Uruguay

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For comparisons with other countries in this review on leave provision and early childhood education and care services please see the cross-country tables at the front of the review (also available individually on the Leave Network website). To contact authors of country notes, see the members page on the Leave Network website.

1. Current leave and other employment-related policies to support parents

a. Maternity leave (public sector) Law 19.121 (Licencias por maternidad y por paternidad)

Length of leave (before and after birth)

- 13 weeks: up to six weeks can be taken before the birth, one week of which must be taken at this time. Civil servants of the Central Administration are entitled to 14 weeks.

Payment and funding

- 100 per cent of earnings with no upper limit on payments.
- Funded from general taxation.

Flexibility in use

- None, except for five weeks of leave that can be taken before or after birth.

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Eligibility

- All female public sector employees.

Variation in leave due to child or family reasons (e.g. multiple or premature births; poor health or disability of child or mother; lone parent) or delegation of leave to person other than the mother

- In the case of multiple or premature births or disability, the leave is extended to 18 weeks.
- In the case of premature births with less than 32 weeks of gestation and requiring hospitalisation, both parents (biological or adoptive) are entitled to leave for the duration of such hospitalisation, up to a maximum of 60 days. Upon the termination of this license, the usufruct of Maternity or Paternity leave will begin.

a. Maternity leave (private sector) Law 19.161 (Subsidio por maternidad) (Instituto de Seguridad Social)

Length of leave (before and after birth)

- 14 weeks: up to six weeks can be taken before the birth. It is obligatory to take the full period of 14 weeks.

Payment and funding

- 100 per cent of earnings with no upper limit on payments. For employees, this is based on average earnings in the six months before taking leave. For self-employed workers, this is based on average earnings over the 12 months before taking leave.
- Funded by the social security system, which is financed by contributions: for sickness and maternity benefits, three to six per cent of employee earnings and five per cent of payroll from employer, plus earmarked proceeds of certain taxes.

Flexibility in use

- Women may postpone the start of Maternity leave (if authorised by her doctor).
- Premature delivery: if the birth occurs earlier than 42 days before the due date of delivery, the beginning of the subsidy is modified to the actual day of the baby’s birth. The start of postpartum leave is not modified, that is, the original postpartum leave period is maintained, granting more days of leave.
- Delivery delay: if the birth occurs after the due date of delivery, the postpartum rest period is extended, taking into account the
number of days of the delay.

**Eligibility**

- All female employees who contribute to the Social Security Institute (BPS).
- Self-employed workers who are covered by the Social Security Institute (BPS), with no more than one employee.
- Other self-employed workers who are covered by the Social Security Institute (BPS).

**Variation in leave due to child or family reasons (e.g. multiple or premature births; poor health or disability of child or mother; lone parent) or delegation of leave to person other than the mother**

- In the case of illness resulting from pregnancy or childbirth, the mother is entitled to an extension of pre- or post-natal leave.

**b. Paternity leave (public sector) Law 19.121 (Licencia por paternidad)**

**Length of leave (before and after birth)**

- 10 working days.

**Payment and funding**

- 100 per cent of earnings with no ceiling on payments.
- As for Maternity leave.

**Flexibility in use**

- None.

**Eligibility**

- All male public sector employees.

**Variation in leave due to child or family reasons (e.g. multiple or premature births; poor health or disability of child or mother; lone parent) or delegation of leave to person other than the mother**

- In the case of premature births with less than 32 weeks of gestation and requiring hospitalisation, both parents (biological or adoptive) will be entitled to leave for the duration of such hospitalisation, up to a maximum of 60 days. Upon the termination of this period, Maternity or Paternity leave begins.
b. Paternity leave (private sector) Law 19.161 (Inactividad Compensada por Paternidad) (Instituto de Seguridad Social)

Length of leave (before and after birth)

- 13 calendar days for employees; ten calendar days for self-employed workers.

Payment and funding

- 100 per cent of earnings with no ceiling on payments. For employees, this is based on average earnings in the six months before taking leave. For self-employed workers, this is based on average earnings over the 12 months before taking leave.
- For employees, the first three days are paid by the employer (Law 18.345), and the next ten are paid by the social security system (Law 19.161).
- As for Maternity leave, funded by the social security system, which is financed by contributions: for sickness and maternity benefits, three to six per cent of employee earnings and five per cent of payroll from the employer, plus earmarked proceeds of certain taxes.

Flexibility in use

- None. To be taken from the day of birth.

Eligibility

- All male employees who contribute to the Social Security Institute (BPS).
- Self-employed workers who are covered by the Social Security Institute (BPS), with no more than one employee.
- Other self-employed workers who are covered by the Social Security Institute (BPS).

Variation in leave due to child or family reasons (e.g. multiple or premature births; poor health or disability of child or mother; lone parent) or delegation of leave to person other than the mother

- None.
c. Parental leave (public sector)

No statutory entitlement.

c. Parental leave (private sector)

Length of leave

- Until six months after childbirth. Leave is a family entitlement.
- Leave must be taken part time; the parent taking leave cannot work more than four hours a day.

Payment and funding

- As for Maternity and Paternity leave (private sector) (see 1a and 1b).

Flexibility in use

- Parents can alternate taking leave in days, weeks, or months at any time during the period between the end of Maternity leave and the first six months of the baby's life.
- Leave cannot be taken at the same time by both parents.

Eligibility

- As for Maternity and Paternity leave (private sector) (see 1a and 1b), except it is a requirement for fathers that the mother of the baby has been eligible for private sector Maternity leave.
- The law does not define whether same-sex couples are eligible. However, the Social Security Institute (BPS) report that they approve part-time leave applications from women whose partners took BPS-provided Maternity leave.

Variation in leave due to child or family reasons (e.g. multiple or premature births; poor health or disability of child or mother; lone parent) or delegation of leave to person other than the mother

- None.

d. Childcare leave or career breaks

- No statutory entitlement.
e. Other family employment-related measures

Adoption leave and pay

- In the case of adoption (Laws 17,292 and 18,436), workers in both the public and private sector are entitled to a continuous six-week leave and a reduction of the working day (up to 50 per cent) for six months. These subsidies may be used by one of the two parents from the time the child is integrated into the family, while the other parent is then granted ten working days of leave.

Time off for the care of dependents

- No statutory entitlement.

Flexible working

- Mothers in the public sector may work part-time, but only if they are breastfeeding. This lasts according to the baby's needs, but usually continues until the baby is 12 months old. The worker must present a medical certificate that proves that she is breastfeeding, in order to continue using the reduction of working hours. Since 1 June 2017, civil servants of the Central Administration have been able to make use of a reduction in working hours, meeting a minimum of four hours per day, when the baby is between six and 12 months old. It must be used by one of the parents. This measure was established in the labour agreement signed in December 2016 by the Confederation of Organisations of State Officials (COFE), the Ministry of Economy and Finance, and the Ministry of Labor and Social Security. Before this agreement, only mothers were eligible.

Specific provision for (breast) feeding

- If the worker (public or private) breastfeeds her child, she is authorised to interrupt her daily work for that purpose, and has a choice between two periods of half an hour each or a period of one hour. This time is computed as effective work. Her doctor is responsible for setting the duration of the breastfeeding period (Decree N°234/018). The certificates issued will be renewed in each control of the child; will be valid for no longer than three months; and may be extended for up to two years. The workers are required to present the certificate to their employer with whom they need to agree on how and when they will use the one-hour reduction during the working day.
2. Relationship between leave policy and early childhood education and care policy

The maximum period of full-time post-natal leave is just under three months, paid at a high rate; part-time unpaid leave can be taken in the private sector until six months after childbirth. There is an entitlement to Early Childhood Education and Care (ECEC) once children are four years of age and attendance also becomes obligatory at that age. There is a gap, therefore, of more than three and a half years between the end of well-paid leave and an entitlement to ECEC.

Uruguay is not included in the comparative table on ECEC enrolment produced for the OECD Family Database. National statistics report that 56.2 per cent of children from birth to four years attended ECEC, but attendance is very different according to age: 13.3 per cent for children under the age of one year, 38.7 per cent for one-year-olds, 57 per cent for two-year-olds, 77.7 per cent for three-year-olds, and 93 per cent for four-year-olds. Moreover, if children who attend 20 hours a week or more, which is equivalent to at least a part-time workday, are considered these figures drop to 2.5 per cent for children under the age of one year, 13.8 per cent for one-year-olds, 42 per cent for two-year-olds, 70.4 per cent for three-year-olds and 86.9 per cent for four-year-olds.

Until the age of two years, most children attend a private ECEC (financed by families) with very low participation by public provision. This is especially the case for children under the age of one year. For children aged three years and older, this trend is reversed, with the public provision becoming more important.

3. Changes in policy since April 2020 (including proposals currently under discussion)

No changes reported.

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2 Own elaboration based on micro data from the Nutrition, Child Development and Health Survey, INE, MIDES, 2018. See: http://www.ine.gub.uy/web/guest/encuesta-de-nutricion-desarrollo-infantil-y-salud-endis-2018-

3 Own elaboration based on micro data from the Nutrition, Child Development and Health Survey, INE, MIDES, 2018. See: http://www.ine.gub.uy/web/guest/encuesta-de-nutricion-desarrollo-infantil-y-salud-endis-2018-
Policy responses to the Covid-19 pandemic to end April 2021

Childcare and schools

- For ECEC and school closures during the first half of 2020, please see the 2020 Uruguay country note.
- Since 29 June 2020, presence in classes was resumed by increasing the hours in those schools with double hours and with the locative capacity to comply with the health measures of social distancing between students. This implied differences in access to education. Public school students with fewer resources and space divided the groups to comply with the distancing protocols, with the different groups attending a few days a week. In the private school sector, the locative conditions allowed attendance every day.
- On 1 March 2021, the return to classes took place and, although the measures of physical distancing were made more flexible, public and private schools’ resources implied differences in guaranteeing the daily presence of the children.
- On 16 March 2021, due to the increase in Covid cases, the government decided to suspend the obligatory nature of attending classes and face-to-face classes were suspended in the cities most affected by infections. On 22 March, the suspension of face-to-face classes at all levels of education and in all the country was resolved until the culmination of Holy Week and it was announced that the return to face-to-face classes will be gradual, starting with the little ones. On 29 March it was announced that the total suspension of face-to-face classes will continue until (at least) 30 April 2021.

Parental leave

- There were no modifications to Parental leave.

Other measures for parents and other carers

- The return to on-site work in the public sector occurred from May 2020. The protocol of return to employment in the public sector established that workers with children under the age of 3 years can continue teleworking and are not obliged to be physically present. In some cases, it was extended to children up to 12 years old. The Presidency urged the private sector to take similar measures, but no regulation required it.
- Cash transfers to the most vulnerable sectors doubled and emergency food baskets were delivered to informal workers who had no support from social security.
• No support measures were specifically implemented for parents.
• On 23 March 2021, the closure of public offices was installed until (at least) 30 April, promoting teleworking, except for essential services, and a sickness allowance was installed for those over 65 in the private sector. No measures were implemented regarding the care of children who are not attending classes so that their working fathers and mothers can take care of them at home, especially in the private sector where teleworking was ‘encouraged’ but not declared mandatory.

4. Uptake of leave

a. Maternity leave

Data on Maternity leave show a steady increase in the period 2011-2016, from 14,264 users in 2011 to 16,108 users in 2016. However, no significant impact can be observed since the new law, Nr.19161. From 2013, there has been a stability in the number of users (around 16,000): this means that when it comes to the first years of implementation, the new legislation has not involved a significantly important increase, in comparison to previous years. The new law, with the inclusion of new groups, did not imply substantive variations in the use of Maternity leave – probably because the non-dependent mothers who can use this license represent a very small proportion. In any case, it is interesting to investigate the state’s capacities to disseminate and guarantee the rights of these groups.4

The evolution of the users of Maternity leave presents a continuous decline from 2016 until 2020. While in 2016 there were 16,911 users, this number fell to 12,554 in 20205. It is important to consider that also births in Uruguay have decreased over this time period. In 2016 there were 47,058 births, while in 2020 there were 35,866, 1,606 less than in 2019. The reduction of births in 2019 occurred in all age groups, but the greatest contribution to the decrease was made by the group of women under 24 years old. There has been a decrease in the adolescent fertility rate (number of births of women between 15 and 19 years old) in recent years.

A recent policy document published in November 20206 states that a comprehensive explanation of the recent decline requires not only to

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4 Batthyány, K., Genta, N. and Perrotta, V. (2018) Uso de licencias parentales y roles de género en el cuidado. Departamento de Sociología, FCS-UDELAR, MTSS, SNIC, OIT, ONUMUJERES.
5 Own elaboration based on BPS, Social Security Indicators, 2021.
6 Comisión de Expertos en Seguridad Social. NOTA TÉCNICA Nº1 Proyección de la Población de Uruguay a 2100. 27 November 2020.
consider the factors that converged on the exit from fertility stagnation adolescent, but that it is also necessary to understand reasons and the mechanisms that inclined the rest of women to limit their offspring. The fact that births of three and more children have decreased, whose mothers usually belong to groups of advanced age, suggests that interest in controlling more fertility is not exclusive to women teenagers and very young.

b. Paternity leave

A substantive increase occurred in the case of Paternity leave until 2016, as take-up rose from 8,799 in 2014 to 15,862 in 2016 (an increase of 80 per cent). Undoubtedly, this increase represents a significant advance for male parents’ right to care, at least during the first days of the baby's life.7

However, a decrease has been observed from 2017. While in 2017 there were 15,372 users, they were 11,280 in 2020. Again, this needs to be considered together with the decreased number of births.

c. Parental leave

Part-time leave (Parental Care Allowance) is voluntary. In 2016, 59.1 per cent of the users of Maternity leave in the private sector used part-time leave (Parental Care Allowance). This means that a significant group of women did not take it, despite having the right to do so.

Regarding the evolution in the use of Parental leave, it increased from 6,258 users in 2014 to 9,525 in 2016, signifying an increase of 52 per cent.8 However, a decrease in users is observed in 2017 and 2018, a slight increase in 2019 and again a decline in 2020.9

Among the users of part-time leave (Parental Care Allowance), men represent two per cent, a proportion that has remained stable in recent years. The reasons why the use of part-time leave is fundamentally by women are of a design nature. Couples must choose if it is the father or mother who takes part-time leave. Societal gendered norms associate mothers with being the best caregivers, especially in the first six months of babies' lives.

As observed in international precedents, when either parent is eligible for the benefit, it is normally used by women. In Uruguay, use reflects

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7 Batthyány, K., Genta, N. and Perrotta, V. (2018) Uso de licencias parentales y roles de género en el cuidado. Departamento de Sociología, FCS-UDELAR, MTSS, SNIC, OIT, ONUMUJERES.
8 Ibid.
9 Own elaboration based on BPS, Social Security Indicators, 2021.
a rigid gender contract in social representations around childcare. The impact of social representations around childcare is reinforced by the state’s strong promotion of exclusive breastfeeding in the first six months. National regulations adopted in 2009 (Ministry of Public Health Ordinance 217/09) establish the importance of exclusive nursing in the first six months, and supplementary breastfeeding up to the age of two, while defining the obligations of health services in that regard. Such recommendations form part of campaigns conducted by the state and health provider institutions. In other words, the shared use of part-time leave is discouraged by an apparent contradiction: on the one hand, women are advised to breastfeed their children during the first six months and, on the other, they are afforded the opportunity to transfer their right to part-time leave to their partners in the same six months (Batthyány and Perrotta, 201810).

Results of the National Parental Leave Survey, implemented in 2017, showed that men’s major reason (72.1 per cent) for not using part-time leave was its overlap with the nursing period. The next most frequent reason given by fathers (six out of ten) was that they believed the baby is better cared for by mothers. One-third of the men replied that caring for babies in the first year of life is the task of mothers (Batthyány and Perrotta, 201811).

**d. Childcare leave and career breaks**

No statutory leave entitlement.

**e. Other family-employment related measures**

No information available.

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11 Ibid.