979, recommends that special measures be taken to ensure maternity protection, proclaimed as an essential right permeating all areas of the Convention.

The ILO has led the establishment of international standards on maternity protection, adopting the first international standard on this subject in the very year of its foundation: the Maternity Protection Convention, 1919 (No. 3). Since then, a number of more progressive instruments have been adopted in line with the steady increase in women's participation in the labour market in most countries worldwide. The current ILO maternity protection standards provide detailed guidance for national policy-making and action to enable women to successfully combine their reproductive and productive roles. To this end, the standards aim to ensure that women benefit from adequate maternity leave, income and health protection measures, that they do not suffer discrimination on maternity-related grounds, that they enjoy the right to nursing breaks and that they are not required to perform work prejudicial to their health or that of their child. In order to protect the situation of women in the labour market, ILO maternity protection standards specifically require that cash benefits be provided through schemes based on solidarity and risk-pooling, such as compulsory social insurance or public funds, while strictly circumscribing the potential liability of employers for the direct cost of benefits. At the same time, the relevant standards aim at ensuring that women have access to adequate maternal health care and services during pregnancy and childbirth, and beyond.

Convention No. 102 (Part VIII) sets minimum standards as to the population coverage of maternity protection schemes and for the provision of cash benefits during maternity leave, to address the suspension of earnings during this time (see Annex III, table AIII.7). The Convention also defines the medical care that must be provided free of charge at all stages of maternity, as required to maintain, restore or improve the health of the women protected and their ability to work, and to attend their personal needs. Maternal health care must be available not only to the women participating in a maternity protection scheme, but also to the wives of men covered by such schemes, at no cost to either.

The Maternity Protection Convention, 2000 (No. 183), and its accompanying Recommendation (No. 191), are the most up-to-date ILO standards on maternity protection. They set higher and more comprehensive standards on population coverage, health protection, maternity leave and leave in case of illness or complications, cash benefits, employment protection and non-discrimination, as well as breastfeeding.

Recommendation No. 202 calls for such benefits to be provided as part of the basic social security guarantees that make up social protection floors. These include access to essential health care, including maternity care, comprising a set of necessary goods and services, and basic income security for persons of active age who are unable to earn sufficient income due, inter alia, to maternity. Maternity medical care should meet criteria of availability, accessibility, acceptability and quality (United Nations, 2000); it should be free for the most vulnerable; and conditions of access should not be such as to create hardship or increase the risk of poverty for people in need of health care. Cash benefits should be sufficient to allow women and their children a life in dignity, out of poverty. Maternity benefits should be granted at least to all residents, with the objective of achieving universal protection; a variety of schemes can be used to achieve such coverage, including universal schemes, social insurance, social assistance and other social transfers, providing benefits in cash or in kind.

2. Maternity cash benefits

2.1 Types of maternity protection schemes

Maternity cash benefits are provided through schemes anchored in national social security legislation in 136 out of the 188 countries reviewed. A further two countries allow women to take maternity leave by law, but make no legal provision for the provision of income replacement benefits.

Of those 188, 50 countries – 38 of them in Africa or Asia – have provisions in their labour legislation setting out a mandatory period of maternity leave and establishing the employer's liability for the payment of the woman's salary (or a percentage thereof) during that period (see box 2).

Box 2

Maternity protection: Collectively financed schemes vs employer's liability provisions

Maternity cash benefits can be provided by different types of schemes: contributory (e.g. social insurance), non-contributory, usually tax-financed (e.g. social assistance and universal schemes) and employer's liability provisions. Collectively financed schemes, funded from insurance contributions, taxation or both, are based on the principles of solidarity and risk-pooling, and therefore ensure a fairer distribution of the costs and responsibility of reproduction. Employer's liability provisions, on the other hand, oblige employers to bear the economic costs of maternity directly, which often results in a double burden (payment of both women's wages during maternity leave and costs of their replacement), although employers may be able to obtain commercial insurance to cover their liabilities. While some individual workers may obtain appropriate compensation under such provisions, employers may be tempted to adopt practices that deny women the income security to which they should be entitled in order to avoid the related costs and the financial hardship that they may entail for small businesses or in times of instability. Discrimination against women of childbearing age in hiring and in employment, and non-payment of due compensation by the employer, are more commonly evident in the absence of collective mechanisms to finance maternity protection. Pressure on women to resume work to the detriment of their health or that of their child may also be more prevalent where employers have to bear the costs of maternity leave.

In order to protect the situation of women in the labour market, Convention No. 183 states a preference for compulsory social insurance or publicly funded programmes as the vehicles for provision of cash benefits to women during maternity leave, confining individual employers' liability for the direct costs of benefits to a limited range of cases.^a Where women do not meet qualifying conditions for entitlement to maternity cash benefits, Convention No. 183 requires the provision of adequate benefits financed by social assistance funds, on a means-tested basis.

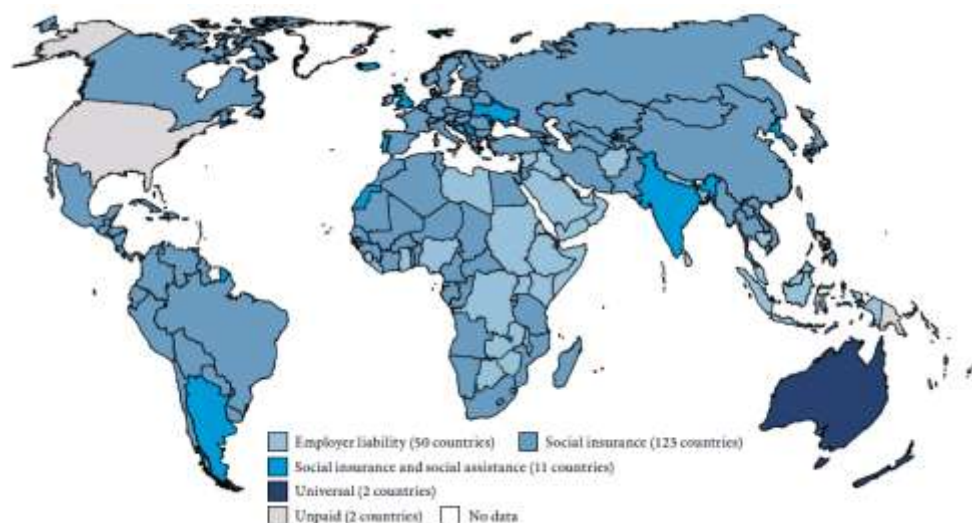
Maternity cash benefits financed collectively have proved the more effective means of securing an income to women during maternity leave. In recent years, several countries have shifted from employer's liability provisions to collectively financed maternity benefits, a trend that represents an advance for the promotion of equal treatment for men and women in the labour market.

^a According to Art. 6, para. 8, of Convention No. 183: "An employer shall not be individually liable for the direct cost of any such monetary benefit to a woman employed by him or her without that employer's specific agreement except where: (a) such is provided for in national law or practice in a member State prior to the date of adoption of this Convention by the International Labour Conference; or (b) it is subsequently agreed at the national level by the government and the representative organizations of employers and workers."

Most maternity cash benefit schemes and employer's liability provisions cover only women in formal employment. Consequently, in many low- and middle-income countries, where levels of formal employment are lower, maternity benefits are available only to a minority of women. Figure 1 shows the types of programmes existing in the 188 countries for which information is available. Social insurance schemes form the vast majority of these

programmes, prevailing in 134 countries, of which 11 also operate social assistance schemes.²

Figure 1. Maternity cash benefits anchored in national legislation: Types of schemes, 2013



Note: In the United States there is no national programme. Under the Family and Medical Leave Act, 1993, maternity leave is unpaid as a general rule; however, subject to certain conditions accrued paid leave (such as vacation leave, personal leave, medical or sick leave, or paid medical leave) may be used to cover some or all of the leave to which a woman is entitled under the Act. A cash benefit may be provided at the state level. Provisions for maternity cash benefits exist in five states (New York, New Jersey, California, Hawaii and Rhode Island), under the class of temporary disability insurance for employees. Additionally, employers may offer paid maternity leave as a job benefit.

Sources: ILO, 2014a, based on ILO, 2014d; SSA and ISSA, 2012; 2013a; 2013b; 2014; United Nations, 2013.

Link: <http://www.social-protection.org/gimi/qess/RessourceDownload.action?ressource.ressourceId=37055>.

2.2 Extent of legal coverage

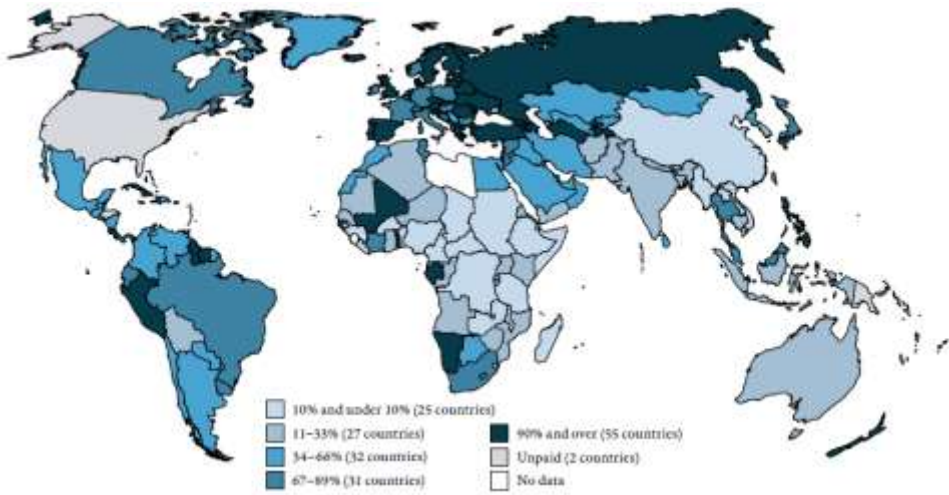
Worldwide, the vast majority of women in employment are still not protected against loss of income in the event of maternity. Only 35.3 per cent of employed women benefit from mandatory coverage by law and thus are legally entitled to periodic cash benefits as income replacement during their maternity leave.³ In 55 countries (67 countries when voluntary coverage is included), more than 90 per cent of women in employment enjoy a legal right to cash maternity benefits on a mandatory basis (see figure 2). At the other end of the spectrum, in 25 countries,⁴ most of them in sub-Saharan Africa, under 10 per cent of women in employment are entitled to cash maternity benefits.

² For more detailed characteristics of the schemes in place in different countries, see Annex IV, table B.5.

³ When including voluntary coverage, legal coverage concerns nearly half of all women in employment (56.8 per cent), with the 20 additional percentage points concerning mainly the choice left to the self-employed to join (or not) the existing contributory scheme on a voluntary basis. In many countries, such voluntary provisions are taken up only sparsely; thus voluntary coverage may not reach the same level of protection as compared to mandatory coverage.

⁴ Twenty one countries when including voluntary coverage.

Figure 2. Legal (mandatory) coverage for maternity cash benefits: Women in employment protected by law for loss of income during maternity (percentages)

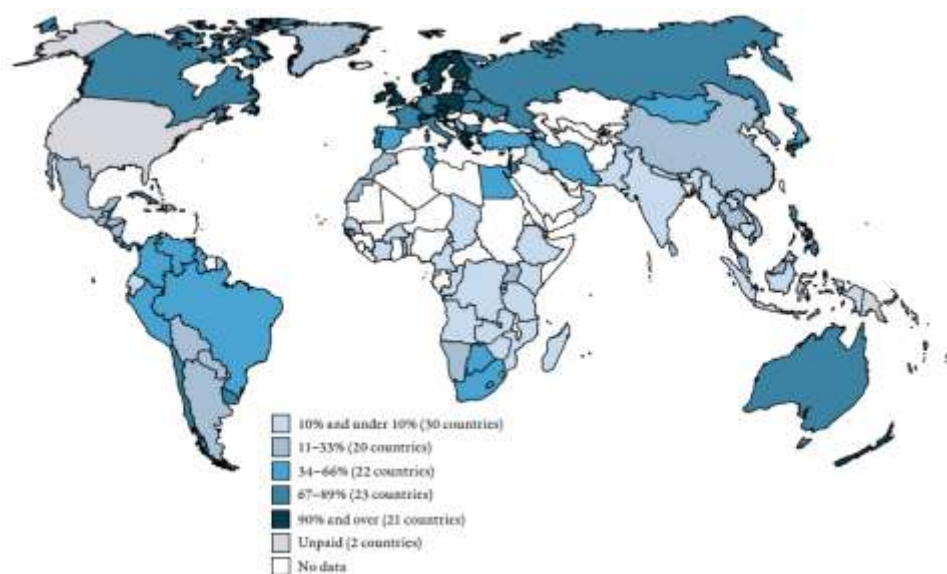


Note: Legal coverage refers to social security legislation as well as labour law.
 Source: ILO, 2014a, based on data collected and indicators developed for ILO, 2014d.
 Link: <http://www.social-protection.org/gimi/gess/RessourceDownload.action?ressource.ressourceId=42477>.

2.3. Extent of effective coverage

Irrespective of legal requirements, there may be obstacles that prevent women from receiving the benefits to which they are entitled. In fact, just above one-quarter (28.4 per cent) of employed women worldwide are effectively protected in maternity through contributory or non-contributory cash benefits. In much of Africa and South Asia, a small minority of women in employment (less than 10 per cent) are effectively protected through contributory or non-contributory forms of cash maternity benefits (figure 3). It is in many of these countries that employer’s liability provisions (see figure 1) prevail, informal employment plays a prominent role in the economy, and maternal mortality ratios are still very high. Coverage of more than 90 per cent of employed women is reached in only 21 countries, most of them in Europe.

Figure 3. Effective coverage for maternity cash benefits: Women in employment contributing to maternity cash benefits schemes or otherwise entitled to such benefits (percentages)



Sources: ILO, 2014a, based on ILO, 2014d. Original data from national sources and the ILO Social Security Inquiry.
Link: <http://www.social-protection.org/gimi/gess/RessourceDownload.action?ressource.ressourceId=42478>.

2.4 Adequacy of maternity benefits in ensuring income security during maternity leave

The adequacy of cash benefits provided during maternity leave to meet the needs of mothers and their babies can be assessed in terms of duration and amount. In order to allow women to fully recover after childbirth, 96 countries out of 188 provide at least 14 weeks' paid maternity leave, meeting the standards of Convention No. 183, in terms of level and duration; of these, 31 countries provide 18–26 weeks, and ten more than 26 weeks (see figure 4). In 59 countries, the length of paid maternity leave is 12–13 weeks, which still meets the minimum standards set out in Convention No. 102 in terms of level and duration. In 31 countries, maternity leave with cash benefits is less than 12 weeks.

The level of the maternity cash benefit, calculated as a proportion of women's previous earnings for a minimum number of weeks of paid maternity leave, varies widely from country to country (figure 5). In 77 out of the 188 countries, women are entitled to paid maternity leave of at least two-thirds of their regular salary for a minimum period of 14 weeks, meeting the benchmark of Convention No. 183. In 28 countries (nearly 15 per cent of the total reviewed), women are entitled to 100 per cent of their regular salary for at least 18 weeks, meeting the highest standard set out in Recommendation No. 191. An additional 17 countries provide benefit at a fixed level (for instance, the minimum wage). This leaves a large number of countries (61) in which women are entitled to benefit at a level lower than 67 per cent of previous earnings for a period of 12–13 weeks, which falls short of the benchmark of Convention No. 183 but is still in compliance with the minimum requirements of Convention No. 102. In 31 countries, the cash benefit corresponds to less than 45 per cent of the previous salary and/or the period of paid maternity leave is inferior to 12 weeks.

Latin American countries have made considerable progress in complying with the ILO standard of 14 weeks paid maternity leave and in ensuring that more women, including those in informal work, are eligible. In Brazil, rural and domestic workers gained the right to maternity leave in 1991 and, following a court ruling in 2012, temporary workers are now also eligible. Chile and Costa Rica also grant rights to maternity leave to temporary workers (ILO, 2014d; UNWOMEN, 2015).

3. Access to maternal health care

Access to free, affordable and appropriate antenatal and post-natal health care and services for pregnant women and mothers with newborns is an essential component of maternity protection. Access to maternal health care is closely associated with access to health care in general, which is discussed in Chapter 5.

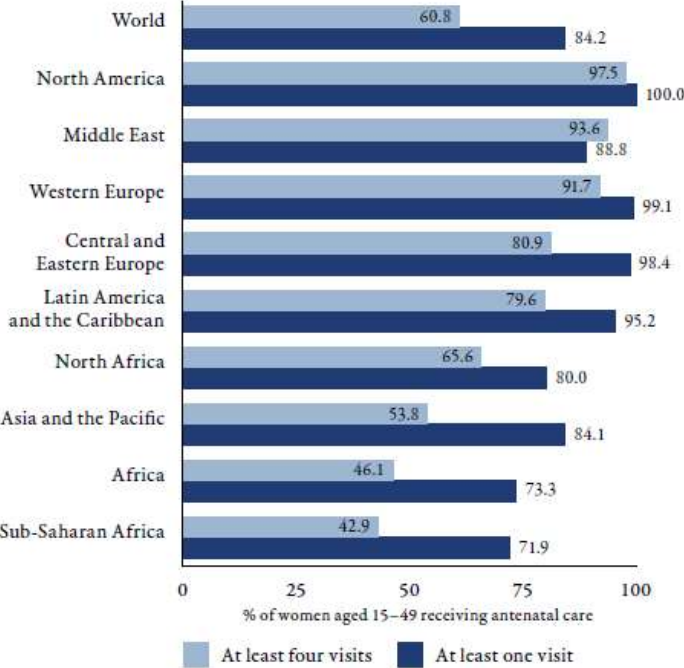
The importance of guaranteed access to maternal health care in safeguarding maternal and infant health is highlighted in the Millennium Development Goals, particularly MDG5 on improving maternal health and MDG3 on reducing child mortality. While remarkable progress has been achieved in many countries in reducing maternal and child mortality, some countries are still facing major challenges in this regard (UN, 2013). In 2013, 289,000 women died due to complications of pregnancy or childbirth, close to 800 per day, most of them in sub-Saharan Africa. The risk of a woman in a developing country dying from a maternal-related cause during her lifetime is about 23 times higher compared to a woman living in a developed country (WHO et al., 2014).

It is widely recognized that one of the key enabling factors for maternal and child health is access to antenatal care, which is still uneven and far from universal in many regions (see figure 4). According to the latest available data, while 84.2 per cent of childbearing women receive antenatal care provided by skilled personnel during at least one visit to a health facility, only 60.8 per cent of them were monitored during at least four visits. In sub-Saharan Africa, more than a quarter of childbearing women did not receive any ante-natal care provided by skilled health personnel; the same is true for one in five women in North Africa, and one in six women in Asia and the Pacific.

In many parts of the world, access to maternal health care is uneven and subject to significant disparities between urban and rural areas, and between poorer and more affluent groups of the population (see, e.g., Nawal, Sekher and Goli, 2013). In many developing countries, such disparities are closely associated with a lack of universal access to available and affordable health-care services of adequate quality, but the lack of financial protection that would allow women to benefit from existing services is also an important factor.

Inequalities in access to maternal health services (both antenatal care and medical care during and after childbirth) jeopardize further progress with respect to maternal and child health in both middle- and low-income countries. In most of these countries we observe significant levels of inequity in access to maternal health care across regions, and between residents of urban and rural areas, with urban populations tending to have better access to maternal health services. While inequalities are observed between urban and rural areas in countries in all parts of the world, the differential is much larger in Africa and in Asia and the Pacific than in other regions. These differentials are often associated with a lower density of health-care services in rural areas.

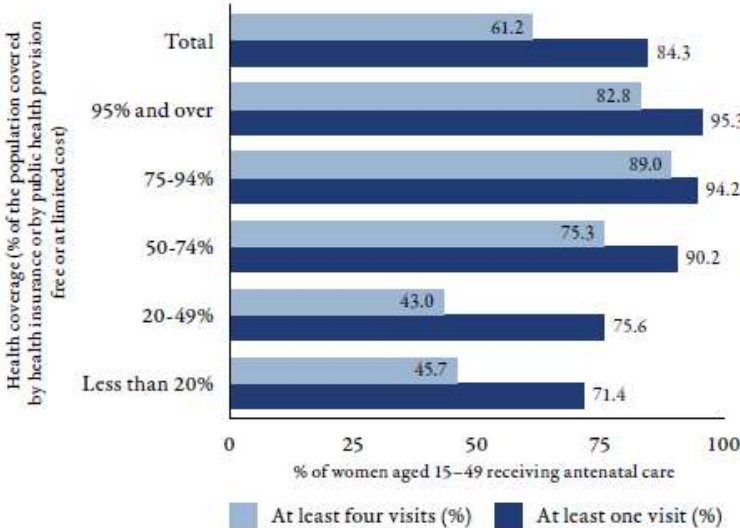
Figure 4. Antenatal care coverage by region, latest available year (percentage of live births)



Notes: Antenatal care is measured by the percentage of women aged 15–49 with a live birth in a given time period who received antenatal care provided by skilled health personnel (doctors, nurses or midwives) at least once during pregnancy. Global average weighted by total population (UN, World Population Prospects, 2012 Revision; value for 2012). Source: ILO 2014a, based on WHO Global Health Observatory (accessed Dec. 2013), various years. Link: <http://www.social-protection.org/gimi/gess/RessourceDownload.action?ressource.ressourceId=42481>.

Health coverage is a key factor in facilitating access to maternal health care (figure 5). Access to ante-natal care is high where health protection is available to the majority of the population, but lower where a large proportion of the population is not protected.

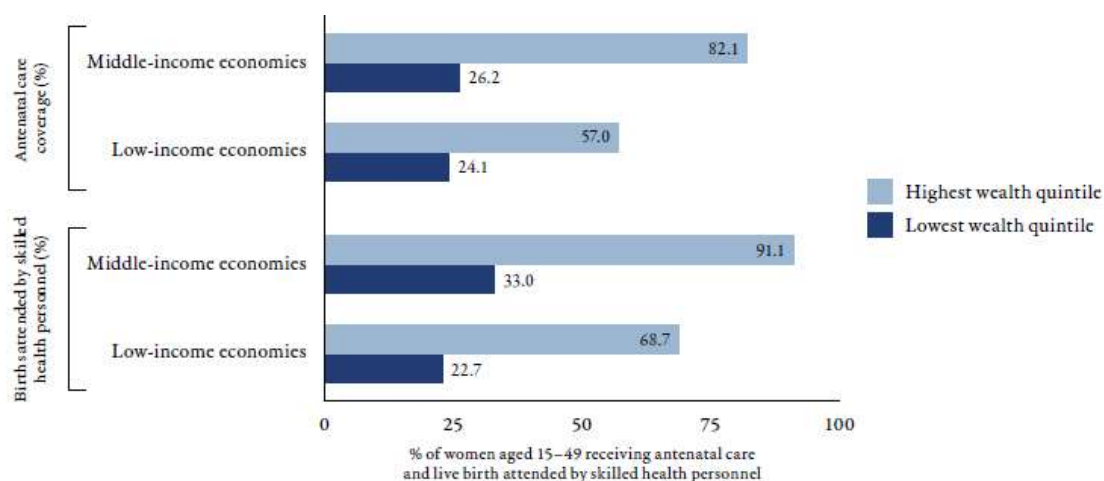
Figure 5. Access to antenatal care by health coverage, latest available year



Notes: Access to antenatal care is measured by the percentage of women aged 15–49 with a live birth in a given time period who received antenatal care provided by skilled health personnel (doctors, nurses, or midwives) at least once during pregnancy. Global average weighted by total population (UN, World Population Prospects, 2012 Revision; value for 2012). Sources: ILO 2014a, based on WHO Global Health Observatory, various years; national sources. Link: <http://www.social-protection.org/gimi/gess/RessourceDownload.action?ressource.ressourceId=37053>.

Another significant vector of inequality in access to maternity health protection is household wealth. In both low- and middle-income countries, only a small fraction of women in the lowest wealth quintile have access to maternal health protection, as compared to women in the highest wealth quintile (see figure 6). Such inequalities have detrimental effects on both maternal and child health, with often harmful long-term consequences for both individuals and societies.

Figure 6. Inequities in access to maternal health services by wealth quintile and national income level, latest available year



Notes: Inequities in access to maternal health services are measured by births attended by skilled health personnel as a percentage of total live births in the same period. Antenatal coverage is measured by the percentage of women aged 15–49 with a live birth in a given time period who received antenatal care four or more times. Due to data limitations, it is not possible to determine the type of provider for each visit. Detailed information and definitions are available in the Excel file (see link below). Global average weighted by total population (UN, World Population Prospects, 2012 Revision; value for 2012). Global averages should be considered with caution owing to the small sample size.

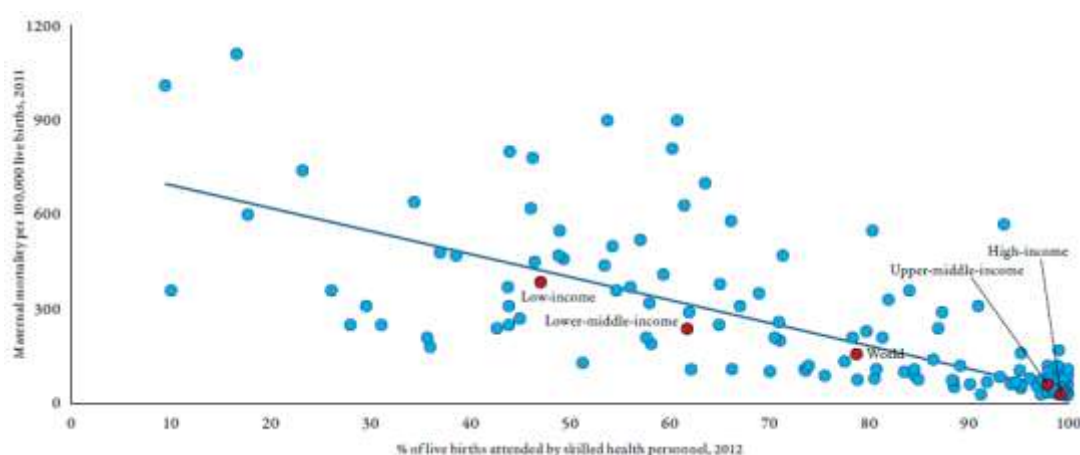
Source: ILO 2014a, based on WHO Global Health Observatory, various years.

Link: <http://www.social-protection.org/gimi/gess/RessourceDownload.action?ressource.ressourceId=42882>.

Figure 7 illustrates the importance of providing quality maternal care services by showing the inverse correlation across countries between the percentage of births supervised by skilled birth attendants and the maternal mortality ratio.

Moreover, the available evidence suggests that income security also contributes to the well-being of pregnant women, new mothers and their children. Countries that have a higher level of coverage for maternity cash benefits also tend to achieve better results with respect to maternal mortality ratios. These results call for a comprehensive approach to maternity protection, combining maternal health care and income security, and also occupational safety and health measures, as stipulated in ILO maternity protection standards.

Figure 7. Maternal mortality ratio (per 100,000 live births) and live births attended by skilled health personnel, according to national income level, 2011



Note: $R^2 = 0.6009$.

Sources: ILO, 2014a, based on WHO Global Health Observatory and World Bank, World Development Indicators.

Link: <http://www.social-protection.org/gimi/gess/RessourceDownload.action?ressource.ressourceId=42483>.

4. Policy trends 2010-2015 in maternity cash benefits

Maternity protection is recognized globally as a crucial component of social protection systems – effectively, as an investment to secure each country’s future human capital – as shown by the number and range of recent and continuing policy initiatives. Recent policy trends in maternity protection schemes show that a number of European countries have adopted adjustment measures that effectively reduced the level of maternity protection, having a detrimental impact on women’s rights. Other countries have adopted measures that extend maternity protection by enhancing the duration and scope of maternity benefits, or by extending maternity protection coverage.

4.1 Adjustment measures reducing the level of maternity protection in several European countries

In the context of the financial and economic crisis, several countries have taken measures that have reduced the level of maternity protection (see box 3). In countries including the Czech Republic, Germany, Ireland and the United Kingdom, the level of maternity benefits has been reduced. In addition, maternity benefits are now treated as taxable income in Ireland.

Some of these fiscal consolidation measures have significantly reduced the level of maternity protection available to certain groups of pregnant women and new mothers. Although in some countries measures have been taken to protect the levels of protection available to those on lower incomes, other groups may still have suffered marked reductions in the benefits they receive, jeopardizing their income security during this critical period of their lives. In addition, access to maternal health care may also have suffered from cuts within the health-care system (see ILO, 2014a, Chapter 5). At a time when many European governments are considering or implementing measures to encourage higher birth rates, ill-designed fiscal consolidation measures may have unintended negative effects. It is thus necessary to carefully consider the short- and long-term impacts of policy reforms in this area.

Box 3

Recent adjustment measures on maternity protection in countries undergoing fiscal consolidation

Some recent reforms have resulted in a significant reduction of benefit levels for certain categories of beneficiaries.

- In the Czech Republic, the level of maternity benefit was temporarily reduced from 69 per cent to 60 per cent of the daily basis of assessment per calendar day in 2010, but has since been raised again.
- Germany reduced maternity benefits from 67 per cent to 65 per cent of previous salary for those with net earnings of more than €1,200 per month.
- Ireland reduced the maximum maternity benefit for new claimants from €262 to €230 per month as of January 2014 with the objective of saving €30 million. From 2013/14, maternity benefit is treated as taxable income. Consequently, around 48,000 women per year will be paying an average of €833 extra each in taxation, yielding savings of €40 million.
- In Latvia, the replacement rate of maternity benefit was reduced from 100 per cent to 80 per cent of insurable earnings in 2011. The Government also decided to extend the cap on the amount of sickness, maternity, paternity, parental and unemployed benefits paid until 31 December 2014. These measures are expected to save 25.83 million lat (LVL) in 2013 and LVL26.42 million in 2014.
- In Lithuania, the Law on Sickness and Maternity was amended in 2010 to temporarily reduce replacement rates of maternity/ paternity benefit from 100 per cent to 90 per cent of previous earnings.
- In Romania, a 15 per cent cut in maternity benefits was implemented as an emergency measure in 2010. The law enacting this reduction also changed the maternity benefits policy: benefits now amount to 75 per cent of previous earnings subject to a ceiling of 3,400 lei (RON) per month for a one-year period of leave, and of RON1,200 for a two-year leave. A bonus of RON500 per month is available to workers earning taxable income before the end of their one-year leave.
- In the United Kingdom, the conditional Health in Pregnancy grant of £190 for each expectant mother was abolished in 2011 in order to reduce the government deficit. It has been replaced with a £500 grant for first-time parents claiming other types of social benefits such as Income Support or Working Tax Credit.

Sources: Based on Gauthier, 2010; SSA and ISSA, 2012, 2013a; 2013b; 2014; Labour Law Network; ILO Working Conditions Laws database, Leschke and Jepsen, 2011, 2012; national sources.

4.2 Expansion of maternity protection worldwide

4.2.1 Enhancing the duration and scope of maternity benefits

Several countries have extended the duration of paid maternity leave in law, following the adoption of Convention No. 183 in 2000. Although they have not yet ratified it, China, Colombia and Malta now meet the minimum benefit level requirements set by this Convention, and several countries, including Chile and the Bolivarian Republic of Venezuela, have gone further. A number of other countries (including Finland and Ireland) have increased the minimum rate of benefit levels and indexation mechanisms.

In addition, a number of countries have strengthened complementary provisions relating to assistance for mothers wishing to return to work (including Japan and the Russian Federation) and those relating to childcare facilities (including Australia and Italy; see box 4).

Box 4

Measures to facilitate parents' return to work in Australia, Italy, Japan and the Russian Federation

Supply-side measures to facilitate mothers' return to work after childbirth through help with training and job search were implemented in Japan and the Russian Federation. In the latter, access to training programmes designed for jobseekers was extended to women on parental leave to care for a child under the age of three. In 2011, 26,200 women benefited from these programmes, out of which 15,700 found jobs. Additional measures included the introduction of flexible forms of work, self-employment programmes for women, and pre-school education for children aged 3–7. A Japanese programme supporting mothers of young children in their job search, for instance through nursing services, and information services was re-invigorated. In 2011, 69,000 women used the programme and successfully found a job.

In Italy, vouchers giving access to childcare services were introduced to promote female employment. Through this and other measures, takeup of formal child care was increased significantly, from 1 million children in 2011 to a projected 1.4 million in 2016/17, largely through direct financial assistance to families for childcare, and also through childcare support for parents receiving income transfers who are training or studying in order to find jobs. A one-day paid parental leave was introduced in 2012.

In Australia, Child Care Flexibility Trials and a Child Care Flexibility Fund were created to improve access to childcare, particularly outside standard hours, and hence allow women more flexible participation in the labour market. In addition to these supply-side measures, Australia also introduced parental leave pay at the national minimum wage and two weeks' payment for working fathers or partners. Since its implementation in January 2011, 240,000 individuals have benefited from this measure. Flexible childcare arrangements targeting families who require care outside standard working hours were also offered.

Sources: Based on ILO and OECD, 2013; Aleksynska et al., 2013.

4.2.2 Extending maternity protection coverage

Many countries (for example, Australia, Jordan and South Africa) have enacted reforms that extend the scope of maternity coverage to categories of women who were previously unprotected. This has been achieved through a variety of measures (see box 5).

Box 5

Maternity cash benefits: Extension of coverage in Australia, Jordan and South Africa

A number of countries have extended coverage of maternity benefits to in recent years.

Jordan established a new maternity benefit in 2011, covering workers in the private sector, financed through employer contributions of 0.75 per cent of assessable earnings. The scheme gives insured women the right to paid maternity leave at 100 per cent of previous earnings for a maximum of ten weeks. This benefit is expected to foster women's participation in the labour market and remove disincentives to the hiring of women.

In Australia, the National Paid Parental Leave scheme, introduced in 2011, established an entitlement to 18 weeks of government-funded parental leave pay at the rate of the national minimum wage for eligible working parents (mothers and fathers). The scheme is subject to a (relatively generous) means test. Together with the "baby bonus" that is also paid to non-working parents and is subject to a stricter means test, the parental leave scheme reaches close to universal coverage.

In South Africa, in 2003, domestic workers were brought under the Unemployment Insurance Fund, which is also responsible for the payment of maternity benefits.

Sources: Aleksynska et al., 2013; Barrientos, Niño-Zarazúa and Maitrot, 2010; Ahluwalia, forthcoming; Fultz and Francis, 2013; national sources.

A number of countries, including Argentina, Bangladesh, the Plurinational State of Bolivia, India and Indonesia, have introduced or extended non-contributory maternity benefits to women workers in the informal economy or poor women in general (see box 6). Non-contributory benefits are usually not directly associated with an interruption of employment in the form of maternity leave, but pursue a broader objective of providing pregnant women and new mothers with a predictable cash benefit during the final stages of their pregnancy and after childbirth.

Some of these programmes combine cash transfers with conditions relating to the utilization of maternal care services, with the aims of encouraging breastfeeding and improving nutrition. In some countries, pregnant women and new mothers are among the target groups in broader conditional cash transfer programmes. In others, there are specific programmes for maternity benefits. Many of these programmes explicitly aim at reducing maternal and child mortality in accordance with the MDGs and with national poverty reduction or social protection strategies. Some programmes explicitly aim at increasing the acceptance of family planning methods and reducing the incidence of child marriage. Benefits are usually provided only to women above a certain minimum age, and only for a certain number of pregnancies. Dedicated conditional cash transfer programmes have recently emerged in Bangladesh, Bolivia, India and Indonesia (see box 6).

Box 6

Maternity cash benefits: Introduction of non-contributory benefits in Argentina, Bangladesh, Bolivia, India, Indonesia and Ghana

Several countries introduced non-contributory benefits to extend the coverage of maternity benefits to those who are usually not covered by contributory schemes.

- Argentina introduced a universal birth allowance in 2011, which covers women from the 12th week of pregnancy to the birth or end of pregnancy. This non-contributory programme complements the birth allowance provided by the social insurance scheme. The programme covered 22 per cent of births in Argentina in 2011, covering on average more than 66,000 women per month between May 2011 and June 2012.

In some countries, the receipt of non-contributory maternity benefits is linked to the fulfilment of certain conditions with regard to antenatal and post-natal health care.

- In Bangladesh, the Maternity Allowance Programme for Poor Lactating Mothers, introduced in 2008, targets women aged 20 and over, living on a monthly income of less than 1,500 taka; it also covers mothers with a disability and women who are the breadwinners of poor families. If eligible, they one-time support during either the first or second pregnancy to the amount of 350 taka per month for a period of two years.
- In Bolivia, the Bono Madre Niño and Bono Juana Azurduy de Padilla benefits are targeted on poor women and their families without medical insurance or access to the breastfeeding grant. During pregnancy and the first two years of the life of the child, beneficiaries receive cash benefits on condition that they follow a schedule of regular health checkups for both mother and child.
- In India, the Indira Gandhi Matritva Sahyog Yojana (IGMSY) programme, introduced in 2010, provides cash benefits for pregnant women and lactating mothers in 52 pilot districts, covering approximately 1.38 million women. A daily benefit for all women aged 19 and over (limited to first two pregnancies; and excluding those who are covered through benefits provided to public sector employees) of approximately US\$1.68 for approximately 40 days aims at providing partial compensation for wage loss to encourage women to take adequate rest before and after childbirth. In addition, all eligible women receive a cash incentive of 4,000 rupees in three instalments from the end of the second trimester of pregnancy until the child reaches six months of age, conditional upon compliance with various conditions pertaining to registration, medical check-ups, vaccinations and breastfeeding practice.
- In Indonesia, the Keluarga Harapan (PKH) conditional cash transfer programme provided regular cash benefits to 1.5 million poor households in 33 provinces in 2012; its conditions include the requirement that pregnant women and lactating mothers regularly visit health facilities for check-ups. The programme complements the Jampersal programme, introduced in 2011, which provides universal free delivery care, including prenatal and post-natal consultations.
- In Ghana, the Ghana Social Trust pilot programme, implemented in two districts from 2009, provides regular cash transfers every two months to poor women until the child reaches the age of five, on condition that women register themselves and their families with the National Health Insurance Scheme (under which registration fees and annual contributions are partially or fully subsidized), follow a schedule of ante- and post-natal care, child health care and vaccinations, have their babies delivered with the assistance of skilled health personnel and register the birth. In addition, women are encouraged to participate in health education sessions.

Sources: ADB, 2013; Barrientos, Niño-Zarazúa and Maitrot, 2010; Ahluwalia, forthcoming; Fultz and Francis, 2013; national sources.

5. Estimating the cost of a universal maternity cash benefit in developing countries

The experience of many low and middle income countries in expanding maternity cash benefits highlights the critical importance of investment in social protection for pregnant women, mothers and their newborns. Ensuring access to maternity care plays a key role for the health of both mothers and children, and investments in maternity cash benefits can play an important role in ensuring at least a minimum level of income security during this critical stage in the lives of mothers and children.

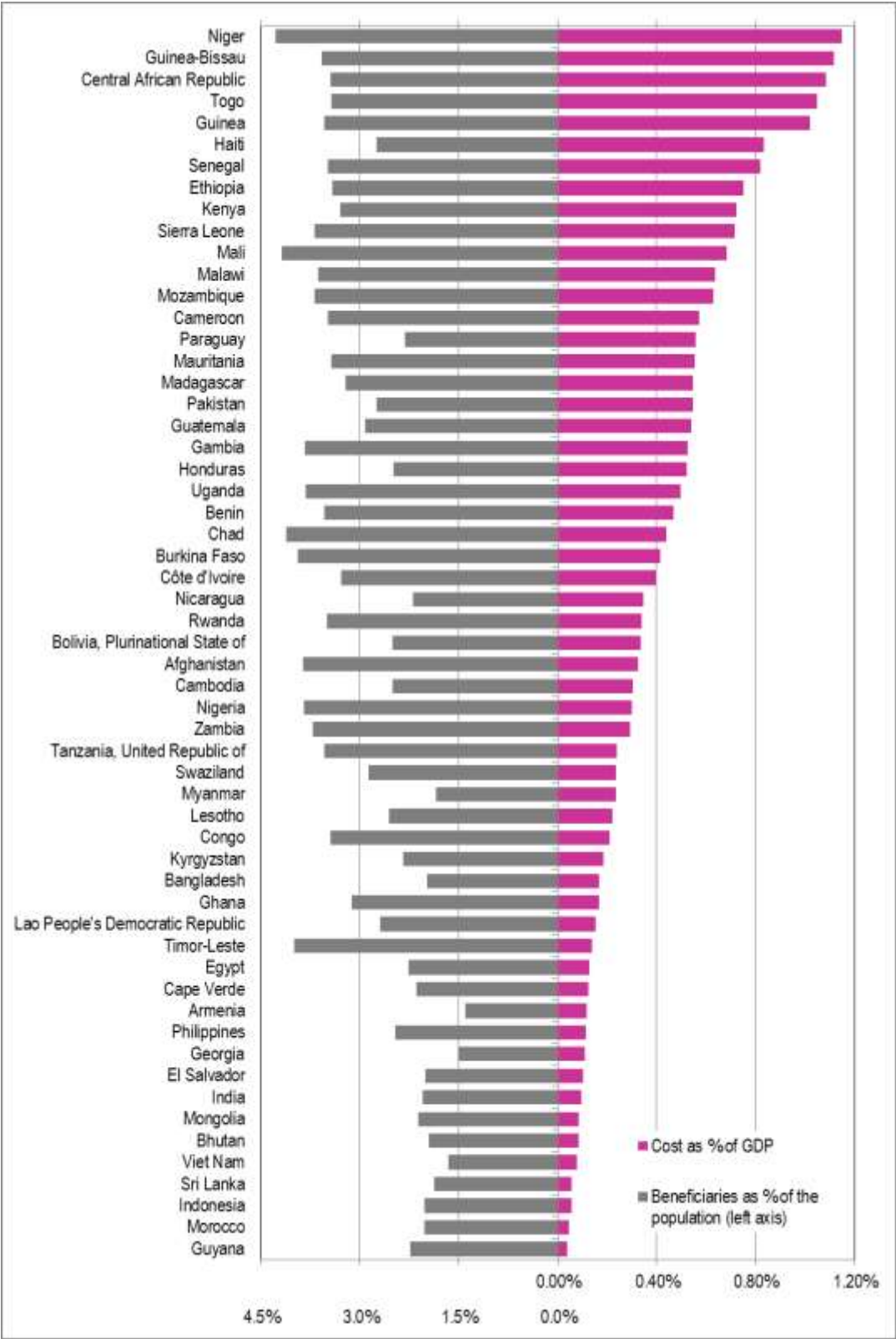
As an input to the global discussion on building social protection floors, the ILO has recently produced a standardized costing of universal social protection floors (SPFs) in all developing countries, based on a common methodological approach that can provide comparable results for different countries (ILO, forthcoming). This costing aims at providing a global and comparable estimate of the potential cost for the implementation of a universal maternity cash benefit in 57 low income and lower middle income countries. For the purpose of this costing, it is assumed that a benefit set at 100 per cent of the national poverty line is being paid to all mothers following childbirth during four months in order to cover as a matter of priority the period when mothers and newborns are most vulnerable.⁵ Such cash benefits can help to reduce financial pressures on mothers, encourage them to take adequate rest after childbirth, and facilitate access to health care services, including with regard to out-of-pocket cost and transport cost. For the cost estimate of a maternity benefit, the number of beneficiaries was calculated based on the observed country specific fertility rates.⁶

These are standardized assumptions used for the purpose of this global costing. With regard to the implementation of maternity benefits in a specific country context, further assessments would be necessary to ascertain the level of such a benefit, possibly in the context of technical advice by the ILO, considering whether pregnant women and new mothers enjoy universal access to health care, in particular to maternal care and infant care, as well as the poverty reduction impact of existing maternity cash benefit schemes and other relevant programmes. Benefit levels may need to be adjusted in order to have significant impacts on the poverty of families. The estimated cost for a basic universal maternity cash benefit ranges in low and lower middle income countries ranges from less than 0.1 per cent of GDP in Guyana, Morocco, Indonesia, Sri Lanka, Viet Nam, Bhutan, Mongolia and India to 1.1 per cent of GDP in Niger (see figure 8). For the majority of countries, the estimated cost does not exceed 0.5 per cent of GDP. The average cost of a universal maternity benefit in the low and lower middle income countries considered reaches 0.41 per cent of their national GDP (arithmetic average) or 0.18 per cent of their combined GDP (weighted average).

⁵ Administrative cost were assumed to be 5 per cent of total benefit expenditure.

⁶ In low income countries, the proportion of women in fertile age (15-45) in the population ranges from between 17.9 per cent in Niger to 28.4 per cent in Myanmar. In lower middle countries, the proportion of women in fertile age (15-45) in the population ranges from between 19.4 per cent in Timor Leste to 28.4 per cent in Mongolia (see ILO, forthcoming).

Figure 8. Estimated cost of a universal maternity benefit during 4 months at 100 per cent of the poverty line as a percentage of GDP, in 2014



Source: ILO, forthcoming.

The estimated cost for a universal maternity cash benefit need to be considered in relation with current expenditure levels in the countries considered (see ILO, 2014a and forthcoming). Some countries have existing schemes with limited coverage, including maternity benefits for women employed in the formal economy, or schemes that cover

some categories of poor and vulnerable women. Extending maternity protection will need to prioritize the extension of coverage with a view to achieving universal protection through a nationally-defined social protection floor. Despite significant progress in reducing maternal and child mortality and in improving maternity protection, large gaps remain. Pregnant women, new mothers and their newborn children remain very vulnerable to the health and financial risks associated with pregnancy and childbirth. Complementing universal access to maternity care, maternity cash transfers can mitigate the financial risks and facilitate access to maternity care. Universal coverage of maternity cash transfers therefore constitutes an important component of a maternity protection package as part of nationally-defined social protection floors.

While the estimated cost of a universal maternity cash benefits remain at less than 0.5 per cent of GDP for the majority of low and lower middle income countries, this still represents a significant investment, especially in low income countries with limited economic and fiscal capacities. At the same time, the need for ensuring a basic level of social protection taking into account national circumstances is particularly urgent in these countries. While they may follow a strategy of progressive implementation which addresses the most pressing needs first and gradually expands coverage as economic and fiscal capacities increase, technical and financial support from the international community can complement the own efforts of these countries and help to accelerate progress.

Fiscal space for maternity protection exists in virtually all countries. Options include: (i) re-allocating public expenditures; (ii) increasing tax revenues; (iii) expanding social security coverage and contributory revenues; (iv) lobbying for aid and transfers; (v) eliminating illicit financial flows; (vi) using fiscal and foreign exchange reserves; (vii) borrowing or restructuring existing debt and; (viii) adopting a more accommodative macroeconomic framework. More on financing options can be found in Ortiz et al (2015).

At a time when the world is discussing a post-2015 development agenda, it is essential that the development community identifies financing sources to ensure social protection for all. It is a question of priorities: the total cost of a universal benefit to all pregnant women in 57 lower income countries is just 0.1 per cent of what G20 countries used to bail out the financial sector in 2009.⁷

6. Conclusion

Maternity protection is a fundamental human right and a core concern for the ILO which makes a significant contribution to the health and well-being of mothers and their babies. Through appropriate policies and programmes it enables women to combine their reproductive and productive roles successfully and to promote equal opportunities and treatment in employment and occupation, without prejudice to health or economic security. It is an indispensable element of comprehensive work–family policies and measures, providing working mothers with access to decent work opportunities free of discrimination (ILO, 2014d).

Substantial progress has been made in the last decades to make the right to maternity protection a reality for an increasing number of women around the world, both with regard to maternal health care, as well as with regard to maternity cash benefits. However, access to appropriate and affordable quality health care services, a key enabling factor for maternal

⁷ According to IMF (2010: 31), the amount announced by G20 governments to rescue the financial sector in 2009 totals US\$ 9.6 trillion; compared to \$10.4 billion, the ILO estimated cost of a universal maternal benefit (a cash transfer equivalent to the national poverty line) to all pregnant and lactating women in 57 low income developing countries.

and child health, is still uneven and far from universal in many low and middle income countries. Gaps and disparities are mainly associated with a lack of universal coverage, lack of available care and services and lack of financial protection necessary to access maternal health services where they exist.

Access to adequate income security during maternity leave is crucial for the health and economic protection of women. It also contributes to the substantive equality of women in the labour market, by supporting women to stay in paid employment (UNWOMEN, 2015). Despite improvements globally, less than 40 per cent of women in employment worldwide are covered by law under mandatory maternity cash benefits schemes. Effective coverage is even lower: only 28 per cent of women in employment are protected through contributory or non-contributory maternity cash benefits. In most cases, maternity protection is provided in relation to employment, under contributory social security schemes. More than often these schemes do not cover the women who are economically active but not in formal employment, or who simply have no income at all. These women do not enjoy either the protection conferred by national law to pregnant women and mothers working under formal arrangements, and are therefore left unprotected, as are their babies. The huge coverage gap that this represents for a significant number of countries requires appropriate action to be taken. Country experience shows that non-contributory programmes are the most effective mechanisms to extend effective coverage in contexts where informality and large-scale poverty prevails.

A number of policy options are available to countries who wish to move forward in making maternity protection happen. The choice of methods and approaches should be dictated by national circumstances, with a view to maximizing efficiency and effectiveness by using the most appropriate combination of mechanisms to cover the largest number of women possible.

In terms of income security, these options include the following, as illustrated by recent developments at national level show:

- Extension of the scope of maternity coverage to categories of women who were previously unprotected (e.g. Australia, Brazil, Chile, Costa Rica, Jordan and South Africa)
- Introduction or extension of non-contributory maternity benefits to women workers in the informal economy or poor women in general (e.g. Argentina, Bangladesh, the Plurinational State of Bolivia, India and Indonesia).
- Combination of cash transfers with measures to promote the utilization of maternal care services, to encourage breastfeeding and improve nutrition (e.g. Bangladesh, Bolivia, Ghana, India and Indonesia).
- Extension of the duration of paid maternity leave in law and increase of the benefit level (e.g. Chile, China, Colombia, Malta and the Bolivarian Republic of Venezuela); increase of the minimum rate of benefit levels and indexation mechanisms (e.g. Finland and Ireland).
- Strengthening complementary provisions relating to assistance for mothers wishing to return to work (e.g. Japan and the Russian Federation) and those relating to childcare facilities (e.g. Australia and Italy).

Evidence suggests that income security further contributes to the well-being of pregnant women, new mothers and their children. Countries that have a higher level of coverage for maternity cash benefits also tend to achieve better results with respect to maternal mortality ratios. These results call for a comprehensive approach to maternity protection, combining maternal health care and income security, in coordination with well-designed policies to

address challenges related to access to health care and public services employment protection and non-discrimination, and occupational safety and health. Implementation, enforcement and compliance issues also need to be tackled through appropriate and coordinated mechanisms to make coverage effective.

Maternity protection is recognized globally as a fundamental investment to secure each country's future human capital. The importance of this investment should be reflected in the national resources allocated to making income security for pregnant women and new mothers and their babies a reality, in line with the Social Protection Floors Recommendation, 2012 (No. 202), to guarantee at least a basic level of income security to all women, and access to maternal health care. The level of resources needed to provide a universal cash maternity benefit has been estimated as 0.41 per cent of national GDP (arithmetic average) or 0.18 per cent of combined GDP (weighted average) per cent of GDP on average for low and lower middle income countries (see section 4.3 and ILO, forthcoming). As a key element of nationally-defined social protection floors and broader social protection systems, such maternity benefits can have a significant impact on the lives of pregnant women, new mothers and their children.

Maternity protection policies have contributed to the reduction of child mortality and improvement of the health of mothers as highlighted in Millennium Development Goals 4 and 5 and also emphasized in the emerging post-2015 sustainable development framework. And by safeguarding women's employment and income security during and after maternity, maternity protection is also essential for ensuring women's access to equality of opportunity and treatment in the workplace, and progress towards Millennium Development Goal 3, promoting gender equality and women's empowerment. Based on this experience, further efforts to accelerate progress on both maternity protection and social protection are key elements of success within the emerging post-2015 development framework.

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Annex I

Minimum requirements in ILO Social Security Standards: Overview table

ILO social security standards serve as key references, guiding all ILO policy and technical advice in the field of social security. They also give meaning and definition to the content of the right to social security as laid down in international human rights instruments (notably the Universal Declaration of Human Rights, 1948, and the International Covenant on Economic, Social and Cultural Rights, 1966), thereby constituting essential tools for the realization of this right and the effective implementation of a rights-based approach to social protection.

The ILO's normative social security framework consists of eight up-to-date Conventions and Recommendations. The most prominent of these are the Social Security (Minimum Standards) Convention, 1952 (No. 102), and the Social Protection Floors Recommendation, 2012 (No. 202).¹ Convention No. 102 is unique among international standards in regrouping the nine classical social security contingencies (medical care, sickness, unemployment, old age, employment injury, family responsibilities, maternity, invalidity, survivorship) into a single comprehensive and legally binding instrument. It sets qualitative and quantitative benchmarks for each of these contingencies, which together determine the minimum standards of social security protection to be provided by social security schemes with regard, inter alia, to:

- definition of the contingency (what must be covered?)
- persons protected (who must be covered?)
- type and rate of benefits (what should be provided?)
- entitlement conditions, including qualifying period (what should a person do to get the right to a benefit?)
- duration of benefit and waiting period (how long must the benefit be paid/provided for?)

In addition, it establishes common rules of collective organization, financing and management, and lays down principles for good governance, including the general responsibility of the State for the due provision of benefits and proper administration of social security systems, participatory management, guarantee of defined benefits, adjustment of pensions, right of appeal and complaint, collective financing and risk-pooling, and periodical actuarial valuations. Convention No. 102 continues to serve as a yardstick and reference in the gradual development of comprehensive social security coverage at the national level and as a means to prevent the levelling down of social security systems worldwide, as confirmed by the International Labour Conference in 2011 (ILO, 2012a).

Table A.1 Main requirements: ILO social security standards on maternity protection

	Convention No. 102 Minimum standards	Convention No. 183^a and Recommendation No. 191^b Higher standards	Recommendation No. 202 Basic protection
What should be covered?	Medical care required by pregnancy, confinement and their consequences; resulting lost wages	C. 183: Medical care required by pregnancy, child birth and their consequences; resulting lost wages R.191: Same as C.183.	Goods and services constituting essential maternity health care Basic income security for those who are unable to earn a sufficient income due to maternity
Who should be protected?	At least: 50% of all women employees; <i>or</i> all women in categories of the active population (forming not less than 20% of all residents); <i>or</i> all women with means under prescribed threshold	C. 183: All employed women including those in atypical forms of dependent work R.191: Same as C.183.	At least all women who are residents, subject to international obligations
What should the benefit be?	<i>Medical benefits:</i> At least: prenatal, confinement and post-natal care by qualified practitioners; hospitalization if necessary <i>Cash benefits:</i> periodic payment: at least 45% of the reference wage	C. 183: <i>Medical benefits:</i> At least prenatal, childbirth and post-natal care by qualified practitioners; hospitalization if necessary Daily remunerated breaks or reduced hours for breastfeeding <i>Cash benefits:</i> At least 66.67% of previous earnings; should maintain mother and child in proper conditions of health and a suitable standard of living R.191: Cash benefits should be raised to the full amount of the woman's previous earnings	<i>Medical benefits:</i> should meet criteria of availability, accessibility, acceptability and quality; free prenatal and post-natal medical care should be considered for the most vulnerable <i>Benefits in cash or in kind:</i> should ensure basic income security, so as to secure effective access to necessary goods and services, and be at a level that prevents or alleviates poverty, vulnerability and social exclusion and allows life in dignity. Levels should be regularly reviewed
What should the benefit duration be?	At least 12 weeks for cash benefits	C. 183: 14 weeks' maternity leave, including 6 weeks' compulsory leave after childbirth; additional leave before or after maternity leave in case of illness, complications or risk of complications arising from pregnancy or childbirth R.191: 18 weeks' maternity leave Extension of the maternity leave in the event of multiple births	As long as the incapacity to earn a sufficient income remains

	Convention No. 102 Minimum standards	Convention No. 183^a and Recommendation No. 191^b Higher standards	Recommendation No. 202 Basic protection
What conditions can be prescribed for entitlement to a benefit?	As considered necessary to preclude abuse	C.183: Conditions must be met by a large majority of women; those who do not meet conditions are entitled to social assistance R.191: Same as C.183	Should be defined at national level and prescribed by law, applying the principles of non-discrimination, responsiveness to special needs and social inclusion, and ensuring the rights and dignity of women

^a Maternity Protection Convention, 2000. ^b Maternity Protection Recommendation, 2000.

Annex II

Statistical tables

The following tables are extracted from the World Social Protection Report 2014/15 (ILO, 2014a). More tables are available in this report, as well as on the following website: <http://www.social-protection.org/gimi/gess/ShowTheme.action?th.themeId=3985>.

Table B.1 Ratification of ILO social security Conventions, by region

Country	Branch								
	Medical care	Sickness	Unemployment	Old age	Employment injury	Family	Maternity	Invalidity	Survivors
	C.102 C.130	C.102 C.130	C.102 C.168	C.102 C.128	C.102 C.121	C.102	C.102 C.183	C.102 C.128	C.102 C.128
Africa									
Benin							C.183 (2012)		
Burkina Faso							C.183 (2013)		
Democratic Republic of the Congo				C.102 (1987)	C.121 (1967)	C.102 (1987)		C.102 (1987)	C.102 (1987)
Guinea					C.121 (1967)				
Libya	C.102 (1975) C.130 (1975)	C.102 (1975) C.130 (1975)	C.102 (1975)	C.102 (1975) C.128 (1975)	C.102 (1975) C.121 (1975)	C.102 (1975)	C.102 (1975)	C.102 (1975) C.128 (1975)	C.102 (1975) C.128 (1975)
Mali							C.183 (2008) C.183 (2011)		
Morocco									
Mauritania				C.102 (1968)	C.102 (1968)	C.102 (1968)		C.102 (1968)	C.102 (1968)
Niger				C.102 (1966)	C.102 (1966)	C.102 (1966)		C.102 (1966)	
Senegal					C.102 (1962) C.121 (1966)	C.102 (1962)		C.102 (1962)	
Togo (not in force)				C.102 (2013)		C.102 (2013)		C.102 (2013)	C.102 (2013)
Americas									
Barbados		C.102 (1972)		C.102 (1972) C.128 (1972)	C.102 (1972)			C.102 (1972) C.128 (1972)	C.102 (1972)
Belize							C.183 (2005)		
Bolivia (Plurinational State of)	C.102 (1977) C.130 (1977)	C.102 (1977) C.130 (1977)		C.102 (1977) C.128 (1977)	C.102 (1977) C.121 (1977)	C.102 (1977)	C.102 (1977) C.183 (1977)	C.102 (1977) C.128 (1977)	C.102 (1977) C.128 (1977)
Brazil	C.102 (2009)	C.102 (2009)	C.102 (2009)	C.102 (2009)	C.102 (2009)	C.102 (2009)	C.102 (2009)	C.102 (2009)	C.102 (2009)

			C.168 (1993)						
Chile					C.121 (1999)				
Costa Rica	C.102 (1972) C.130 (1972)	C.130 (1972)		C.102 (1972)	C.102 (1972)	C.102 (1972)	C.102 (1972)	C.102 (1972)	C.102 (1972)
Cuba							C.183 (2004)		
Ecuador	C.130 (1978)	C.102 (1974) C.130 (1978)		C.102 (1974) C.128 (1978)	C.102 (1974) C.121 (1978)			C.102 (1974) C.128 (1978)	C.102 (1974) C.128 (1978)
Honduras	C.102 (2012)	C.102 (2012)		C.102 (2012)			C.102 (2012)	C.102 (2012)	C.102 (2012)
Mexico	C.102 (1961)	C.102 (1961)		C.102 (1961)	C.102 (1961)		C.102 (1961)	C.102 (1961)	C.102 (1961)
Peru	C.102 (1961)	C.102 (1961)		C.102 (1961)			C.102 (1961)	C.102 (1961)	
Uruguay	C.102 (2010) C.130 (1973)	C.130 (1973)	C.102 (2010)	C.128 (1973)	C.121 (1973)*	C.102 (2010)	C.102 (2010)	C.128 (1973)	C.128 (1973)
Venezuela, Bolivarian Republic of	C.102 (1982) C.130 (1982)	C.102 (1982) C.130 (1982)		C.102 (1982) C.128 (1983)	C.102 (1982) C.121 (1982)		C.102 (1982)	C.102 (1982) C.128 (1983)	C.102 (1982) C.128 (1983)
Middle East									
Israel				C.102 (1955)	C.102 (1955)				C.102 (1955)
Jordan (not in force)				C.102 (2014)	C.102 (2014)		C.102 (2014)		C.102 (2014)
Asia									
Azerbaijan							C.183 (2010)		
Japan		C.102 (1976)	C.102 (1976)	C.102 (1976)	C.102 (1976) C.121 (1974)*				
Kazakhstan							C.183 (2012)		
Europe									
Albania	C.102 (2006)	C.102 (2006)	C.102 (2006) C.168 (2006)	C.102 (2006)	C.102 (2006)		C.102 (2006) C.183 (2004)	C.102 (2006)	C.102 (2006)
Austria	C.102 (1969)		C.102 (1978)	C.102 (1969) C.128 (1969)		C.102 (1969)	C.102 (1969) C.183 (2004) C.183 (2004)		
Belarus									
Belgium	C.102 (1959)	C.102 (1959)	C.102 (1959) C.168 (2011)	C.102 (1959)	C.102 (1959) C.121 (1970)	C.102 (1959)	C.102 (1959)	C.102 (1959)	C.102 (1959)
Bosnia and Herzegovina	C.102 (1993)	C.102 (1993)	C.102 (1993)	C.102 (1993)	C.102 (1993) C.121 (1993)		C.102 (1993) C.183 (2012)		C.102 (1993)
Bulgaria	C.102 (2008)	C.102 (2008)		C.102 (2008)	C.102 (2008)	C.102 (2008)	C.102 (2008) C.183 (2001)		C.102 (2008)
Croatia	C.102 (1991)	C.102 (1991)	C.102 (1991)	C.102 (1991)	C.102 (1991) C.121 (1991)		C.102 (1991)		C.102 (1991)
Cyprus		C.102 (1991)	C.102 (1991)	C.102 (1991)	C.102 (1991) C.121 (1966)		C.183 (2005)	C.102 (1991)	C.102 (1991) C.128 (1969)

Czech Republic	C.102 (1993) C.130 (1993)	C.102 (1993) C.130 (1993)		C.102 (1993) C.128 (1993)		C.102 (1993)	C.102 (1993)	C.102 (1993)	C.102 (1993)
Denmark	C.102 (1955) C.130 (1978)	C.130 (1978)	C.102 (1955)	C.102 (1955)	C.102 (1955)			C.102 (1955)	
Finland	C.130 (1974)	C.130 (1974)	C.168 (1990)	C.128 (1976)	C.121 (1968)*			C.128 (1976)	C.128 (1976)
France	C.102 (1974)		C.102 (1974)	C.102 (1974)	C.102 (1974)	C.102 (1974)	C.102 (1974)	C.102 (1974)	
Germany	C.102 (1958) C.130 (1974)	C.102 (1958) C.130 (1974)	C.102 (1958)	C.102 (1958) C.128 (1971)	C.102 (1958) C.121 (1972)	C.102 (1958)	C.102 (1958)	C.102 (1958) C.128 (1971)	C.102 (1958) C.128 (1971)
Greece	C.102 (1955)	C.102 (1955)	C.102 (1955)	C.102 (1955)	C.102 (1955)		C.102 (1955)	C.102 (1955)	C.102 (1955)
Hungary							C.183 (2003)		
Iceland				C.102 (1961)		C.102 (1961)		C.102 (1961)	
Ireland		C.102 (1968)	C.102 (1968)		C.121 (1969)				C.102 (1968)
Italy				C.102 (1956)		C.102 (1956)	C.102 (1956)		
Latvia							C.183 (2001)		
Lithuania							C.183 (2009)		
Luxembourg	C.102 (1964) C.130 (1980)	C.102 (1964) C.130 (1980)	C.102 (1964)	C.102 (1964)	C.102 (1964) C.121 (1972)	C.102 (1964)	C.102 (1964) C.183 (2008)	C.102 (1964)	C.102 (1964)
Moldova, Republic of							C.183 (2006)		
Montenegro	C.102 (2006)	C.102 (2006)	C.102 (2006)	C.102 (2006)	C.102 (2006) C.121 (2006)		C.102 (2006) C.183 (2012)		C.102 (2006)
Netherlands	C.102 (1962) C.130 (2006)	C.102 (1962) C.130 (2006)	C.102 (1962)	C.102 (1962) C.128 (1969)	C.102 (1962) C.121 (1966)*	C.102 (1962)	C.102 (1962) C.183 (2009)	C.102 (1962) C.128 (1969)	C.102 (1962) C.128 (1969)
Norway	C.102 (1954) C.130 (1972)	C.102 (1954) C.130 (1972)	C.102 (1954) C.168 (1990)	C.102 (1954) C.128 (1968)	C.102 (1954)	C.102 (1954)		C.128 (1968)	C.128 (1968)
Poland	C.102 (2003)			C.102 (2003)		C.102 (2003)	C.102 (2003)		C.102 (2003)
Portugal	C.102 (1994)	C.102 (1994)	C.102 (1994)	C.102 (1994)	C.102 (1994)	C.102 (1994)	C.102 (1994) C.183 (2012)	C.102 (1994)	C.102 (1994)
Romania	C.102 (2009)	C.102 (2009)	C.168 (1992)	C.102 (2009)		C.102 (2009)	C.102 (2009) C.183 (2002)		
Serbia	C.102 (2000)	C.102 (2000)	C.102 (2000)	C.102 (2000)	C.102 (2000) C.121 (2000)		C.102 (2000) C.183 (2010)		C.102 (2000)
Slovakia	C.102 (1993) C.130 (1993)	C.102 (1993) C.130 (1993)		C.102 (1993) C.128 (1993)		C.102 (1993)	C.102 (1993) C.183 (2000)	C.102 (1993)	C.102 (1993)
Slovenia	C.102 (1992)	C.102 (1992)	C.102 (1992)	C.102 (1992)	C.102 (1992) C.121 (1992)		C.102 (1992) C.183 (2010)		C.102 (1992)
Spain	C.102 (1988)	C.102 (1988)	C.102 (1988)		C.102 (1988)				
Sweden	C.102 (1953) C.130 (1970)	C.102 (1953) C.130 (1970)	C.102 (1953) C.168 (1990)	C.128 (1968) C.168 (1990)	C.102 (1953) C.121 (1969)	C.102 (1953)	C.102 (1953)	C.128 (1968)	C.128 (1968)
Switzerland			C.168 (1990)	C.102 (1977) C.128 (1977)	C.102 (1977)	C.102 (1977)		C.102 (1977) C.128 (1977)	C.102 (1977) C.128 (1977)

The Former Yugoslav Rep. of Macedonia	C.102 (1991)	C.102 (1991)	C.102 (1991)	C.102 (1991)	C.102 (1991) C.121 (1991)	C.102 (1991) C.183 (2012)	C.102 (1991)
Turkey	C.102 (1975)	C.102 (1975)		C.102 (1975)	C.102 (1975)	C.102 (1975)	C.102 (1975)
United Kingdom	C.102 (1954)	C.102 (1954)	C.102 (1954)	C.102 (1954)		C.102 (1954)	C.102 (1954)

* Has accepted the text of the List of Occupational Diseases (Schedule I) amended by the ILC at its 66th Session (1980).

Source: ILO (International Labour Office): ILO International labour standards and national legislation database (NORMLEX) (incorporates the former ILOLEX and NATLEX databases). Available at: <http://www.ilo.org/dyn/normlex/en/> [20 Apr. 2014].

Table B.2 Overview of national social security systems

Country	Number of policy areas covered by at least one programme		Existence of programme(s) anchored in national legislation							
	Number of policy areas (branches) covered by at least one programme	Number of social security policy areas covered by at least one programme	Sickness (cash)	Maternity (cash) ¹	Old age ²	Employment injury ³	Invalidity	Survivors	Family allowances	Unemployment ⁴
Africa										
Algeria	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Angola	...	...	...	●	●	●	●	●	...	...
Benin	6	Limited scope of legal coverage | 5 to 6	▲	●	●	●	●	●	●	None
Botswana	4	Very limited scope of legal coverage | 1 to 4	▲	▲	●	●	None	●	●	▲
Burkina Faso	6	Limited scope of legal coverage | 5 to 6	▲	●	●	●	●	●	●	None
Burundi	6	Limited scope of legal coverage | 5 to 6	●	▲	●	●	●	●	●	None
Cameroon	6	Limited scope of legal coverage | 5 to 6	▲	●	●	●	●	●	●	▲
Cabo Verde	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	None
Central African Republic	6	Limited scope of legal coverage | 5 to 6	▲	●	●	●	●	●	●	None
Chad	6	Limited scope of legal coverage | 5 to 6	▲	●	●	●	●	●	●	None
Congo	6	Limited scope of legal coverage | 5 to 6	▲	●	●	●	●	●	●	None
Congo, Democratic Republic of	6	Limited scope of legal coverage | 5 to 6	▲	●	●	●	●	●	●	None
Côte d'Ivoire	6	Limited scope of legal coverage | 5 to 6	△	●	●	●	●	●	●	▲

Djibouti	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	None	●	●	None
Egypt	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	None	●
Equatorial Guinea	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	None
Eritrea	...	...	...	▲	...	...	...	...	...	None
Ethiopia	4	Very limited scope of legal coverage | 1 to 4	▲	▲	●	●	●	●	None	▲
Gabon	6	Limited scope of legal coverage | 5 to 6	▲	●	●	●	●	●	●	▲
Gambia	4	Very limited scope of legal coverage | 1 to 4	None	▲	●	●	●	●	None	None
Ghana	4	Very limited scope of legal coverage | 1 to 4	△	▲	●	●	●	●	None	None
Guinea	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	None
Guinea-Bissau	...	...	...	▲	●	●	●	●	...	None
Kenya	4	Very limited scope of legal coverage | 1 to 4	▲	▲	●	●	●	●	None	None
Lesotho	3	Very limited scope of legal coverage | 1 to 4	▲	▲	●	●	●	●	...	▲
Liberia	4	Very limited scope of legal coverage | 1 to 4	None	None	●	●	●	●	None	None
Libya	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None	▲
Madagascar	6	Limited scope of legal coverage | 5 to 6	▲	●	●	●	●	●	●	None
Malawi	1	Very limited scope of legal coverage | 1 to 4	△	▲	●	●	None	None	None	None
Mali	6	Limited scope of legal coverage | 5 to 6	▲	●	●	●	●	●	●	None
Mauritania	6	Limited scope of legal coverage | 5 to 6	△	●	●	●	●	●	●	None
Mauritius	6	Limited scope of legal coverage | 5 to 6	▲	▲	●	●	●	●	●	X
Morocco	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	▲
Mozambique	6	Limited scope of legal coverage | 5 to 6	●	●	●	...	●	●	●	None

Namibia	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	●	▲
Niger	6	Limited scope of legal coverage | 5 to 6	▲	●	●	●	●	●	●	●	None
Nigeria	4	Very limited scope of legal coverage | 1 to 4	△	▲	●	●	●	●	●	None	▲
Réunion	...	...	...	...	...	...	...	...	...	...	...
Rwanda	4	Very limited scope of legal coverage | 1 to 4	▲	▲	●	●	●	●	●	None	▲
Sao Tome and Principe	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	●	None	None
Senegal	5	Limited scope of legal coverage | 5 to 6	△	●	●	●	None	●	●	●	None
Seychelles	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	None	●
Sierra Leone	4	Very limited scope of legal coverage | 1 to 4	None	None	●	●	●	●	●	None	None
Somalia	...	...	...	▲	...	...	...	...	...	None	None
South Africa	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
South Sudan	...	...	...	...	...	...	...	...	...	...	None
Sudan	4	Very limited scope of legal coverage | 1 to 4	None	▲	●	●	●	●	●	None	None
Swaziland	4	Very limited scope of legal coverage | 1 to 4	None	△	●	●	●	●	●	None	None
Tanzania, United Republic of	5	Limited scope of legal coverage | 5 to 6	△	●	●	●	●	●	●	None	▲
Togo	6	Limited scope of legal coverage | 5 to 6	▲	●	●	●	●	●	●	●	None
Tunisia	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Uganda	4	Very limited scope of legal coverage | 1 to 4	△	▲	●	●	●	●	●	None	▲
Zambia	4	Very limited scope of legal coverage | 1 to 4	△	None	●	●	●	●	●	None	None
Zimbabwe	4	Very limited scope of legal coverage | 1 to 4	None	▲	●	●	●	●	●	None	None

Asia											
Afghanistan	...	...	...	▲	...	...	...	...	...	...	None
Armenia	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Azerbaijan	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Bahrain	5	Limited statutory provision | 5 to 6	None	▲	●	●	●	●	●	None	●
Bangladesh	4	Very limited scope of legal coverage | 1 to 4	●	●	●	●	None	None	None	None	▲
Bhutan	...	...	...	...	●	●	●	●	...	...	None
Brunei Darussalam	4	Very limited scope of legal coverage | 1 to 4	△	▲	●	●	●	●	●	None	None
Cambodia	...	...	...	▲	...	...	...	...	...	...	▲
China	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Georgia	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	●	▲
Hong Kong, China	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
India	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	None	●
Indonesia	4	Very limited scope of legal coverage | 1 to 4	△	▲	●	●	●	●	●	None	▲
Iran, Islamic Rep. of	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Iraq	...	...	...	▲	...	...	...	...	...	...	None
Israel	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Japan	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Jordan	6	Limited scope of legal coverage | 5 to 6	△	●	●	●	●	●	●	None	●
Kazakhstan	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●

Korea, Dem. People's Rep. of	...	...	...	...	...	...	...	...	...	None	None
Korea, Republic of	5	Limited scope of legal coverage | 5 to 6	△	▲	●	●	●	●	None	●	●
Kuwait	4	Very limited scope of legal coverage | 1 to 4	.	▲	●	●	●	●	None	None	None
Kyrgyzstan	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Lao People's Dem. Rep.	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None	None	None
Lebanon	6	Limited scope of legal coverage | 5 to 6	△	●	●	●	●	●	●	●	None
Macau, China	...	...	...	...	...	...	...	...	...	...	...
Malaysia	4	Very limited scope of legal coverage | 1 to 4	△	▲	●	●	●	●	None	▲	▲
Maldives	...	...	△	...	●	...	●	●	...	None	None
Mongolia	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Myanmar ⁵	3	Very limited scope of legal coverage | 1 to 4	●	●	▲	●	▲	▲	Not yet	Not yet	Not yet
Nepal	4	Very limited scope of legal coverage | 1 to 4	▲	▲	●	●	●	●	None	▲	▲
Occupied Palestinian Territory	...	...	...	●	...	...	...	...	...	None	None
Oman	4	Very limited scope of legal coverage | 1 to 4	None	▲	●	●	●	●	None	None	None
Pakistan	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None	▲	▲
Philippines	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None	▲	▲
Qatar	...	Very limited scope of legal coverage | 1 to 4	...	▲	●	...	●	●	None	None	None
Saudi Arabia	5	Limited scope of legal coverage | 5 to 6	▲	▲	●	●	●	●	None	●	●
Singapore	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	None	None
Sri Lanka	5	Limited scope of legal coverage | 5 to 6	△	▲	●	●	●	●	●	▲	▲
Syrian Arab Republic	4	Very limited scope of legal coverage | 1 to 4	None	▲	●	●	●	●	None	▲	▲

Taiwan, China	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	None	●
Tajikistan	6	Limited scope of legal coverage | 5 to 6	●	●	●	...	●	●	...	...	●
Thailand	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Timor-Leste	...	...	...	▲	●	...	...	...	...	None	None
Turkmenistan	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
United Arab Emirates	...	...	...	▲	...	...	...	...	...	...	▲
Uzbekistan	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Viet Nam	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	None	●
Yemen	5	Limited scope of legal coverage | 5 to 6	●	▲	●	●	●	●	●	None	▲
Europe											
Albania	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Andorra	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Austria	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Belarus	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Belgium	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Bosnia and Herzegovina	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Bulgaria	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Croatia	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Cyprus	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Czech Republic	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●

Denmark	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Estonia	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Finland	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
France	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Germany	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Greece	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Guernsey	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Hungary	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Iceland	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Ireland	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Isle of Man	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Italy	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Jersey	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Kosovo	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Latvia	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Liechtenstein	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Lithuania	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Luxembourg	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Malta	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Moldova, Republic of	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Monaco	...	...	●	●	●	●	●	●	●	●

Montenegro	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Netherlands	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Norway	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Poland	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Portugal	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Romania	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Russian Federation	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
San Marino	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Serbia	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Slovakia	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Slovenia	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Spain	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Sweden	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Switzerland	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
The Former Yugoslav Republic of Macedonia	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Turkey	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	None	●
Ukraine	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
United Kingdom	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Latin America and the Caribbean										
Antigua and Barbuda	5	Limited scope of legal coverage | 5 to 6	●	●	●	None	●	●	None	None
Argentina	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●

Bahamas	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None	None
Barbados	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	None	●
Belize	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None	None
Bermuda	4	Very limited scope of legal coverage | 1 to 4	▲	▲	●	●	●	●	None	None
Bolivia, Plurinational State of	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	▲
Brazil	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
British Virgin Islands	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	●	None
Chile	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Colombia	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Costa Rica	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	▲
Cuba	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None ⁶	None
Dominica	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None ⁷	None
Dominican Republic	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	None
Ecuador	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	None ⁸	●
El Salvador	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None	None
Grenada	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None	None
Guadeloupe	...	...	●	●	●	●	●	●	...	...
Guatemala	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None	None
Guyana	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None	None
French Guiana	...	...	...	...	●	●	●	●	...	...
Haiti	4	Very limited scope of legal coverage | 1 to 4	None	▲	●	●	●	●	None	None

Honduras	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None	None
Jamaica	6	Limited scope of legal coverage | 5 to 6	▲	●	●	●	●	●	●	None
Martinique	...	...	...	●	●	●	●	●	●	...
Mexico	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	▲
Netherlands Antilles	...	...	●	●	●	●	●	●	●	...
Nicaragua	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	None
Panama	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None	▲
Paraguay	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	▲	None
Peru	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None	▲
Puerto Rico	...	...	●	●	...	●	●	●	...	...
Saint Kitts and Nevis	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None	None
Saint Lucia	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None	None
Saint Vincent and the Grenadines	6	Limited scope of legal coverage | 5 to 6	●	●	●	●	●	●	None	None
Suriname	...	...	...	...	...	...	...	...	...	None
Trinidad and Tobago	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	●	None
Uruguay	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
Venezuela, Bolivarian Rep. of	7	Semi-comprehensive scope | 7	●	●	●	●	●	●	None	●
North America										
Canada	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●
United States	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●

Oceania											
Australia	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Fiji	5	Limited scope of legal coverage | 5 to 6	None	▲	●	●	●	●	●	●	None
Kiribati	4	Very limited scope of legal coverage | 1 to 4	None	▲	●	●	●	●	●	None	None
Marshall Islands	3	Very limited scope of legal coverage | 1 to 4	△	△	●	None	●	●	●	None	None
Micronesia, Fed. States	3	Very limited scope of legal coverage | 1 to 4	None	None	●	None	●	●	●	None	None
Nauru	...	...	...	...	...	...	...	...	...	...	None
New Zealand	8	Comprehensive scope of legal coverage | 8	●	●	●	●	●	●	●	●	●
Niue	...	...	...	...	...	...	...	...	...	...	None
Palau Islands	3	Very limited scope of legal coverage | 1 to 4	None	None	●	None	●	●	●	None	None
Papua New Guinea	4	Very limited scope of legal coverage | 1 to 4	▲	None	●	●	●	●	●	None	None
Samoa	4	Very limited scope of legal coverage | 1 to 4	...	...	●	●	●	●	●	None	None
Solomon Islands	4	Limited scope of legal coverage | 5 to 6	None	None	●	●	●	●	●	None	▲
Tonga	...	No information	...	...	●	●	●	●	●	...	None
Tuvalu	...	No information	...	...	●	●	●	●	●	...	▲
Vanuatu	3	Very limited scope of legal coverage | 1 to 4	▲	▲	●	None	●	●	●	None	▲

Sources:

Main source: SSA (Social Security Administration of the United States); ISSA (International Social Security Association). Social security programs throughout the world (Washington, DC and Geneva): The Americas, 2013; Europe, 2012; Asia and the Pacific, 2012; Africa, 2013. Available at: <http://www.ssa.gov/policy/docs/progdesc/ssptw/> [7 June 2014].

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Notes

...: Not available.

Symbols

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- At least one programme anchored in national legislation
- Legislation not yet implemented.
- ▲ Limited provision (e.g. labour code only).
- △ Only benefit in kind (e.g. medical benefit).

¹ Additional details in table B.5 Maternity: Key features of main social security programmes (cash benefits) (<http://www.social-protection.org/gimi/gess/RessourceDownload.action?ressource.ressourceId=37580>).

² Additional details in table B.6. Old age pensions: Key features of main social security programmes (<http://www.social-protection.org/gimi/gess/RessourceDownload.action?ressource.ressourceId=37137>).

³ Additional details in table B.4. Employment injury: Key features of main social security programmes (cash benefits) (<http://www.social-protection.org/gimi/gess/RessourceDownload.action?ressource.ressourceId=41917>).

⁴ Additional details in table B.3. Unemployment: indicators of effective coverage (<http://www.social-protection.org/gimi/gess/RessourceDownload.action?ressource.ressourceId=37697>).

⁵ Myanmar enacted its social security law in 2012. The law includes provisions for most social security branches including old age, survivors, disability, family benefits and unemployment insurance benefit (section 37), but the country is at the stage of drafting the regulations and provisions are not yet being implemented.

⁶ Cuba. Family/child benefits: Dependants of young workers conscripted into military service are eligible for assistance from social security. Cash benefits are available for families whose head of household is unemployed due to health, disability or other justifiable causes, and has insufficient income for food and medicine or basic household needs.

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- ⁷ Dominica. Family/child benefits: Benefits are paid to unemployed single mothers with unmarried children younger than age 18 (age 21 if a full-time student, no limit if disabled) who lack sufficient resources to meet basic needs. (Social assistance benefits are provided under the Old Age, Disability, and Survivors programme).
- ⁸ Ecuador. Family/child benefits: No statutory benefits are provided. Mothers assessed as needy with at least one child (younger than age 18) and low-income families receive a monthly allowance under the Bono de Desarrollo Humano programme

Definitions

The scope of coverage is measured by the number of social security policy areas provided for by law. This indicator can take the value 0 to 8 according to the total number of social security policy areas (or branches) with a programme anchored in national legislation.

The eight following branches are taken into consideration: sickness, maternity, old age, survivors, invalidity, child/family allowances, employment injury and unemployment.

The number of branches covered by at least one programme provides an overview of the scope of legal social security provision.

B.5 Maternity: Key features of main social security programmes (cash benefits)

Country or area	Date of the first labour law (or Labour Act*)	Provider of maternity benefits, type of programme and financing sources			Coverage of self-employed	Length of maternity leave		Percentage of wages paid in covered price	
		Provider of maternity benefits	Type of programme	Source of financing		Period (no. and unit)	No. of weeks	%	Note
Algeria	1949	Social security	Social insurance	Employer & employee	No	14	weeks	14	100
Angola	...	Social security (the employer advances the payment and is reimbursed by social insurance)	Social insurance	Employer & employee	...	13	weeks	13	100
Benin	1952	Social security (50%); Employer (50%)	Social insurance	Employer	No	14	weeks	14	100
Botswana ¹	1994*	Employer (no statutory social security benefits)	Employer liability	Employer	No	12	weeks	12	50
Burkina Faso ²	1952	Social insurance (if necessary, the employer adds up to the full wage)	Social insurance	Employer	No	14	weeks	14	100
Burundi ³	1993*	Employer (50%); Social security (50%)	Employer liability	Employer	No	12	weeks	12	100
Cameroon	1956	National Social Insurance Fund	Social insurance	Employer	No	14	weeks	14	100
Cabo Verde	1976	Social security	Social insurance	Employer & employee	Yes, with exceptions	60	days	8.5	90 ⁴
Central African Republic	1952	Social security	Social insurance	Employer	No	14	weeks	14	50
Chad	1952	Social security	Social insurance	Employer & Government	No	14	weeks	14	100
Comoros	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	14	weeks	14	100
Congo	1952	Social security (50%); Employer (50%)	Social insurance	Employer	No	15	weeks	15	100
Congo, Democratic Republic of ⁵	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	14	weeks	14	67
Côte d'Ivoire	1955	National social insurance fund	Social insurance	Employer	Yes, voluntary basis	14	weeks	14	100
Djibouti	...	Social Protection Body (50%); Employer (50%)	...	.	...	14	weeks	14	100

Egypt	1959, 1964	Social insurance (75%); Employer (25%)	Social insurance	Employer & employee	No	90	days	13	100	
Equatorial Guinea	1947	Social security	Social insurance	Employer, employee & government	No	12	weeks	12	75	
Eritrea	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	60	days	8.5	...	6
Ethiopia ⁷	2002*	Employer (for up to 45 days)	Employer liability	Employer	No	90	days	13	100	
Gabon	1952, 1975	National Social Security Fund	Social insurance	Employer	Yes	14	weeks	14	100	
Gambia	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	12	weeks	12	100	
Ghana	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	12	weeks	12	100	
Guinea	1960	Social security (50%); Employer (50%)	Social insurance	Employer & employee	No	14	weeks	14	100	
Guinea-Bissau ⁸	...	Social security; Employer	Social insurance and employer liability	Employer	No	60	days	8.5	100	
Kenya ⁹	1966*	Employer (no statutory social security benefits)	Employer liability	Employer	No	3	months	13	100	
Lesotho	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	12	weeks	12	100	10
Liberia	...	Employer	Employer liability	Employer	No	90	days	13	100	
Libya	1957	Employer, Social security for self-employed women	Employer, social insurance (self- employed)	Employer, employee & Government	Yes	14	weeks	14	50, 100	11
Madagascar	1952	Social insurance (50%); Employer (50%)	Social insurance	Employer	No	14	weeks	14	100	
Malawi	...	Employer (no statutory social security benefits)	Employer liability	No statutory provision or employer liability	No	8	¹² weeks	8	100	
Mali	1952	Social security	Social insurance	Employer & employee	Yes, voluntary basis	14	weeks	14	100	
Mauritania	1952	National Social Security Fund	Social insurance	Employer	No	14	weeks	14	100	
Mauritius ¹³	2008*	Employer (no statutory social security benefits)	Employer liability	Employer	No	12	weeks	12	100	
Morocco	1959	Social security	Social insurance	Employer & employee	No	14	weeks	14	100	
Mozambique	...	Social security	Social insurance	...	...	60	days	8.5	100	
Namibia	1994	Social security; Employer (topped up)	Social insurance	...	...	12	weeks	12	100	
Niger ¹⁴	1952	Social insurance (50%);	Social insurance	Employer	No	14	weeks	14	50	

Nigeria ¹⁵	...	Employer (50%) Employer (no statutory social security benefits)	Employer liability	Employer	No	12	weeks	12	50	
Rwanda ¹⁶	...	Employer (if women not covered by social security)	Employer liability	Employer	No	12	weeks	12	100, 20	¹⁷
Sao Tome and Principe	1979	Social security (Employer if women not covered by social security)	Social insurance	Employer, employee & Government	No	60	days	8.5	100	
Senegal	1952	Social security	Social insurance	Employer & employee	No	14	weeks	14	100	
Seychelles	1979	Social Security Fund	Social insurance	Employer & employee	Yes	14 [12]	weeks	14 [12]	...	¹⁸
Sierra Leone	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	12	weeks	12	100	
Somalia	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	14	weeks	14	50	
South Africa	1937	Unemployment Insurance Fund	Social insurance	Employer, employee & Government	No	4	months	17	60	¹⁹
Sudan	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	8	weeks	8	100	
Swaziland	n.a.	No statutory benefit	Employer liability	Employer	No	12 [2]	weeks	12 [2]	100	²⁰
Tanzania, United Republic of	1997	Social insurance system	Social insurance	Employer, employee & Government	Yes	12	weeks	12	100	
Togo	1956	Social security (50%); Employer (50%)	Social insurance	Employer (and self-employed)	Yes	14	weeks	14	100	
Tunisia	1960	National Social Security Fund	Social insurance	Employer & employee	Yes	1, 2	²¹ month(s)	4.3	67, 50, 100	²²
Uganda	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	60	working days	10	100	
Zambia	1973*	Employer (no statutory social security benefits)	Employer liability	Employer	No	12	weeks	12	100	
Zimbabwe ²³	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	98	days	14	100	
Afghanistan	...	Employer (no statutory social security benefits)	Employer liability	Asia Employer	No	90	days	13	100	
Armenia	1912	Social insurance	Social insurance	Employer, employee & Government	Yes	140	days	20	100	
Azerbaijan	1912	Social security	Social insurance	Employer & employee	Yes	126	calendar days	18	100	
Bahrain	...	Employer	Employer liability	Employer	No	60 [45]	²⁴ days	8.5 [6.4]	100	
Bangladesh	1939	Employer; Government ²⁵	Employer liability,	Employer,	Yes, by	16	weeks	16	100	

			social assistance	Government	social assistance						
Brunei Darussalam	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	9 [8]	²⁶	weeks	9 [8]	100	²⁶
Cambodia	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	90		days	13	50	
China	1951	Social insurance	Social insurance & mandatory private insurance or mandatory individual account	Employer & Government	Yes, voluntary basis	98	²⁷	days	14	100	²⁷
Georgia	1955	Employees and self-employees; subsidized by Government	Social insurance	Government	Yes	18		weeks	18	100	
Hong Kong (China), Special Administrative Region	1968	Employer	Mixed: employer liability & social assistance	Employer and Government	Yes, by social assistance	10		weeks	10	80	
India	1948	Social security; Government	Mixed: social insurance and social assistance	Employer, employee & Government	Yes, by social assistance	12		weeks	12	100	
Indonesia	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	3		months	13	100	
Iran, Islamic Republic of	1949	Social security	Social insurance	Employer, employee & Government	No	90		days	13	67	
Iraq	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	62		days	9	100	
Israel	1953	Social security	Social insurance	Employer, employee & Government	Yes	12-14		weeks	14	100	²⁸
Japan	1922	One-eighth National Treasury, seven-eighths Employment Insurance Fund	Social insurance	Employer, employee & Government ²⁹	Yes	14		weeks	14	67	³⁰
Jordan	2010	Social Security	Social insurance	Employer & Government	No	10		weeks	10	100	
Kazakhstan	1999	Employer	Social insurance	Employer	No	126		calendar days	18	100	
Korea, Republic of	1963	Employer (67%); Employment Insurance Fund (no cash benefit provided) (33%)	Social insurance	Employer; employment insurance fund	...	90		days	13	100	³¹
Kuwait	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	70		days	10	100	
Kyrgyzstan	1922	Social security (Employer	Social insurance	Employer &	No	126		calendar	18	...	³²

		covers the first 10 working days)		employee			days			
Lao People's Democratic Republic	1999	Social security or employer	Social insurance	Employer, employee & Government	No	90	days	13	100	33
Lebanon	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	7	weeks	7	100	34
Malaysia ³⁵	2012*	Employer (no statutory social security benefits)	Employer liability	Employer	No	60	days	8.5	100	
Mongolia	1994	Social Insurance Fund	Social insurance	...	...	120	days	17	70	
Myanmar	1954	Social security	Social insurance	Employer, employee & government	No	12	weeks	12	67	
Nepal ³⁶	1983*	Employer (no statutory social security benefits)	Employer liability	Employer	No	52, 60	days	7.4, 8.5	100	
Occupied Palestinian Territory	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	70	days	10	100	
Oman	2012	Employer	Employer liability	Employer	No	50	days	7	100	37
Pakistan	1965	Employer	Social insurance	Employer	No	12	weeks	12	100	
Philippines	1977	Social security or employer	Social insurance	Employer, employee & Government	Yes	60	days	8.5	100	38
Qatar	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	50	days	7	100	
Saudi Arabia	1969*	Employer (no statutory social security benefits)	Employer liability	Employer	No	10	weeks	10	50, 100	39
Singapore	1968	Employer and Government	Employer liability	Employer & Government	No	16	weeks	16	100	40
Sri Lanka ⁴¹	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	12	weeks	12	86, 100	42
Syrian Arab Republic	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	120, 90, 75	days	17	100	43
Taiwan, China	1950	Social security	Social insurance	Employer, employee & Government	Yes, with exceptions		lump sum	Lump sum	One lump sum	
Tajikistan	1997	Social security	Social insurance	Employer & Government	Yes	140	calendar days	20	100	
Thailand	1990	Employer (67%); Social insurance system (33%)	Social insurance	Employer, employee & Government	Yes, voluntary basis	90	days	13	100, 50	44
Timor Leste	2002	Employer	Employer liability	Employer	No	12	weeks	12	67	
Turkmenistan	1994	Social security	Social insurance	Employer, employee & Government	Yes	112	days	16	100	45
United Arab Emirates	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	45	days	6.4	100, 50	46

Uzbekistan	1955	State social insurance scheme	Social insurance	Employer, employee & Government	No	126		calendar days	18	100	⁴⁷
Viet Nam	1961	Social insurance fund	Social insurance	Employer & employee	Yes, voluntary basis	6		months	26	100	
Yemen	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	60		days	8.5	100	
Albania	1947	Social insurance system	Social insurance	Europe Employer & employee	Yes	365		calendar days	52	80, 50	⁴⁸
Andorra	1966	Social insurance system	Social insurance	Employer & employee	Yes	16		weeks	16	100	
Austria	1955	Statutory health insurance, family burden equalization fund, or employer	Social insurance	Employer, employee & Government	Yes	16		weeks	16	100	
Belarus	1955	State social insurance	Social insurance	Employer & Government	No	126		calendar days	18	100	⁴⁹
Belgium	1894	Social security	Social insurance	Employer, employee & Government	Yes	15		weeks	15	82, 75	⁵⁰
Bosnia and Herzegovina	...	Social insurance; Government	Social insurance	Employer & Government	...	1		year	52	50-100	⁵¹
Bulgaria	1918	State public insurance (the General Sickness and Maternity Fund)	Social insurance	Employer, employee & Government	Yes, voluntary basis	227	⁵²	days	32	90	
Channel Islands, Guernsey	1971	Social insurance and social assistance	Social insurance and social assistance	Employer, employee & Government	Yes	18		weeks	18	...	⁵³
Channel Islands, Jersey	1951	Social insurance	Social insurance	Employer, employee	Yes	18		weeks	18	...	⁵³
Croatia	1954	Health insurance fund (until the child reaches the age of 6 months), and the rest is paid from the State budget	Mixed: social insurance and social assistance	Employer, Government	Yes	1+	⁵⁴	year	58	100	⁵⁵
Cyprus	1957	Social security	Social insurance	Employer, employee & Government	Yes	18		weeks	18	75	
Czech Republic	2006	Social security	Social insurance	Employer, employee & Government	Yes	28		weeks	28	70	
Denmark ⁵⁶	1892	Employer; Government	Employment related system	Employer & Government	Yes	18		weeks	18	100	
Estonia	1924	Social security	Social insurance	Employer (and self-employed)	Yes	140		calendar days	20	100	
Finland	1963	Social insurance system	Social insurance	Employer, employee	Yes	105		working days	18	70	⁵⁷

France	1928	Social security and health insurance funds	Social insurance	& Government Employer, employee & Government	Yes	16		weeks	16	100	58
Germany	1924	Statutory health insurance scheme; Employer	Social insurance	Employer, employee & Government	Yes, voluntary basis	14		weeks	14	100	58
Greece	1922	Social security; Government	Social insurance	Employer, employee & Government	Yes, certain urban self-employed	17		weeks	17	100	45.59
Hungary	1891	Health insurance	Social insurance	Employer, employee & Government	Yes	24		weeks	24	70	
Iceland	1975	Social Insurance Fund	Mixed: social insurance and social assistance	Employer & Government	Yes	3		months	13	80	
Ireland	1911	Social insurance	Social insurance	Employer, employee & Government	Yes	26 + 16	⁶⁰	weeks	42 [26]	80	61
Isle of Man	1951	Social security and social assistance system	Social insurance; social assistance	Employer, employee & Government (social assistance)	...	26		weeks	26	90	62
Italy	1912	Social insurance	Social insurance	Employer & Government	Yes	5		months	22	80	
Latvia	1924	State social insurance	Social insurance	Employee, employer	Yes	112		calendar days	16	80	
Liechtenstein	1910	Social insurance	Social insurance	Employer, employee & Government	Yes, voluntary basis	20		weeks	20	80	
Lithuania	1925	Social Insurance	Social insurance	Employer & Government	Yes	126		calendar days	18	100	
Luxembourg	1901	Social security	Social insurance	Employer, employee & Government	Yes	16		weeks	16	100	
Macedonia, The former Yugoslav Rep. of	...	Health insurance fund	Social insurance	...	...	9		months	39	100	
Malta	1981	Employer; social security	Employer, social insurance and social assistance	Employer, employee & Government	Yes	18	⁶³	weeks	18	100	63
Moldova, Republic of	1993	Social security	Social insurance	Employer, employee & government	Yes	126		calendar days	18	100	
Monaco	1944	Social insurance	Social insurance	Employer	Yes	16		weeks	16	90	58
Montenegro	...	Social insurance	Social insurance	Employer, employee & Government	...	52		weeks	52	100	
Netherlands	1931	Social security	Social insurance	Employer & employee	Yes	16		weeks	16	100	58

Norway	1909	Social insurance	Social insurance	Employer, employee & Government	Yes	35 (or 45) weeks	weeks	35, 45	80, 100	⁶⁴
Poland	1920	Social insurance fund	Social insurance	Employee and self-employed	Yes, voluntary basis	26	weeks	26	100	
Portugal	1935	Social insurance	Social insurance and social assistance	Employer, employee & Government	Yes	120-150	days	17, 21	100-80	⁶⁵
Romania	1930	State health insurance fund	Social insurance	Employer (and self-employed)	Yes	126	calendar days	18	85	
Russian Federation	1912	Social insurance fund	Social insurance	Employer	No	140	calendar days	20	100	^{45,58}
San Marino	1977	Social security	Social insurance	Employer (and self-employed)	Yes	5	months	22	100	
Serbia	1922	Social insurance	Social insurance	Employer & employee	Yes	140	⁶⁶ days	20	100	⁶⁷
Slovakia	1888	Social insurance (part of sickness insurance)	Social insurance	Employer, employee & Government	Yes	28	weeks	34	65	
Slovenia	1949	Social security	Social insurance	Employer, employee & Government	Yes	105	calendar days	15	100	⁶⁸
Spain	1929	Social security	Social insurance	Employer, employee & Government	Yes, with exceptions	16	weeks	16	100	
Sweden	1891	Social insurance	Social insurance	Employer (and self-employed)	Yes	14	⁶⁹ weeks	14	80	^{58,70}
Switzerland	1911	Social security and mandatory private insurance	Social insurance	Employer & employee	Yes	14	⁷¹ weeks	14	80	^{58,72}
Turkey	1945	Social security	Social insurance	Employer (and self-employed)	Yes	16	weeks	16	67	⁷³
Ukraine	1912	Social security	Social insurance and social assistance	Employer, employee & Government	Yes, if in insured employment	126	days	18	100	
United Kingdom	1911	Social security; Government (92% refunded by public funds) ⁷⁴	Mixed: social insurance and social assistance	Employer, employee and Government	Yes	52 [39]	⁷⁵ weeks	52 [39]	90	⁷⁶
Antigua and Barbuda	1972	Social insurance (60%); employer (40% for 6 weeks)	Social insurance; employer	Employer & employee	Yes	13	weeks	13	100, 60	⁷⁷
Argentina	1934	Family allowance funds (financed through state and employer contributions)	Social insurance and social assistance	Employer & Government	Yes, social assistance	90	days	13	100	⁷⁸
Bahamas	1972	National insurance board (two-thirds) and employer (one-third)	Social insurance	Employer & employee	Yes	12	weeks	12	100	

Barbados	1966	National insurance system	Social insurance	Employer, employee & Government	Yes	12		weeks	12	100	
Belize	1979	Social security or employer (for women who are not entitled to receive benefits from social security)	Social insurance	Employer & employee	Yes	14		weeks	14	100	
Bermuda	2000*	Employer (no statutory social security benefits)	Employer liability	Employer	No	12		weeks	12	100	79
Bolivia (Plurinational State of)	1949	Social insurance	Social insurance	Employer (and self-employed)	Yes, voluntary basis	90	80	weeks	13	95	81
Brazil	1923	Social insurance	Social insurance	Employer & employee	Yes	120	82	days	17	100	
British Virgin Islands	1979	Social security	Social insurance	Employer & employee	Yes	13		weeks	13	67	83
Chile	1924	Social security	Social insurance & mandatory private insurance	Employer, employee & Government	Yes	18		weeks	18	100	58
Colombia	1938	Social security	Social insurance	Employer, employee & Government	Yes	14		weeks	14	100	
Costa Rica	1941	Social security (50%); employer (50%)	Social insurance	Employer, employee & Government	Yes	4		months	17	100	84
Cuba	1934	Social security	Social insurance	Employer, employee & Government	Yes	18		weeks	18	100	
Dominica	1975	Social security	Social insurance	Employer, employee & Government	Yes	12		weeks	12	60	83
Dominican Republic	1947	Social security (50%); employer (50%)	Social insurance	Employer, employee & Government	Not yet implemented	12		weeks	12	100	85
Ecuador	1935	Social security (75%); employer (25%)	Social insurance	Employer & Government	Yes	12		weeks	12	100	
El Salvador	1949	Social insurance institute	Social insurance	Employer, employee & Government	Yes	12		weeks	12	75	
Grenada	1980	Social security (65% for 3 months); employer (35% for 2 months)	Social insurance	Employer, employee & Government	Yes	3		months	13	100, 65	86
Guatemala	1952	Social security (two-thirds), employer (one-third)	Social insurance	Employer, employee & Government	No	84		days	12	100	85
Guyana	1969	Social security	Social insurance	Employer & employee	Yes	13		weeks	13	70	83
Haiti	1999	Office of Workers' Compensation Insurance, Maternity and Sickness	Social insurance	...	...	12 [6]		weeks	12 [6]	100	87

Honduras	1959	Social security (two-thirds), employer (one-third)	Social insurance	Employer, employee & Government	Yes	84	⁸⁸	days	12	100	⁸⁵
Jamaica	1965	Employer or social security for domestic workers	Social insurance	Employer, employee & Government	No	12 [8]		weeks	12 [8]	100	⁸⁹
Mexico	1943	Social security	Social insurance	Employer, employee & Government	Yes, Mexico city	12		weeks	12	100	
Nicaragua	1956	Social security (60%); employer (40%)	Social insurance	Employer, employee & Government	Yes, voluntary basis	12		weeks	12	100	⁸⁵
Panama	1941	Social insurance fund; employer ⁹⁰	Social insurance	Employer, employee & Government	Yes, voluntary basis	14		weeks	14	100	⁸⁵
Paraguay	1943	Social security	Social insurance	Employer, employee & Government	Yes, voluntary basis	12 [9]		weeks	12 [9]	50	⁹¹
Peru	1936	Social security system	Social insurance & mandatory private insurance	Employer (and self-employed)	Yes	90		days	13	100	
Puerto Rico	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	8		weeks	8	100	
Saint Kitts and Nevis	1977	Social security	Social insurance	Employer & employee	Yes	13		weeks	13	65	
Saint Lucia	1978	Social security	Social insurance	Employer, employee & Government	Yes	3		months	13	65	
Saint Vincent and the Grenadines	1986	Social security	Social insurance	Employer, employee & Government	Yes	13		weeks	13	65	
Trinidad and Tobago	1939	Employer and national insurance board	Mixed: social insurance and social assistance	Employer & employee	No	13		weeks	13	100, 50	⁹²
Uruguay	1958	Social security system	Social insurance	Government	Yes	12		weeks	12	100	⁹³
Venezuela, Bolivarian Republic of	1940	Social security	Social insurance	Employer, employee & Government	No	26	⁹⁴	weeks	26	100	
North America											
Canada	1996, 2006	Federal and state; employment insurance	Social insurance	Employer & employee	Yes, for some on a voluntary basis	17	⁹⁵	weeks	17	55	^{58.96}
United States	...	No federal programme	Unpaid	...	No	12 [0]		weeks	12 [0]	...	⁹⁷
Oceania											
Australia	2010	Social assistance system financed by the State	Universal	Government	Yes	18 (+34)	⁹⁸	weeks	18	...	⁹⁸
Fiji	...	Employer (no statutory social	Employer liability	Employer	No	84		days	12	100	⁹⁹

security benefits)										
Kiribati ¹⁰⁰	...	Employer (no statutory social security benefits)	Employer liability	Employer	No	12	weeks	12	25	
Marshall Islands	...	No statutory provision	No benefit	...	No			0	...	
New Zealand	1938	State funds (universal and social assistance system)	Universal and social assistance	Government	Yes, if single women	14	weeks	14	100	⁵⁸
Papua New Guinea ¹⁰¹	1981*	No social security benefit	Unpaid	No statutory provision or employer liability	No	6+ [0]	weeks	6+ [0]	...	¹⁰²
Solomon Islands ¹⁰³	n.a.	Employer (no statutory social security benefits)	Employer liability	Employer	No	12	weeks	12	25	
Vanuatu ¹⁰⁴	1983*	Employer (no statutory social security benefits)	Employer liability	Employer	No	12	weeks	12	66	

Sources

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Notes

n.a. Not applicable.

... Not available.

* Labour Act (or labour code) which places the obligation within the employer's liability.

¹ Botswana. No statutory benefits are provided. The amended 2010 Employment Order requires employers in designated areas to pay maternity benefits to female employees. The maternity benefit is at least 50% of the basic pay and other benefits she would otherwise be entitled to receive, and is paid for six weeks before and six weeks after the expected date of childbirth; may be extended by two weeks if there are complications arising from pregnancy or childbirth.

² Burkina Faso. The benefit provided by the Social Security Fund is equivalent to the percentage of the woman's previous earnings on which social security contributions have been paid. The employer is mandated to cover the difference between this amount and the woman's earnings gained just before maternity leave.

³ Burundi. The labour code (1993) requires employers to pay 50% of wages for maternity leave of up to 12 weeks (14 weeks in the event of complications arising from pregnancy or childbirth), including at least 6 weeks after childbirth, if the woman has at least 6 months of service during the year before the expected date of birth.

The 1984 provision established a medical assistance programme to provide medical, surgical, maternity, hospitalization, dental and pharmaceutical services to the low-income population.

⁴ Cabo Verde. The employer pays the difference between 90% of the worker's "normal" salary and cash benefits paid by social security. If none is paid, then the employer must pay the full amount of the benefits during the maternity leave period.

⁵ Congo, Democratic Republic. No statutory social security benefits are provided. The labour code requires employers to provide 14 weeks of paid maternity leave, and to provide medical care for workers and their dependants.

⁶ Eritrea. Paid, amount not specified or unidentified.

⁷ Ethiopia. No statutory social security benefits are provided. The public service amendment proclamation (2002) and the labour proclamation (2003) require employers to provide paid maternity leave for up to 45 days after childbirth; thereafter, sick leave may be paid if there are complications arising from childbirth.

- 8 Guinea Bissau. The employer is mandated to pay the difference between social security benefits and previous earnings.
- 9 Kenya. No statutory social security benefits are provided. The 1976 Employment Act requires employers to pay 100% of earnings for up to two months of maternity leave. Employers also provide some obstetric benefits. Accredited government and certain private and faith-based hospitals provide comprehensive maternity care to members of the National Health Insurance Fund and their dependants.
- 10 Lesotho. According to art. 134 of the labour code (Order No. 24 of 1992, as amended in 2006), there is no legal obligation for employers to pay wages during maternity leave. However, the Labour Code Wages (Amendment) Order 2011 (LN No. 147 of 2011) sets out that workers in the textile, clothing, leather clothing and leather manufacturing industries are entitled to two weeks' paid maternity leave, and workers in the private security sector to six weeks' paid maternity leave and six weeks' unpaid maternity leave. Any other employee in neither of these named sectors shall be entitled to receive six weeks' paid maternity leave before confinement and six weeks' paid maternity leave after confinement.
- 11 Libya. Maternity leave cash benefits are 50% of wages for employees, and 100% of presumptive income for self-employed women, paid by social insurance for 13 weeks (three months).
- 12 Malawi. Every three years.
- 13 Mauritius. No statutory social security benefits are provided. The 2008 Employment Rights Act requires employers to provide 12 weeks of paid maternity leave (at least six weeks after the expected date of childbirth) or five days of paid paternity leave to employees who have been in their continuous employment for at least 12 months. Government clinics and hospitals provide free medical services. Some mother and child health services and financial assistance to needy persons are provided.
- 14 Niger. A woman who has worked for at least two years at the same company shall receive from the employer the totality of her salary, minus any amount already provided by social security or any other fund replacing this service.
- 15 Nigeria. No statutory social security cash benefits for maternity are provided. The labour code requires employers to give employees up to 12 days of paid sick leave a year and paid maternity leave at 50% of wages for six weeks before and six weeks after the expected date of childbirth.
- 16 Rwanda. No statutory social security benefits are provided yet. The employer remains liable for the payment of maternity benefits until the maternity insurance fund is implemented. The labour code requires employers to pay 66.7% of wages for maternity benefits for up to 12 weeks.
- 17 Rwanda. Level of benefit: 100 per cent of salary during the first six weeks of maternity leave; during the last six weeks of maternity leave, 20 per cent of salary.
- 18 Seychelles. A flat monthly rate is paid for 12 weeks.
- 19 South Africa. Up to a maximum amount of 60% depending on level of income of the contributor. Benefits are paid for a maximum of 17.32 weeks.
- 20 Swaziland. No statutory social security benefits are provided. 100% of previous earnings for two weeks.
- 21 Tunisia. Duration: Civil servants are entitled to two months of maternity leave.
- 22 Tunisia. Level of benefit: for women covered by the labour code the amount is two-thirds (66.7%) of the average daily wage. For women working in agriculture, it amounts to 50% of the flat-rate daily wage calculated on the basis of the guaranteed minimum wage in agriculture. For civil servants, the full salary is paid during maternity leave.
- 23 Zimbabwe. No statutory cash benefits are provided. The Labor Relations Act requires employers to provide a maternity benefit. The maternity benefit is 100% of wages and is paid for at least 21 days before and 77 days after the expected date of childbirth. A health care programme provides free primary health care for low-paid workers. Government and mission hospitals serve rural areas; government and private hospitals and doctors serve urban areas.
- 24 Bahrain. 45 days paid at 100% per cent. 15 remaining days are unpaid.
- 25 Bangladesh. The Government of Bangladesh launched the maternity allowance programme to ensure safe motherhood in 2008 under the Ministry of Women's and Children's Affairs, targeting vulnerable and rural poor pregnant mothers. Each selected beneficiary receives 300 taka (BDT) per month for a period of two years, increased to BDT350 per month in 2010 for the same period.
- 26 Bahrain. The duration of paid maternity leave benefits is eight weeks.
- 27 China. Duration of maternity leave: On 28 April 2012, China's State Council published the Special Provisions on Labour Protection of Female Employees. The aim is to improve Chinese labour practices to enhance the protection of female employees' well-being in the workplace. According to the Special Provisions, female employees are now entitled to 98 days of maternity leave for childbirth, an increase of eight days from the previous duration. Level of benefit: The social insurance programme applies to urban areas and the maternity insurance programme covers all employees in urban enterprises, including all state-owned enterprises, regardless of their location. Since July 2011, the country's first national law on social insurance has been gradually unifying existing regional and local social security schemes, which include pooling arrangements.

- 28 Israel: Employment law allows 12 weeks of maternity leave, but maternity allowance can be paid up to 14 weeks. To be entitled to a full maternity allowance (14 weeks), the woman worker must have contributed for ten out of the previous 14 months or for 15 out of the previous 22 months before the day the woman discontinued work during pregnancy. In the event the woman worker contributed six out of the previous 14 months she will be entitled to a partial maternity allowance (seven weeks). Benefit amount: Up to ceiling. A female worker who has given birth to three or more children in one birth is entitled to a childbirth allowance in addition to the the maternity allowance from the birth and up to 20 months after this date.
- 29 Japan. Social insurance and public funds for one-eighth of the total cost.
- 30 Japan. Upon return to work after child-care leave, the mother will receive a further 10% of her pre-leave wage, for the duration of the leave taken, as a re-engagement benefit for workers returning from child-care leave. The legal amount has changed in recent years and the currently available allowance (2011) is paid at approximately 66.67% of the average daily basic wage, according to wage class, for a period of 42 days before birth and 56 days after the expected date of childbirth.
- 31 Korea, Republic. For employees of enterprises meeting the criteria of the Employment Insurance Act, the Employment Insurance Fund pays the whole maternity leave period. If the enterprise does not meet these criteria, then the employer pays the first 60 days of maternity leave.
- 32 Kyrgyzstan. Seven times the minimum wage level.
- 33 Lao People's Democratic Republic. Under the Social Security Decree, a woman is entitled to childbirth benefits equal to 70% of insured earnings for a maximum period of three months.
- 34 Lebanon. Cash benefits will be statutorily provided by the Social Security Act (art. 26), for a duration of ten weeks paid at two-thirds of previous earnings. However, this social security system has not been implemented yet. The entitlements set out in the labour code are still valid.
- 35 Malaysia. Under the Employment Act of 2012, which amended the Employment Act of 1995, employers are required to provide 60 days of paid maternity leave to all female employees.
- 36 Nepal. No statutory social security cash benefits are provided. The 1992 Labour Act requires employers to pay 100% of wages for maternity leave of up to 52 days before or after each childbirth for up to two births. The 1992 Civil Servant Act provides maternity leave to employed women for up to 60 days before or after childbirth, for up to two births. Additional maternity leave without pay is possible for up to six months.
- 37 Oman. According to Article 83 of the Omani Labour Law (2012) a female employee shall have the right to a special 50-day maternity leave covering the periods before and after delivery with full salary for not more than three times during her service with the employer.
- 38 Philippines. 60 days for government employees.
- 39 Saudi Arabia. 50% if the employee has one to three years in service before the beginning of maternity leave; 100% with three years or more.
- 40 Singapore. The first eight weeks paid by employer, the second eight weeks funded by the Government up to a ceiling. For the third and subsequent births, the full 16 weeks will be funded by the Government up to a ceiling.
- 41 Sri Lanka. No statutory social security maternity benefits are provided. Plantations have their own dispensaries and maternity wards and must provide medical care for their employees. The Maternity Benefits Ordinance Act and the Shops and Offices Employees Act require employers to provide maternity leave. The duration of maternity leave is six weeks for the third and each subsequent child. The amount of maternity leave benefits is six-sevenths of previous earnings for employees covered by the Maternity Benefits Ordinance Act; 100% for those covered by the Shops and Offices Employees Act.
- 42 Sri Lanka. Level of benefit: Six-sevenths (86%) of wages for workers paid at a time-rate or piece-rate. Employees covered by the Shops and Offices Employees Act receive 100% of remuneration.
- 43 Syrian Arab Republic. 120 days for the first childbirth, 90 days for the second childbirth and 75 days for the third childbirth.
- 44 Thailand. 100% for first 45 days (employer); 50% for the last 45 days (social insurance). Under the Labour Protection Act, an employer is required to pay an employee for up to 45 days of maternity leave. A new voluntary social security system for informal sector workers was initiated in 2011. The scheme is based on contributions from workers and Government to finance old-age, disability, survivors, sickness, and maternity benefits.
- 45 Turkmenistan. In addition, a birth grant is paid in lump sum.
- 46 United Arab Emirates. 100% after one continuous year of employment, 50% per cent for employment less than one year.
- 47 Uzbekistan. A lump sum paid for each child.
- 48 Albania. 80% for the period prior to birth and for 150 days after birth, and 50% for the rest of the leave period.
- 49 Belarus. Not less than 50% per cent of the minimum per capita subsistence wage (1 February to 30 April 2009: 117,190 rubles).

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- 50 Belgium. 82% for the first 30 days and 75% for the remaining period (up to a ceiling). For unemployed women, 60% of the gross salary prior to being unemployed, up to a ceiling, and a complementary indemnity of 19.5% for the first 30 days and of 15% for the remaining period.
- 51 Bosnia and Herzegovina. The replacement rate varies depending upon the various cantonal regulations: 50–80% (Federation of Bosnia and Herzegovina); 100% (Republic of Srpska). The employer is reimbursed for initial payment.
- 52 Bulgaria. The duration of maternity leave is calculated by adding the 45 days of compulsory leave to the 182 days (6 months) of postnatal leave.
- 53 Channel Islands, Guernsey and Jersey. Flat rate for the normal duration of maternity leave. In addition, a lump sum maternity grant is paid.
- 54 Croatia. 45 days before delivery and 1 year after.
- 55 Croatia. Level of benefit: 100% until the child reaches the age of six months, then at a flat rate determined by the Act on the Execution of the State Budget for the remaining period.
- 56 Denmark: about 75% of the workforce is covered by collective agreements, mandating employers to top up the state benefits, which represents on average around 50 per cent of previous earnings (daily cash benefits in relation to previous earnings up to a ceiling). In this framework, workers receive compensation during leave from their employer up to their full previous earnings.
- 57 Finland. 70% up to a ceiling, plus 40% of the additional amount up to a ceiling, plus 25% of additional amount.
- 58 Up to a ceiling.
- 59 Greece: The minimum benefit is 66.7% of the insured's earnings. The insured may also receive a maternity supplement of up to 33.3% of earnings.
- 60 Ireland. Duration: plus 16 weeks unpaid maternity leave after confinement.
- 61 Ireland. Level of benefit: subject to a minimum and maximum amount.
- 62 Isle of Man. Maternity allowance is paid for a period of up to 39 weeks at 90% of earnings, up to a ceiling.
- 63 Malta. Duration of benefit: Paid maternity leave increased to 16 weeks (from 14) in 2012 and to 18 weeks in 2013.
Level of benefit: 100% for 14 weeks. The Employment and Industrial Relations Act (Cap 452 of the Laws of Malta) requires employers to provide 100% of previous earnings for 14 weeks of maternity leave. Since January 2013, the Protection of Maternity (Employment) Regulations, No. 452.91, 2004, as amended in 2012, entitles women employees to four additional unpaid weeks of maternity leave. Upon the expiry of the 18th week of leave, the employee can claim a four-week flat-rate "maternity leave benefit" (c.€160 per week), which is provided by social insurance in one lump-sum. If for any reason a woman does not avail herself of part of the maternity leave paid by the employer, she will be entitled to a "Maternity Benefit" for the weeks maternity leave was not availed of (c.€90 per week for a maximum of 14 weeks paid by the Government).
- 64 Norway. System of paid parental leave (with no distinction between maternity and paternity leave) of 57 weeks or 47 weeks altogether (paid respectively at 80% or 100% of previous earnings). For the purpose of determining the length of maternity leave, the 12 weeks of paid leave exclusively reserved for the father have been left out of consideration. The mother may use the remainder of 45 or 35 weeks, of which 9 weeks are exclusively reserved for her, three before birth and six after. The beneficiary may decide whether to receive 100% of benefits for a shorter period (35 weeks) or 80% of benefits for a longer period (45 weeks).
- 65 Portugal. 100% of the average daily wages (if the parents opted for a leave period of 120 days) or 80% (if the parents opted for a 150-day leave period).
- 66 Serbia. Duration: an employed woman is entitled to leave for pregnancy and childbirth, as well as leave for child care, for a total duration of 365 days. She may start her maternity leave pursuant the advice of a competent medical authority 45 days before the delivery term at the earliest and 28 days at the latest. Maternity leave shall last until three months after childbirth.
- 67 Serbia. Level of benefit: 100% of earnings are paid for the first six months; 60% from the sixth to the ninth month; and 30% for the last three months.
- 68 Slovenia. Parental allowance is cash aid to parents which is provided when they are not entitled to parental benefits after the birth of a child. The right to parental allowance shall be granted for 365 days, including payment to the mother for 77 days after the birth of the child provided the mother and the child have permanent residence in the Republic of Slovenia and are citizens of the Republic of Slovenia.
- 69 Sweden. Duration: 480 days shared between both parents. 60 of these days are reserved for each parent while the rest are freely transferable between both parents. In cases of sole custody, all 480 days accrue to the custodial parent.
- 70 Sweden. Level of benefit: 480 calendar days paid parental leave: 80% for 390 days; flat rate for remaining 90 days.
- 71 Switzerland. Some cantons provide longer leaves. In the Canton of Geneva paid leave is 16 weeks. Employees of the Swiss Confederation are entitled to 98 days (or 14 weeks) if the woman has completed a year of service.

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- 72 Switzerland. Level of benefit: Employees of the Confederation are entitled to 4 month paid maternity at 100%.
- 73 Turkey. 12 weeks' coverage.
- 74 United Kingdom. The employer administers the payment. Employers in medium and large companies can be reimbursed for 92% per cent of the costs by the State (general revenues). Small employers can claim back 103% through reductions of national insurance contributions paid by employers to the Government's tax authorities.
- 75 United Kingdom. Duration: Consisting of 26 weeks of ordinary maternity leave and 26 weeks of additional maternity leave.
- 76 United Kingdom. Level of benefit: Statutory maternity leave is paid for a continuous period of up to 39 weeks. 90% for the first six weeks and a flat rate for the remaining weeks.
- 77 Antigua and Barbuda. Social Insurance (60% for 13 weeks) and employer (40 per cent for the first six weeks).
- 78 Argentina. In addition, a means-tested birth grant is paid in lump sum.
- 79 Bermuda. No statutory social security benefits are provided. Under the 2000 Employment Act, employers are required to provide paid and unpaid maternity leave.
- 80 Bolivia (Plurinational State of). Duration: Domestic workers are entitled to 90 days.
- 81 Bolivia (Plurinational State of). Level of benefit: 100% of minimum wage plus 70% of the difference between minimum wage and regular earnings.
- 82 Brazil. Duration: optional leave paid by the employer can be provided for 60 additional days.
- 83 British Virgin Islands; Dominica; Guyana. In addition, a maternity grant is paid in lump sum.
- 84 Costa Rica. The amount of maternity benefits is paid as follows; 50% of the salary from three to six months of contributions to the Social Security Fund, 75% from six to nine months, and 100% for nine months or more.
- 85 Dominican Republic, Guatemala, Honduras, Nicaragua, Panama. If the worker is not entitled to social security benefits, the employer shall cover the full cost of benefit.
- 86 Grenada. 100% for 2 months and 65% for the last month.
- 87 Haiti. 100% for six weeks.
- 88 Honduras. Duration: The Labour Code (31 March 2003) provides ten weeks' maternity leave, while according to the General Regulation of Social Security Act (15 February 2005) maternity benefits are paid for 84 days by social insurance up to 66% of previous earnings. Beneficiaries of the maternity benefits should abstain from work (Art.69).
- 89 Jamaica. 100% paid for eight weeks. Domestic workers are paid the national minimum weekly wage for eight weeks.
- 90 Panama. Employer makes up the difference between social security or mandatory individual account payments and wages.
- 91 Paraguay. 50% is paid for 9 weeks coverage.
- 92 Trinidad and Tobago. The Maternity Protection Act entitles an employee to 100% pay for one month and 50% for two months by employer; social insurance system pays a sum depending on earnings. When the sum of the amount paid under the Maternity Protection Act and social insurance is less than full pay, the employer shall pay the difference to the employee.
- 93 Uruguay. For private sector employees. Special system for civil servants.
- 94 The Bolivarian Republic of Venezuela's new Labour Law for Workers came into effect on 7 May 2013. Under the law, the country now has the world's third-longest maternity leave scheme. Mothers are entitled to six weeks pre-natal leave, and 20 post-natal. Fathers are also entitled to two weeks' paternal leave.
- 95 Canada. Duration of maternity leave depends on the province. For Federal and Ontario, maternity leave is 17 weeks, while in Quebec, it is 18.
- 96 Canada. Level of benefit: federal and state. A claimant whose family income is below \$25,921 and who is receiving the Child Tax Benefit is entitled to a family supplement, thereby increasing the benefit rate. An employee may continue working while receiving parental benefits; there is no financial penalty as long as weekly employment earnings are no more than \$50 or 25% of the weekly benefits, whichever is higher.
- 97 United States. There is no national programme. Cash benefits may be provided at the state level. Provisions for paid maternity leave benefits exist in five states (New York, New Jersey, California, Hawaii and Rhode Island). For instance, California provides 6 weeks paid at 55% of previous earnings.

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- 98 Australia. Duration: a single parental leave system provides 52 weeks, which may be shared between the parents. The mother may take six weeks of pre-natal leave. Level of benefit: 18 weeks paid at the federal minimum wage level.
- 99 Fiji. From the fourth birth, the woman will be entitled to only half the normal remuneration.
- 100 Kiribati. No statutory benefits are provided for maternity. Government employees are entitled to maternity leave at full pay for six weeks before and six weeks after childbirth for up to two children.
- 101 Papua New Guinea. The 1981 Employment Act requires employers to provide sick leave and maternity leave to employees. A female employee is entitled to take maternity leave for a period necessary for hospitalization before confinement and six weeks after confinement.
- 102 Maternity leave is unpaid. However, annual leave or sick leave credits, paid by the employer, may be used for maternity leave.
- 103 Solomon Islands. No statutory sickness and maternity benefits are provided. The Labor Act requires employers to provide up to 12 weeks of maternity leave to female employees (including up to at least six weeks after childbirth).
- 104 Vanuatu. No statutory social security benefits are provided for maternity. The 1983 Employment Act requires employers to provide 66% of wages for mandatory maternity leave for six weeks before and six weeks after childbirth if the employee has been in continuous employment with the employer for at least six months. Employers are required to allow a mother to interrupt work twice a day for an hour to feed a nursing child until the child reaches age 2.

Notes

... Not available.

n.a. Not applicable.

a Differences in global estimates from table B.12 result from differences in reference years and in number of countries considered.

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