

## REPORT OF THE GOVERNMENT OF FINLAND

for the period from 4 September 1992 to 31 December 1993 in pursuance of Article 6 of the Protocol to the European Social Charter, on the measures taken to give effect to the accepted provisions of the Protocol to the European Social Charter, the instrument of approval of which was deposited on 29 April 1991.

In accordance with Article 8 of the Protocol and Article 23 of the Charter, copies of this report in the Finnish language have been communicated to the Central Organization of Finnish Trade Unions (SAK), the Confederation of Unions for Academic Professionals (AKAVA), the Confederation of Finnish Industry and Employers (TT) and the Finnish Confederation of Salaried Employees (STTK). A summary of their observations is attached to the end of this report.

## **Additional Protocol to the European Social Charter**

### **Article 1**

*Right to equal opportunities and equal treatment in matters of employment and occupation without discrimination on grounds of sex*

#### **A. Provisions against direct or indirect discrimination on grounds of sex**

The purpose of the Act on Equality between Women and Men (609/86, Appendix 1) is to prevent discrimination on the basis of sex and to promote equality between women and men, and, for this purpose, to improve the status of women particularly in working life. To implement the purpose of the Act, the Act includes provisions on actions to promote equality, to counter discrimination on grounds of sex, and on necessary legal protection measures and procedures pertaining to the observation of the provisions. The Act applies to both private and public administration and business.

The provisions of the Equality Act prohibiting discrimination are applied where a person or a group of people have been placed on an unequal footing on the basis of sex. The Act also includes what are called 'active' provisions on equality; these place all authorities and employers, for example, under an obligation to promote equality. In addition, the Act contains provisions on equality in education and teaching.

Section 7 of the Equality Act prohibits discrimination on grounds of sex. Discrimination means placing women and men in different positions on grounds of sex. Discrimination also includes any procedure whereby women and men are de facto placed in clearly different positions in relation to each other. In Section 8 of the Act, there is a special provision completing Section 7, which prohibits discrimination on grounds of sex in recruitment, remuneration, and also otherwise during the course of an employment relationship and when the employment relationship is terminated. Section 9 of the Equality Act includes complementary provisions on discrimination, including indirect discrimination, and on the kind of procedure which shall not be considered to constitute discrimination.

Under Section 8, sub-section 2, paragraph 2 of the Equality Act, it is deemed to be discrimination if the employer applies to an employee less favourable conditions of payment or other conditions of employment than those he applies to an employee of the opposite sex, employed by him in the same work or work of equal value. Another provision of the Equality Act that may be applied to pay differentials is Section 7, a prohibition of indirect discrimination. According to this Section, any procedure which places women and men in clearly different positions is considered to be discrimination.

Under the State Civil Servants Act, Section 17 (Appendix 2), an authority must treat state employees equally in a civil-service relationship. A state employee may not, without justification, be placed on an unequal footing in relation to other state employees, for example, on the basis of sex. According to Section 13, sub-section 3 of the Act, an authority may not treat the applicants for a public post unequally on the basis of sex.

The office regulations in municipalities usually include a prohibition of discrimination with regard to local government officers.

#### **B. Legal practice applied to Article 1, para 1**

The Supreme Court has thus far settled only one dispute concerning the principle of equal pay

for women and men (KKO<sup>1</sup> 1992:18):

A city had applied to A, who had carried out duties of equal value to those carried out by B of the opposite sex, more unfavourable pay terms than those applied to B at the time when the Equality Act came into force and even after that, until B had been nominated to another city post.

Because under the relevant collective agreement, the City had, despite the Equality Act, been obliged to preserve B's employment terms, which were better than those laid down in the collective agreement, and B's pay level determined on the basis of the terms, and the city could not be required to act faster than it had done to rectify the situation, the city's action had resulted from an acceptable reason other than gender.

As the decision of the Supreme Court points out, the woman (A) and the man (B) had duties of equal value, for which equal remuneration shall be paid according to the Equality Act. However, there had been an acceptable reason for the woman's more unfavourable pay terms, and thus the inequality was not due to sex. The man had been transferred from his former post to another before the Equality Act came into force, and his pay had been preserved unchanged according to the city's practice. According to the collective agreement, his pay could not be reduced after he had been transferred to another post. After the Equality Act came into force on 1 January 1987, the man and the woman had done work of equal value until 8 May 1988, when the man had been transferred to another city post. The decision of the Supreme Court can be given such an interpretation that the city should take measures to achieve equality in pay. However, the members of the Supreme Court whose opinions differed from the decision taken considered that the attempt to keep the male employee's pay terms unchanged according to the collective agreement was not an acceptable reason for inequality in pay.

In a judgement given by the Turku Court of Appeal on 18 May 1992 in a corresponding case to the one cited above (KKO 1992:18), it was considered that as the lawsuits concerning equal pay had been filed on 25 January 1990 by the female employees and as the male and female employees had performed equal work, the female employees having, however, been paid less from the year 1984, the employer had sufficient time to eliminate the pay differential from the date when the Equality Act came into force (1 January 1987). According to the grounds of the decision, the better pay of male employees was due to the fact that their positions in the organisation and their duties were, before the company acquired a new EDP system in 1984, different from those of the female employees. According to the decision, the procedure was not justified by the fact that some of the male employees were paid the same pay as the female employees who had done work of equal value. Neither did the Court of Appeal consider significant the grounds for pay differentials given by the employer, according to which the employer could not lower the pay of the male workers due to their collective agreement even though the work of male and female employees had changed and become equal in value in the year 1984. The Supreme Court did not give a right of appeal, so that the decision of the Turku Court of Appeal remained final in the case.

### **C. The protection of the employees against possible retaliation measures by the employer**

In the reform of the Equality Act it is suggested that a provision on prohibited retaliation

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<sup>1</sup> Abbreviation used in Finland meaning 'Korkein oikeus', the Supreme Court.

measures be added to the Act. The prohibition of retaliation measures is applied to an employer or a representative of an employer who has the authority to affect working conditions. If the employer or the representative of an employer is found guilty of retaliatory measures, the same sanctions as are valid in all cases of violation of the prohibition of discrimination can be used, in other words compensation. The legislative proposal concerned was placed before the Parliament in May 1994.

#### **D. Promotion of equality and the machinery to implement it**

The observation of the Equality Act is supervised and its implementation is promoted by the Equality Ombudsman and the Equality Board. Their duties are enacted in broad outline in the Equality Act, and, more in detail, in the Act on the Equality Ombudsman and the Equality Board (610/86), supplemented by the Decree (739/86).

The Equality Ombudsman supervises the observation of the Equality Act, primarily the prohibition of discrimination and discriminatory job advertising. It is also a duty of the Equality Ombudsman to promote the implementation of the intention of the Equality Act through initiatives, counselling and instructions.

The Equality Ombudsman has quite extensive rights to obtain information and documents from authorities, employers and other private persons. In addition, the Equality Ombudsman has the right to make inspections at workplaces, if there is reason to believe that the employer has acted in contravention of the Equality Act or the equality obligations of the Act have otherwise been disregarded.

The Equality Ombudsman can, when necessary, bring a matter concerning Section 7 (Prohibition of Discrimination), Section 8 (Discrimination in Working Life) and Section 14 (Prohibition of Discriminatory Advertising) of the Act to the attention of the Equality Board.

The Equality Board can prohibit the continuation or repetition of the act in contravention of the above provisions, if necessary, under penalty of fine. The public courts of law may ask the Equality Ombudsman for a statement on paying compensation for discrimination.

The Equality Board may also prohibit a person who has acted against the prohibition forbidding pay discrimination or indirect discrimination from continuing or repeating his action, if the prohibition is considered justified on the grounds of implementation of equality. A discriminatory pay term in the employment contract or collective agreement may also be declared invalid if they are considered contrary to the mandatory provisions of the Equality Act. A discriminatory pay term in an employment contract can be declared null and void in a public court of law and in the case of a collective agreement in the Labour Court.

The legal measures provided by the Equality Act in pay discrimination cases differ depending on which provision in the Equality Act is appealed to. If the procedure is considered contrary to Section 8 of the Act, the employer can be required to pay compensation on grounds of sexual discrimination. In addition to compensation, it is also possible to claim reward for remuneration lost on account of pay discrimination contrary to the Equality Act under the Compensation for Damages Act or some other relevant act. There is, however, no possibility to claim compensation for violation of the prohibition of indirect discrimination under Section 7 of the Act.

In legal proceedings pertaining to equal pay brought before a court of law, an employee must

provide evidence that female and male workers are doing the same work or work of equal value but are paid differently. The comparison of remuneration concerns the remuneration policy of the same employer and the remuneration paid for the employees at that time. The provision does not require that the remunerations subject to comparison should have been paid at the same time. Pay discrimination also includes cases where a new employee receives different pay from that paid to the previous employee for the same work. However, a difference in time may explain a pay differential. In this case, the present valid provisions require that the latter employee is of the opposite sex doing the same work or work of equal value and that the employer cannot prove that there is an acceptable reason for the differential other than gender. A concrete point of reference cannot be required in all cases when comparing remuneration.

#### *Obligation of authorities to promote equality*

The Equality Act includes the obligation of authorities to promote equality between women and men, particularly by changing circumstances which prevent the implementation of equality. To promote equality, it is recommended that equality plans be drawn up. The authorities and employees have the right to accept equality plans, but it is not an obligation. The Equality Act gives legal support for the drawing up of equality plans. The Equality Act, however, does not comment on the contents of equality plans or their scope.

The authorities began active equality work in the late 1970s. The Prime Minister's Office and all the ministries participated in preparing the government equality programme. The programme required that equality be promoted in education and training, in working life, family law and social policy, regional and communal policy. Furthermore, it required that the status of women be improved in government administration, and their participation in social policy and international cooperation be increased.

In order to implement the obligation of authorities to promote equality, preparation work for equality plans has been continued in various government administration sectors in the 1990s. Drawing up equality plans for different fields of activity and administration sectors is considered to be a matter of vital importance and urgency.

The operational equality plan refers to the promotion of equality within the administrative sphere of the authority concerned, for example within basic education, adult education, vocational training, manpower services, employment management, and social services etc. Operational equality plans have been drawn up by the Ministry of Labour, the Ministry of Education, the Ministry of Transport and Communications, the Ministry for Foreign Affairs, and the Ministry of Social Affairs and Health.

Section 5 of the Employment Services Decree (Appendix 3) requires that, when planning and implementing employment services, equality between the sexes must be actively promoted. In employment services, different alternatives in jobs and training, vacant jobs and job-seekers must be presented on equal grounds according to the same principles, irrespective of the sex of the person concerned or any reason indirectly deriving from the person's sex. When giving information on labour markets, employment services, and job and training alternatives, the implementation of equality in the labour market must be promoted.

#### *Obligation of employer to promote equality*

By virtue of the Equality Act, the employer is under an obligation to promote equality. This applies both to private and public-sector employers. The provision obliges the employer to act

in such a way that both women and men apply for any vacant posts, to promote equitable recruitment of women and men for the various tasks and to create equal opportunities for promotion for both women and men. The employer is furthermore obliged to develop working conditions so that they are appropriate for both women and men.

The obligation of an employer to promote equality is not imperative but it must be implemented as far as possible by using the available resources. The implementation is affected, for example, by the supply of labour, the professional skills of the applicants, the size, location and financial resources of the enterprise etc. It is, however, of the essence that the employer may not, through prejudiced attitudes neglect his obligation to promote equality, by appealing, for example, to customers' expectations of the sex of the employees or his own employees' resistance. In recruitment and selection of employees for training, employees of one sex must not be favoured in such a way that promotion opportunities are meant only for them.

In the Equality Act, there are no sanctions whatsoever on failure to fulfill the obligation to promote equality. For authorities, the promotion of equality is a duty, and sanctions on neglecting this duty are prescribed separately.

In January 1990, the Ministry of Finance issued a rule (P 1/90) on how to draw up equality plans relative to staff policy and on other means of promoting equality between the sexes in government offices and institutions. The equality plan referred to in the rule refers to the obligation of an authority to promote equality in their capacity as an employer, and it could be called '*staff equality plan*' or '*equality plan relating to staff policy*'. According to the rule, equality in government administration must be promoted on a more practical level than has been the case thus far. This requires that government offices stress the importance of equality issues in staff administration, look into the working conditions of women and men, and prepare and implement plans to promote equality.

An equality plan consists mainly of systematic activities to equalise sex distribution mainly in training, at workplace level and in certain tasks. The aim is to place women and men equally in different posts and to create equal opportunities for promotion. The principle is to improve the status of persons who are at a disadvantage. The plan makes it possible to favour persons of the underrepresented sex. Thus it is possible to carry out actions and procedures which could as such be considered to constitute discrimination prohibited by the Equality Act. However, Section 86 of the Constitution Act relative to the grounds for promotion in office cannot be disregarded. This kind of plan can only be applied in cases where de facto inequality prevails.

## **E. Problems and actions taken to solve them**

### *Implementation of equal pay in the labour market*

Equal pay for women and men in the labour market can be seen from different points of view on the basis of pay statistics. The Equality Act requires that the remuneration of persons in the employment of the same employer can be compared, firstly among persons doing the same work and secondly, among persons doing like work. In the last mentioned case, equality is assessed on the grounds of how demanding the job is and the skills required.

There may in practice be differences between the pay of employees doing the same or like work, as the pay rate may include grounds other than the basic job-related salary or wage. These grounds include, for example, service increments and other increments paid on the basis of the length of service. Furthermore, pay increments can be paid on the basis of hard and

exacting working conditions, and naturally also on the basis of the personal competence of the employee and his performance.

Pay differentials have been explained by the gender-based division of the labour market. In Finland, women and men are placed in different sectors and within different sectors in different occupations according to sex. Women and men also take different places in the organisational hierarchy. Women comprise some 60% of the work force in the service sectors, while the industry and construction sectors are male-dominated. Both women and men are concentrated in occupations in which the other sex forms a small minority. According to information gained from the 1985 population census, only 9% of full-time wage earners and salaried employees worked in so-called equal occupations, in which the proportion of women and men is 40-60%. Forty-three per cent of employees worked in occupations where at most 5% of the personnel are of the other sex. However, according to the 1990 population census, there has been a radical change in the number of employees engaged in 'equal occupations': almost one-fifth of the work force, or 18%, were employed in equal occupation sectors. Forty-six per cent of the work force worked in totally differentiated occupations.

According to a survey carried out by the Commission for Local Authority Employees, remunerations paid to women from September 1990 to September 1991 in the local sector rose on average some 4% more than those of men, which levelled out pay differentials. Remunerations paid to women rose in relation to those paid to men faster than at any time in the 1970s and 1980s. Women's average earnings increased proportionally in all local sectors faster than men's earnings. Men's earnings did not even reach in any of the collective agreement sectors the average pay rise targets agreed on by the wage-fixing machinery. The effect of the agreed pay rises on men's earnings is proportionally less than on women's earnings. In addition, pay slides in the local sectors were mainly to the benefit of women during the period concerned. Pay rises based on equality, called equality allowances, which were agreed on in the comprehensive incomes policy agreement, have contributed to these positive developments.

The survey also shows that women's earnings were 79.2% of the men's earnings calculated on the basis of regular working hours. Men's average earnings calculated in this way were FIM 10 733 per month and women's earnings FIM 8 501 per month.

When considering earnings of all employees, pay differentials between men and women are still clearly in favour of men at all training levels. Proportional differences in pay have increased among employees with higher or secondary education and decreased among those with basic education. Pay differentials have grown most among those employees who have secondary education, where the rise in the level of women's training has been most pronounced.

The comprehensive incomes and economic policy agreement for 1990-1991 included both the equality allowance and re-evaluation of job requirements. When the agreement was revised, it was agreed that a survey of pay differentials between women and men would be made at certain intervals. On the basis of surveys of this kind, the parties will negotiate and, when necessary, decide on action to be taken. An example of this are the equality allowances included in collective agreements, which have contributed to the positive development of women's remuneration, as explained above.

The most serious problem relating to the principle of equal pay is the fact that the demands of female-dominated jobs are not sufficiently known and appreciated. By re-evaluating the demands of different jobs, it is possible to discover characteristics typical of female-dominated sectors. The re-evaluation of job demands is seen as a means to level out pay differentials

between women and men. Re-evaluation may also give new insight into the characteristics of women's jobs. Generally speaking, remuneration should be based mainly on the factors contributing to the difficulty of each specific job, irrespective of the personality of the employee. All attention should be concentrated on the job and the personal characteristics of the individual employee should have no significance at all.

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The task of the job evaluation group set up by the central organisations of employers and workers in 1990 was to look into the evaluations systems in use concerning job demands, to make suggestions for developing the systems on the basis of their findings giving special consideration to female-dominated sectors and jobs, and to look into the possibility of comparing job difficulty across sectors. The first report of the group was completed in March 1992. In the incomes policy agreement for 1992-1993, it was agreed that the job evaluation group continue its work. The purpose was to start up pilot research project on the possibilities of comparing the difficulty of jobs across sectors. The research concerns the applicability of the proposed demand factors to the evaluation of how demanding the job is in various tasks and fields. The job evaluation group submitted its final report (A summary of the report is given in Appendix 4) in February 1994.

The evaluation group made up a framework of requirements, which comprises the following four main factors: skills, responsibilities, stress and working conditions. These in turn are based on nine subfactors, which are knowledge, physical skills, problem-solving skills, interaction skills, financial responsibility, responsibility for people, mental and emotional stress, physical stress and working conditions.

The pilot research commissioned by the job evaluation group was completed in summer 1993. The research called '*What does the job demand?*' was carried out at 33 different workplaces in different parts of Finland: in industry, in the private service sector, in municipalities and state sectors. The research material covered information on 156 different jobs. These were selected to include typically female-dominated jobs, male-dominated jobs, and as far as possible, jobs with equal representation of both men and women. An important result was that on a general level the evaluation factors used are indeed applicable to different sectors. The research also showed that women's and men's jobs are equally demanding when the evaluation method used takes into consideration the demand factors of women's and men's jobs equally.

Remuneration on the basis of job demands is usually considered to promote fairness. According to the working group, the evaluation aims at pay grounds that are felt to be fair, that have been mutually agreed on and accepted. The basic part of the pay is determined by the level of demands of the job, but a personal increment or a performance or result-based increment can also form a part of pay. In addition, market forces may also play a role in determining the amount of pay.

#### **F. Social security within the scope of application of the Additional Protocol**

Social Security is not excluded from the scope of application of the additional protocol.



## **G. Protection of pregnant employees**

According to the Equality Act, special protection of women on account of pregnancy or childbirth shall not to be deemed to constitute discrimination.

Under Section 34 of the Contracts of Employment Act (320/70, Appendix 5), the employee has the right to maternity, paternity or parental leave during the period that the maternity, paternity or parental allowance under the Sickness Insurance Act is regarded as covering. The employee is entitled to return to his/her previous duties or equivalent work after maternity, paternity or parental leave.

The employer is not entitled to give a woman notice of dismissal either because of pregnancy or when he learns that an employee is pregnant. The employer is not entitled to terminate the employee's employment contract either during his/her maternity, paternity or parental leave, or when the employer has learned that the employee will exercise his/her right to the above-mentioned leaves. When the employer terminates the employment contract of a pregnant employee, the termination is considered to have been due to the pregnancy, if the employer is not able to prove otherwise (also according to Section 46 of the State Civil Servants Act).

In 1991, by amendment of the Contracts of Employment Act, the protection of a pregnant employee against safety risks in her working environment was improved. If a chemical substance, radiation or infectious disease relating to the work or working conditions is thought to endanger the foetus or the course of the pregnancy, the employer shall endeavour to transfer the employee to suitable duties compatible with the employee's skills until she starts her maternity leave. If it is not possible to remove the factor endangering the foetus or the course of the pregnancy or to transfer the employee to other duties, the employee is entitled to a special maternity leave with a special maternity benefit. During the special maternity leave, the employee is protected by the same laws as a pregnant employee in normal cases.

According to paragraph 1 of sub-section 2 in Section 8 of the Equality Act, the employer cannot discriminate against a pregnant applicant when selecting an employee for a fixed-period employment relationship, nor can the employer limit the employment relationship to terminate at the beginning of the maternity, paternity or parental leave. It is also considered discrimination on grounds of sex under Section 9, sub-section 1 of the Act, if an employee is placed in a different position because of parenthood, because of his obligation to provide for the family or another reason relating indirectly to the sex of the employee.

In fixed-period employment relationships, the same sanctions as for any discriminatory action by the employer prohibited in Section 8 also apply to discrimination on the basis of pregnancy or parenthood.

Regulations concerning local government officers prohibit giving an officer notice of termination because of pregnancy or leaves relating to pregnancy. The contents of the said regulations correspond to the provisions of the Employment Contracts Act described above.

## **H. Other actions promoting equality between the sexes**

## **I. Occupations reserved for one sex only**

On the regulation level, there is usually nothing to prevent women and men being employed in the same occupations. Only the defence forces, fire and rescue departments have any significant restrictions based on sex when selecting an applicant for a vacant job.

## **Article 2**

### *Right to information and consultation*

#### **A. Informing the employees and their representatives and consulting them, and selecting personnel representatives**

Under the Act on Codetermination in Companies (725/78, Appendix 6), codetermination procedure (information and consultation) is carried out between the wage-earners and salaried employees concerned and their superiors, and between the employer and the personnel representatives.

In the Codetermination Act, the expression 'personnel representatives' means any person elected in accordance with the relevant collective agreement as a senior shop steward, a liaison person, or shop steward for an occupational group or department, as well as any labour protection representative elected in the manner specified in Section 10 of the Act on the Supervision of Labour Protection and Appeal Procedure in Matters Concerning Labour Protection (131/73).

Where any personnel group has no shop steward or liaison person or where the shop steward or liaison person has been appointed on the basis of an election in which only members of a trade union were entitled to take part and the wage-earners and salaried employees not belonging to that trade union constitute the majority of the personnel group concerned, such wage-earners or salaried employees shall be entitled, if a majority of them so request, to elect a person from among their own number to represent them for the purposes of the codetermination referred to in this Act.

The laws and agreements applied to codetermination between the employer and personnel in government offices and public services are the Act on Codetermination in Government Offices and Institutions (651/88), and the agreements based on the said Act, comprising the Agreement on Codetermination in Government Offices and Institutions (13 December 1991) and the codetermination agreements for specific offices and institutions based on it, and the Agreement on Codetermination in personnel matters concerning State Administration and various administration sectors (1 March 1990), which is called the Codetermination Agreement at ministry level. The system corresponds in broad outline to the codetermination referred to in the Act on Codetermination in Companies (725/78). However, special features of state administration have been taken into consideration in the said agreements.

In state administration, the parties to codetermination are the office and its personnel. Codetermination may take place between the superior and the subordinate, between the employer and the personnel, or between the employer and the personnel representatives.

The government office must inform the personnel directly of the activities of the office and such matters under preparation that affect the position of the personnel or their working conditions, and the decisions and actions taken in these matters.

In certain cases, the government office shall provide the personnel representatives with information (for example, wage statistics, annual accounts of public utilities). In the agreements specific to an office, the election or nomination of the personnel representatives, and possible codetermination bodies can be agreed on. Unless otherwise agreed, the shop steward, labour protection representative and personnel representatives elected in the manner specified in Section 6 of the Codetermination Act, act as personnel representatives.

In municipalities, codetermination is carried out on the basis of the Collective Agreement on Codetermination concerned. The parties to codetermination are the municipalities and its personnel. Personnel representatives may be the senior shop steward, shop steward, labour protection representative or another person appointed by the signatory organisation of the Agreement or its local chapter. If a personnel representative has been appointed in such a way that the electors are required to be members of a trade union, and the wage-earners and salaried employees not belonging to that trade union constitute the majority of the personnel group concerned, such wage-earners and salaried employees shall be entitled, if a majority of these so request, to elect a representative from among their own number for the purposes of the codetermination referred to in this Act.

Central labour organisations have also concluded collective agreements on codetermination at workplaces. In addition, they have made agreements on shop stewards and collective agreements concerning company rationalisation.

### **B. Structure of information and consultation procedure, procedures and systems at all levels concerned, their necessity and the frequency of recurrence of the procedure**

The provisions on matters appertaining to codetermination are included in Section 6 of the Act. In addition, Section 6 a of the Act includes provisions on obligation to negotiate after business transfer or merger. Section 6 b includes provisions on the obligation of an enterprise to confirm plans regarding personnel and training. The procedure per se, in other words the timing of the procedure and the parties to the procedure is prescribed in Section 7 of the Act. Before the employer takes a decision on any matter covered by Section 6, he shall discuss the reasons for the action, its effects and possible alternatives with the wage-earners and salaried employees concerned.

Any matter affecting a particular wage-earner or salaried employee shall in the first instance be discussed between the employer and the person concerned. If a wage-earner or salaried employee concerned so requests, the matter shall also be discussed between the employer and the relevant personnel representative. If the matter is of general concern to the wage-earners and salaried employees in a particular unit or department of the enterprise, it shall be discussed with the appropriate personnel representatives. If the matter concerns several personnel groups, it shall be discussed at a joint meeting attended by representatives of each group.

The employer shall usually submit a proposal for negotiations in writing at least three days before the negotiations begin. In cases of business transfer or merger, a proposal for negotiations shall be submitted within a week of the transfer or merger. When the proposal for negotiations includes measures for the reduction of personnel, the employer shall inform the labour authorities at the latest when the negotiations begin, so that the authorities can prepare for possible employment actions.

The obligation to negotiate is fulfilled when the matter has been dealt with by the parties concerned, when it is settled or, in some cases, the minimum negotiation periods prescribed have expired. The converting of contracts of employment into part-time contracts, termination of contracts or lay-offs for more than 90 days affecting more than 10 employees shall be discussed until a settlement is reached or until three months have elapsed after the proposal for negotiations was submitted. The converting of contracts into part-time contracts, termination of contracts or lay-offs of one to ten employees shall be discussed until a settlement is reached or until seven days have elapsed from the beginning of the negotiations. The converting of contracts into part-time contracts, termination of contracts or lay-offs due to business transfer

shall be discussed until the matter has been settled or two months have elapsed since the proposal for negotiations was submitted to the personnel representatives. If the enterprise is in liquidation or bankrupt, these periods of time are not applied. In cases of the reorganisation of the enterprise, a period of 1 month is applied instead of the said three months. In some circumstances, a period of seven days can be applied to reorganisations of enterprises.

The employer shall, on request, ensure that the outcome of the negotiations is recorded in the minutes of the meeting.

The personnel representatives shall be informed in advance of the use of outside labour, and, if the personnel so requests, the matter shall be discussed under the codetermination procedure.

The obligation to start codetermination procedure can be waived for unforeseeable and particularly weighty reasons. However, the codetermination procedure shall also in these cases be started as soon as there is no longer any reason to depart from the normal procedure.

Provisions on the obligation of the employer to provide information are prescribed in Section 11 of the Codetermination Act. Under the Act, the employer shall provide the employees or their representatives with the necessary information before starting codetermination procedure. The information shall be provided in writing when the employer considers terminating the contracts of at least ten employees.

The employer shall present the personnel representatives with the enterprise's financial statements as soon as they have been confirmed. In addition, the employer shall at least once a year submit a report on the enterprise's financial situation, showing the prospects for production, employment situation, profit margins and cost structure. The employer shall also confirm plans regarding personnel and training every year. If it is necessary to consider reductions in labour force that have not been included in the plans for personnel and training, the possibilities for retraining shall be discussed, taking into account both in-house training and training services purchased from outside.

In concerns employing at least 500 persons, the provisions on inter-group cooperation in the Codetermination Act, for example, provisions on the obligation of the employer to provide information and provisions regarding personnel representatives (Sections 11 c-e) are applied.

An employer or a representative of an employer who violates certain provisions of the Codetermination Act can be sentenced to pay a fine.

It is possible to depart from the statutory codetermination procedure by an agreement between national associations of employers and employees, which has the same legal force and effect as the collective agreement concerned.

The Act on Personnel Representation in Company Administration (725/90, Appendix 7) gives the personnel the right to participate in the decision-making, executive, supervisory or advisory bodies of an enterprise when they are discussing matters concerning the business operations, the finances and the personnel's role in the enterprise. ('personnel representation in the administration of the enterprise')

Personnel representation in the administration of the enterprise may be implemented as agreed by the employer and the personnel. If there is no agreement, the personnel groups of the enterprise have the right to nominate at least one representative either to the supervisory body,

the board of directors or similar body selected by the enterprise.

A joint committee comprising the representatives of the office or personnel, or both a joint committee and a body comprising personnel representatives can be appointed in a government office or its department. A separate committee can also be appointed to discuss a certain specified matter relating to codetermination.

In government offices and departments, the representation of personnel in the administration is prescribed in the decrees concerning that particular office or department. There is usually one representative of personnel on the board of a government office or department.

The matters to be dealt with according to the codetermination procedure in the collective agreement for the municipal sector correspond in outline to the matters coming under the Codetermination Act. If the municipality employs at least 20 persons, a joint committee for codetermination must be appointed as agreed by the parties concerned in the municipalities.

### **C. The nature of the obligation to provide information and to consult prescribed by the provisions of the act, collective agreements or other at the workplace and enterprise level**

Under the Codetermination Act, the employer shall among other things present to the personnel representatives the enterprise's financial statements, a report on the enterprise's financial situation, the plan regarding the personnel and wage statistics. The employer shall also inform the representatives of a business transfer.

No matter affecting personnel can be decided on until the minimum statutory period for negotiations has elapsed or the matter has been settled. The matters covered by the codetermination procedure include matters generally affecting work, working conditions, employment relationships and changes in the conditions of employment relationships, matters affecting the personnel in conjunction with a business transfer, training, rationalisation, in-house information services, and service-related accommodation and other matters concerning social activities.

Wage-fixing machinery plays an important role in the development of cooperation between the parties in working life. The established negotiation system of the labour market parties is based on the fact that disagreements are in the first instance settled at the local level in negotiations between the employer and the employees or their representatives.

### **D. The number of employees, below which enterprises are not required to observe the provisions on the obligation to provide information and negotiation procedure**

The Codetermination Act is applied to enterprises normally employing at least thirty persons. Codetermination under the Act is also applied to the termination of contracts for productional and financial reasons in an enterprise employing at least twenty persons. The Act is not applied to enterprises smaller than the above-mentioned ones. The Act on Personnel Representation in Company Administration is applied to enterprises employing at least 150 persons.

The provisions on group cooperation under the Codetermination Act are applied to groups employing at least 500 employees. The provisions (Sections 11 c-e) concern, for example, the obligation of the employer to provide information and personnel representation.

The Act on Codetermination in Government Offices and Institutions is applied to all government offices and institutions irrespective of the number of employees. The Codetermination

Agreement concerning the employees in municipalities, entered into on 1 September 1993, applies to all personnel employed by municipalities.

**E. Proportion of employees falling outside the scope of the laws on the obligation to provide information and to negotiate, collective agreements and other procedures**

No exact figures are available on enterprises and employees falling outside the provisions on codetermination procedure. According to the Statistics Finland (Enterprises 1991:126, 127, 128), issued by the Central Statistical Office, the number of enterprises employing fewer than twenty employees is about 120 000. In 1991, these enterprises employed some 27% of all employees working for all enterprises of different sizes. In state administration (160 000 in 1991) and municipalities and the federations of municipalities (445 800 in 1991), codetermination procedure is applied to all personnel. As a total of 2 340 000 employees were employed in all sectors of economy in Finland in 1991, it can be stated that over 80% of the labour force fall within the scope of codetermination.

**F. Enterprises other than those prescribed in Article 2.2 (fewer employees than prescribed in national legislation) fall outside the scope of this provision in the sense stated in the appendix of the Protocol (Articles 2 and 3, para 4)**

The Act on Codetermination in Companies is not applied to organisations pursuing activities which are inspired by political, religious or other ideals. The Act is, however, applied to any business activities pursued by these organisations.

### **Article 3**

*The right to participate in the determination and improvement of working conditions and the working environment*

**A. The right of workers to participate in the determination and improvement of working conditions and the working environment, either directly or through representatives, and placing workers' representatives at different organisational levels (workshops, enterprises etc.)**

Under Section 9, sub-section 5 of the Occupational Safety Act (299/58, amend. 144/93, Appendix 8), the employer and the employee shall collaborate to maintain and improve safety at work. The employer shall ensure that the employees are in due time given the necessary information about matters affecting safety and health at work and that these matters are appropriately and in due time discussed between the employer and the employees or their representatives.

Under the Section 9, sub-section 3 of the Act (144/93), the employer shall have a programme of action for the activities necessary to promote safety and health at work, covering the need to improve working conditions and the effects of factors relating to the working environment. The objectives concerning safety and health derived from the action programme shall be taken into account in activities and planning aimed at improving the workplace, and the employer shall discuss them with the employees or their representatives. The employees may participate in the planning of the programme in any way suitable for the enterprise concerned.

By virtue of Section 35 of the Occupational Safety Act, an employee shall immediately inform the employer or his representative and the labour protection delegate, if one has been elected, of any faulty construction or defects in the machinery, equipment, tools and protective equipment or working conditions, which might cause an accident or involve a risk to the health of the employees concerned, and which he himself cannot correct. The employer shall notify of the measures that have been taken or are to be taken as a result. The employee shall have the right to propose to the employer the necessary corrective measures in other cases besides those referred to above.

The Act on the Supervision of Labour Protection and Appeal Procedure in Matters Concerning Labour Protection (Appendix 9), prescribes cooperation between the employer and the employees in labour protection matters. The employer shall appoint a person to act as labour protection manager, who is responsible for the cooperation. At a workplace where at least ten workers are employed on a regular basis, the workers shall elect from among themselves a labour protection delegate and two deputies to represent them in labour protection cooperation. At a workplace where fewer than ten workers are employed, the workers may also elect from among themselves a labour protection delegate. At a workplace where at least twenty employees work on regular basis, a labour protection committee comprising representatives of the employer, workers and salaried employees shall be set up. The committee shall promote occupational safety and health at the workplace.

The purpose of the cooperation prescribed in the Act on Codetermination in Companies is to provide better opportunities for the wage-earners and salaried employees concerned to influence the handling of matters relating to their work and workplaces, with a view to developing the operations of the enterprise, improving its working conditions and promoting codetermination between the employer and the personnel and among members of the personnel.



The codetermination concerned may also take place at the level of a group of companies. The purpose of group cooperation is to promote codetermination between the group management and the personnel, as well as among the members of the personnel in Finland.

Personnel representatives may be shop stewards of the wage-earners, liaison persons of salaried employees, labour protection representatives and personnel representatives chosen for the purposes of codetermination procedure. For the handling of codetermination matters, a separate committee may also be elected.

In the agreement on cooperation concerning labour protection of government employees, concluded on 8 October 1991, the Ministry of Finance and the central organisations of employees have agreed on cooperation in matters of labour protection between the government and the personnel employed by the government. The agreement is based on Section 8, subsections 2 and 3 of the Act on Supervision of Labour Protection. The agreement shall be supplemented by separate contracts made in each government office and department.

The employees of the workplace elect from among themselves a labour protection delegate and two deputies to represent them in cooperation matters and in their relations with authorities. A labour protection committee may also be set up at a workplace, if this is agreed on in a contract for the office concerned. In this case, personnel representatives may be appointed to the committee or chosen in the manner prescribed in the contract.

Corresponding arrangements have been implemented in municipalities by means of the appropriate collective agreements.

#### **B. The right of the workers to participate in the determination of working conditions, the structures, procedures and arrangements of this participation in enterprises and their departments**

Matters discussed under the codetermination procedure include issues affecting work and working conditions, the status and work relations of the personnel, as well as issues affecting changes in these, matters affecting the personnel in conjunction with business transfer. In addition, the codetermination procedure covers matters concerning training, rationalisation, working hours, principles of recruitment and social activities of enterprises.

Codetermination as referred to in the Act on Codetermination means the preparation and handling of matters supporting decision-making in the enterprise. Participation in the sense of the Act on Codetermination also includes the possibility to agree on the matter to be dealt with under the codetermination procedure.

Under the codetermination procedure, matters are discussed in the normal organisation of the enterprise, on one hand between the employee concerned and his superior, and on the other hand between the employer and personnel representatives.

Before the employer takes a decision on a matter falling within the codetermination procedure, he shall discuss the grounds for, effects of and alternatives to the action with the wage-earners and salaried employees concerned. Any matter concerning a certain employee shall in the first instance be discussed by the employer and the person concerned.

Codetermination procedure gives personnel the possibility to present their views on the matters concerned before the employer exercises his final right to make decisions on the matter.

However, working rules and cooperation training shall be agreed on under the codetermination procedure. Personnel representatives may decide on certain matters falling under the social activities of the enterprise, if the employer and the personnel representatives cannot reach an agreement on the matter.

A person who neglects the obligation to cooperate may be ordered to pay fines.

The employee has the right to refuse hazardous tasks and the labour protection delegate has the right to interrupt any work involving danger.

In addition to what has been prescribed by law, the labour market organisations have concluded collective agreements on cooperation concerning labour protection matters.

### **C. Coverage of provisions and regulations concerning the workers' right to participate in determination**

All matters referred to in article 3 sub-section 1 may be dealt with by codetermination procedure.

Employees cannot influence the arrangement of social and cultural activities of an enterprise under the codetermination procedure in labour protection matters. These matters may, however, be dealt with the codetermination procedure falling under the Act on Codetermination in Companies.

### **D. The minimum number of employees below which enterprises are not obliged to provide employees with the opportunity to participate in the determination on working conditions**

In matters concerning labour protection, the employer and the personnel shall cooperate, irrespective of the size of the workplace. The employer shall nominate a labour protection manager in all workplaces unless he himself acts as labour protection manager. The employees shall have the obligation to nominate a labour protection delegate if at least ten workers are employed at a workplace on a regular basis. At workplaces employing fewer than ten workers, the employees also have the right to nominate a labour protection delegate.

### **E. Employees falling outside the scope of labour protection provisions**

The obligation to cooperate applies to, in one form or another, all workplaces.

### **F. Enterprises other than those referred to in article 2, falling outside the scope of provisions (number of the workers fewer than prescribed in national legislation)**

No sector has been left outside the scope of application of these provisions in Finland.

## **Article 4**

### *Right of elderly persons to social protection*

#### *General*

Essential legislation concerning the care of the elderly includes the Social Welfare Act (710/82, Appendix 10), the Primary Health Care Act (66/72, Appendix 11), the National Pensions Act (347/56, Appendix 12) and other pension acts. Another important document is the national plan approved each year, defining the most essential targets for development in the field during the year.

Social welfare and health services are provided by municipalities. Clients may complain about the actions of local authorities / municipalities on an individual level to provincial administrative boards or courts supervising the activities of municipalities. Thus far, the provincial administrative boards and courts have not handled any matters of principle. The Basic Security Board under the Ministry of Social Affairs and Health may be appealed to if a municipality neglects its duty to provide social welfare and health services. The Basic Security Board was set up in 1993. It has not had to deal with any cases concerning the care of the elderly.

#### **Article 4, para 1**

##### **A. and B.**

See answers for Article 12.

##### **C. Disseminating information to the public on social welfare and health services**

The public is provided with information about social welfare and health services, their organisation, scope and yearly implementation through various channels. For residents, the most important source of information is the local authority, which provides most of the social welfare and health services offered. Information on pension benefits is provided by the local offices of the Finnish Social Security Institution. The obligation to provide information is prescribed in the Social Welfare Act.

Each municipality regularly advertises its services in local newspapers, and local authorities also inform residents of new or changed activities through their own information newsletters. In addition, the municipalities send personal invitations, for example, to attend health check-ups.

To make it easier to obtain information about various services, many of the municipalities have, together with the Social Insurance Institution (KELA), founded separate information service points in different parts of the district, where residents are given oral advice about the services offered, and where they can receive and hand in forms to be submitted to the authorities. At the moment, the centralised organisation of services is being discontinued, which will also make for an easier flow of information to residents.

The Ministry of Social Affairs and Health publishes information booklets called "*Sosiaalihuolto Suomessa*" (Social Welfare in Finland) and "*Terveysthuolto Suomessa*" (The Public Health Service in Finland), as well as reports on changes made in client fees, services and their organisation. The Ministry of Social Affairs and Health is also now using up-to-date infor-

mation technology in its activities, having a menu in the service directory of the Finnish telecommunications network. This menu, which supplies information about health and social security, includes a subdirectory headed 'old age'.

The Development Centre for Social Welfare and Health Services (STAKES) publishes information about treatment, care and the organisation of services and publishes a major part of the official client-specific statistics.

Important providers of information include insurance companies which every year publish not only information about insurance activities but also about statutory benefits. For example in 1994 they published a booklet called *Toimeentuloturva* (Income Security) which is a reference book comprising information on statutory social security and voluntary insurances.

Nationwide organisations providing services for elderly persons and pensioners' own organisations are also important sources of information. In addition to the information they provide about their own activities, they give information on elderly persons' social benefits. The organisations have an extensive voluntary service network to help the ageing and elderly persons to maintain their social contacts with other people, and to develop their recreational activities. In conjunction with these activities, the organisations also provide personal information to the elderly.

The Act on the Status and Rights of a Patient (785/92) entered into force on 1 March 1992, and it defines the most important legal principles concerning the care and treatment of a patient. The Act is applied both to public and private health care. The Act prescribes, for example, the patient's access to treatment, his right to receive information and to participate in decisions concerning his treatment.

## Article 4, para 2

### A. Elderly persons' housing services

In the early 1990s, some 94.3% of persons aged over 65 lived in ordinary or service flats and houses. Living in owner-occupied housing is becoming more and more common: in 1991, 79% of persons aged 65-74 and 75% of persons over 75 lived in owner-occupied housing. Fewer elderly persons than before live in an institution in relative terms (Table 1).

Table 1. Form of housing of persons aged 65 and older in 1983 and 1991, per cent of age group.

	1983	1991
<b>Persons living at home</b>	<b>92.0</b>	<b>94.3</b>
Ordinary housing	91.5	93.1
Service accommodation	0.5	1.2*
<b>Persons in long-stay care (more than 3 months) in an institution</b>	<b>8.0</b>	<b>5.7</b>
Old people's home	5.0	3.4
Health centre hospital	1.5	1.8
Mental hospital	1.0	0.4
Other hospital	0.5	0.1

\* Estimate

### *Housing standards*

In 1990, elderly persons had an average living area of 43 square metres while the average for the whole population was 31 square metres. In the future, elderly people will have an increasing amount of living space at their disposal.

Families that have less than one room per person to live in, excluding kitchen, are classified as living in cramped conditions. Those living alone are never classified as living in cramped quarters. According to the estimate for 1992, 17% of all households were classified as living in cramped quarters. When considering all families with members over 65 years of age in 1991, about one tenth (9.6%) of the over 65-year-old population lived in cramped quarters. Of households consisting only over 65-year-old members, 2.5% lived in cramped quarters. These households comprise some 19 000 persons over 65, in other words 2.8% of the over 65-year-old population of the country.

According to the statistics, the elderly rather rarely lived in cramped quarters. Those living in cramped quarters were most often elderly persons whose households also included persons under 65. There are more people living in cramped quarters in Eastern Finland than elsewhere. As many of the houses built especially for the elderly in the 1970s now need renovation, joining old flats to form larger units is one way of improving the housing standard of elderly persons. There are some 37 000 apartments built specially for elderly persons in Finland, with a total of some 43 000 occupants.

While living in cramped conditions is mainly a problem for younger generations, a typical problem for elderly persons is that they live in poor and unsuitable living conditions. Of all residences in Finland in 1990, nearly all flats and houses (95%) were equipped with water and sewage pipes. 93% of flats and houses had a toilet, 89% a central or electric heating system and 82% washing facilities. However, for elderly persons' homes these figures are lower, as elderly persons live in older residences than other people on the average.

In 1991, one fifth (19%) of families including persons over 65, lived in poorly or very poorly equipped flats and houses. 30 000 (6%) of the residences of elderly persons were poorly equipped and 68 000 (13%) very poorly equipped. 46% of elderly persons' households living in poor or very poor conditions were households of persons over 65 living alone, 19% households consisting of two or three persons over 65 and 35% households consisting of persons both under and over 65. (Table 2)

Table 2. Housing standard <sup>1)</sup> in different households <sup>2)</sup> in 1991, the number of households and percentage.

Housing standard	All elderly households	Single persons elderly households	Elderly households of two or three persons	Households consisting of persons under and over 65	All households
Good	411 800 81 %	206 800 82 %	88 600 82 %	116 400 77 %	1 737 600 84 %
Poor	29 781 6 %	14 900 6 %	6 100 6 %	8 800 6 %	137 000 7 %
Very poor	67 800 13 %	30 200 12 %	12 600 12 %	25 100 17 %	191 400 9 %

<sup>1)</sup> A well-equipped flat and house has water and sewage pipes, hot water, a toilet and washing facilities (either a shower/bathroom or a sauna). A flat or house is poorly equipped if washing facilities or central or electric heating are lacking. A flat is classified as very poorly equipped if one of the following is lacking: sewage pipes, water pipes, hot water or toilet.

<sup>2)</sup> 'Elderly households' means here households with persons aged over 65.

In 1991, some 123 000 persons aged over 65 lived in poorly equipped quarters, which is 18% of the whole age group. The largest group living in poorly equipped quarters is that of the elderly living alone. From 1986 to 1991, their number decreased by 15 000 persons to 45 000 persons. The decrease is explained partly by the fact that elderly persons do not usually move into poorly-equipped homes in the place of a person who has been transferred to an old people's home.

For the elderly, living in cramped conditions often means also living in poor conditions. In 1991, 39% of households living in cramped conditions lived in a flat or house classified as poorly equipped. These households accounted for 3% of the population aged over 65.

The standard of equipment is poor mainly in detached houses. Almost 90% of houses classified as poorly equipped were detached houses of the elderly. Two thirds (65%) of these houses are situated in places other than municipalities. However, 40% of all elderly people living in residences whose standard of equipment was to some extent poor lived in towns and cities in the year 1991.

In many cases, improving the standard of equipment in the house is a better choice financially and for humanitarian reasons than arranging help for the elderly person or transferring them elsewhere. Improving the standard of equipment also helps the elderly person continue to live independently. For renovation of the flats and houses of the elderly, the state granted renovation assistance worth 43 million Finnish markka in the year 1992. By means of this assistance, 4 154 flats and houses were renovated. The average amount of the assistance was 10 300 Finnish markka per residence. In 1993, the state substantially increased the sum allocated for renovations to a total of 480 million Finnish markka. It can be estimated that about one third of these grants were used for the renovation of flats and houses of the elderly.

## Article 4, para 2 b

### A. Elderly persons as users of social welfare and health services

On the basis of the numbers of clients, it can be estimated that at the beginning of the 1990s, more than one third of the work done within the social welfare and health services was channelled into services for elderly persons. This means a work input of 70 000-80 000 people.

Table 3. Posts in the social welfare and health services in municipalities and federations of municipalities in 1991 and 1992, their total number and most important posts in services for elderly persons, in thousands.

	1980	1992	Change 1980/1992	Per 100 per- sons over 65 /1980	Per 100 per- sons over 65 /1992
Social welfare and health services in total	166.8	240.5	73.7	28.9	34.6
Primary health care	35.3	56.7	22.4	6.1	8.2
Specialised medical care	59.2	66.8	7.6	10.3	9.6
Home service	8.1	14.3	6.2	1.4	2.0
Care given at old people's homes	13.7	15.0	1.3	2.4	2.2

In future, the growing numbers of elderly persons and a system of service that emphasises the non-institutional care will lead to an increased need for personnel specializing in home care of the elderly. The need for personnel for institutional care is connected with the development of old-age policies aiming at reducing the need for services for the elderly and at developing non-institutional care. The need for personnel also depends on how the numbers of the oldest group among the elderly increases and on how well their physical capabilities can be maintained.

The social welfare and health care services differ so widely on a local and regional basis that one could almost speak of different service cultures in the country. According to surveys carried out, the elderly have the greatest expectations of services that would help them to continue living in their own homes irrespective of where they live. To satisfy the need of the elderly, services such as home help and home care, auxiliary services and the number of service flats and houses should be increased. On the other hand, the share of long-stay institutional care would decrease.

#### *Home services*

The fastest growing form of service for the elderly is home service. In 1992, the expenditure on home service was 8% of all expenditure on social welfare services within municipalities. Home service comprises two forms of service: home help and auxiliary services.

Finland is one of the world's leading countries measured by the number of elderly people

receiving home services. About one fifth of the elderly over 65 use home services. However, the number of clients per year does not say anything about the amount of services per client. In the latter, Finland lags behind the other Nordic countries and the Netherlands.

Table 4. The proportion of persons over 65 who have used home services, by country, at the beginning of the 1990s.

Per cent		Per cent	
Finland	20 *)	Great Britain	8
Denmark	17	Germany	3
Sweden	16	Greece	< 1
The Netherlands	13	Italy	< 1
Belgium	6	Portugal	< 1
France	7	Spain	< 1
Ireland	3		

\*) Estimate

In 1992, there were 20 posts in the home service sector per one thousand people aged over 65 in Finland. The number of personnel in the home service sector varies considerably from one local municipality to another: in 1988, there were 18-130 persons aged over 65 per one home service worker depending on the municipality.

### *Home help*

In 1992, 62% of the households which had used home-help services were comprised of elderly persons. More than four fifths (83%) of home-help calls were made to households of the elderly.

The increase in auxiliary services has reduced the need for home-help service proper given by home service personnel. The nature of the home-help personnel's work is changing from occasional service duties to long-term, comprehensive care. More and more of the clients need long-term service. In this sense, the word 'home help' does not give a totally appropriate picture of trained home helpers' work.

In 1980, fewer than 96 000 elderly households used home-help services. The peak figure, 127 500 elderly households, was reached during the 1980s (Table 5). The lower number of elderly households using home-help services in the early 1990s is partly due to the fact that home-help services are being replaced by auxiliary services.

Table 5. The number of households using home-help services in 1987-1992.

Year	Elderly households	Other households
1987	121 480	86 890
1988	125 240	87 462
1989	127 500	85 180
1990	124 010	77 830
1991	119 430	70 850
1992	105 640	65 090



Because the majority of the elderly households receiving home-help services are single-person households, it can be estimated that in 1992, about 7% of persons aged 65-74, about 24% of persons aged 75-84 and 38% of persons over 85 received home help. (Table 6)

Table 6. The number and distribution (%) of households receiving home help in 1992, by age group of reference person.

Age group reference person	Number	Per cent	Per 100 persons in the age group concerned
- 64	64 440	38	2
65 - 74	28 520	17	7
75 - 84	54 990	32	24
85 -	22 140	13	38
Total	170 730	100	3
65 -	105 640	62	15

In 1992, 37 elderly households were given home help per 100 residents over 75 in the whole country. The number of elderly households varied considerably in proportion to the population over 75 in each province (Table 7). This indicates that each province has different service structures and service criteria, and that the elderly live in different living conditions and have different possibilities to receive help from relatives.

Table 7. The number of elderly households receiving home help in 1992 and their relation to the population over 75, by province.

Province	Number	Per 100 persons over 75 in the province
Uusimaa	18 470	30
Turku ja Pori	17 110	36
Åland	370	57
Häme	13 370	33
Kymi	7 020	33
Mikkeli	5 300	39
Pohjois-Karjala	3 450	47
Kuopio	6 300	43
Keski-Suomi	5 740	42
Vaasa	10 870	38
Oulu	10 560	55
Lappi	4 120	48
Finland in total	105 640	37

In 1990, 75% of the elderly households using home-help services received an average of 1.6 hours home help per week. As few as under 1% of the elderly clients received more than 12 hours of home help per week. Thus home help was received by relatively many people, but the amount of home help was small. It is worth noting that from 1990 to 1992, the number of

home-help calls on elderly households increased by 9%. This may indicate more intensive use of home-help services by those who already use them although the number of client households decreased. An increasing proportion of home-help calls are made to households of persons over 75 (in 1992, 80%).

Home-help calls have up till now usually been made within office hours, but during the past few years, evening and night patrols are becoming a normal part of home-help services in an increasing number of municipalities.

### *Auxiliary services*

Auxiliary services mean services provided to help elderly persons to continue living at home and to give them social contacts. The provision of auxiliary services was increased markedly in the 1980s. However, regional differences in the supply of these services and the number of users are considerable. Developing auxiliary services and reorganizing them will be one of the challenges for the authorities in the future.

In 1992, 89% of all clients using auxiliary services were over 65 years of age. The number of clients aged over 65 was 128,000, which is 18% of all persons over 65. Measured by the number of clients, the most widely used auxiliary services are meals-on-wheels and emergency-call services. As most of the auxiliary service clients are presumably over 75 years of age, table no. 8 also shows the number of auxiliary service clients in proportion to the population over 75 in the year 1992.

Table 8. The clients over 65 who have used the major auxiliary services in 1982, 1990 and 1992; their number and share of the population.

Auxiliary service mode	Number 1982	1990	1992	Clients receiving auxiliary service in 1992, per cent of persons over 65	Clients receiving auxiliary services in 1992, per 100 persons over 75
Meals-on-wheels service	17 800	65 100	72 400	10.4	25.0
Bathing	6 800	13 500	17 300	2.4	6.0
Transport	5 900	15 500	18 000	1.9	4.9
Clothing care	4 200	13 500	14 100	2.0	4.8
Emergency call	900	9 100	13 900	2.0	4.8

### *Home care allowance for a person caring for an elderly, disabled or chronically ill person*

The home care allowance for a person caring for an elderly, disabled or chronically ill person was a form of home care prescribed in the Social Welfare Decree. It was based on an agreement made between the municipality and the person providing care. The municipality paid the provider of care a taxable home care allowance to make it possible to look after an elderly, a disabled or a chronically ill person at home. On 1 July 1993, this allowance was converted into a family care allowance, which is based on the Social Welfare Act.

Almost 90% of the persons receiving home care allowance lived in the same household as the person cared for. Nearly all those providing care were relatives of the persons to be nursed, although this was not a precondition for receiving the allowance, nor is it a precondition in the present system either. An estimated approximately one fifth of the home care allowances for the care of elderly, disabled or chronically ill persons were paid to elderly couples. The amount of the allowance was determined on the basis of how much help the person being cared for needed. In 1992, the average allowance amounted to some 1 600 Finnish markka.

In 1986, the number of persons over 65 cared for with the help of home care allowances was 8 200. In 1992, their number was 11 500, which is 61% of the home care allowance clients. The number of elderly persons looked after at home with the help of an allowance decreased at the beginning of the 1990s. In 1992, 1.7% of persons over 65 were looked after at home with the help of a home care allowance (Table 9).

Table 9. Elderly, disabled and chronically ill persons cared for at home with the help of a home care allowance in 1990 and 1992, their number and distribution by age group (%).

Age group	Number 1990	% 1990	Number 1992	% 1992	Per cent of the age group
0 - 64	7 800	37	7 300	39	0,2
65 - 74	3 830	18	3 310	18	2,1
75 - 84	5 980	28	4 950	26	2,1
85 -	3 420	16	3 270	17	5,6
Total	21 030	100	18 830	100	0,4
65 -	13 220	63	11 560	61	1,7

The home care allowance was often the only allowance that the person providing care and the person being cared for received. In addition to or instead of financial support, the new family care allowance may include services recorded in a care and service plan. Furthermore, the reform of the system aims at guaranteeing public holiday and annual holiday benefits for the persons providing care.

### *Service housing*

Service housing is arranged for elderly persons who need daily support and help because they are incapable of managing on their own at home. Special features of service housing include, as well as structural features, emergency-call and other services for the elderly. Well-planned service housing offers better conditions than institutional care for a person to lead an independent life, to be as active as possible, and to maintain his social family and community ties.

The number of service flats is now three times higher than it was in the early 1980s. In 1992, there were 8 900 service flats for the elderly (Table 10). The Finnish Slot Machine Association (RAY) has during the past years channelled a considerable amount of its financial support into organisations producing service housing.

At the end of the 1980s, new directions were added to the national five-year plans for social welfare and health. According to these directions, service housing was to be arranged for 1.5 % of persons over 65 by the end of 1991, and for 3 % of persons over 65 by the year 2000. In 1992, there were service flats for 1.2 % of persons over 65 in the whole country. Geographically, service flats are distributed rather unequally throughout the country, most of the flats being located in the Uusimaa province. To reach the target of 3 % by 2000 would mean doubling the present number of the service flats, meaning 22 500 service flats by the year 2000.

Table 10. Service flats for the elderly in 1986-1992.

Year	Number	Per 100 persons over 65
1986	4 960	0,8
1987	6 230	0,9
1988	6 420	0,9
1989	7 560	1,1
1990	7 900	1,1
1991	8 200	1,2
1992	8 850	1,2

In 1991, the personnel of old people's homes estimated that there were 1 776 clients in old people's homes, for whom service housing would have been a better choice. Some of the municipalities have gained practical experience of the fact that elderly persons who have lived in old people's homes for years are indeed able to adapt to service housing.

The services offered in service housing vary considerably. They are often given in the form of the normal social welfare and health services provided by the municipality. The number of special staff for service housing is usually very small.

#### *Non-institutional health care*

In health centres, elderly persons receive a considerable proportion of all examinations and treatments. According to the 1992 statistics, 23 % of the basic health care visits were made by persons over 65 years of age. Their share of all visits was 57 % higher than their representation in the Finnish population as a whole.

The same holds good for the elderly as for the whole population: the majority of the visits are made by a small proportion of the elderly population. According to a survey made of a health centre with a population base of 15 000, 18 % of persons over 65 made half of all the visits made by persons over 65. Women visited health centres slightly more often than men. Thirty-five per cent of persons over 65 did not use the services of health centre doctors at all during the year. The most usual causes for visits made by persons over 65 were hypertension and diabetes.

Three out of four visits made by persons over 65 led to additional tests. The corresponding figure for persons aged 25-49 was 49 % and persons aged 50-64 67 %. Persons over 65 made twice as many visits for laboratory and X-ray tests as persons under 65. The figure for ECG examinations was six times higher for persons over 65 than for persons younger than that.

According to a study carried out in 1991, a half (51 %) of the persons over 65 had their own family doctor designated by the municipality, or another regular GP.

Table 11 shows doctor-patient contacts in outpatient health care in 1992. Excluding house calls made to a relatively small group of people, persons over 65 made 6.5 visits to a doctor in the outpatient care sector on the average, of which one (0.9) was a contact with a private practitioner. Of all visits in the outpatient care sector, persons over 65 made 10.3 visits on average. Persons over 85 made fewer visits than those under 85, which is explained by the fact that a considerable number of 85-year-old people are in long-term institutional care. The average number of health care visits of persons over 65 was 0.4 in 1992. Health care visits are mainly visits made to see a public-health nurse. Visits to private practitioners have been estimated on the basis of compensations paid by the Social Insurance Institution (KELA).

Table 11. Health care visits by age group in 1992, the number of contacts in outpatient care per person.

	Age group 0 - 64	65 - 74	75 - 84	85 -	65 +
<b>Public health care</b>					
<i>Primary health care</i>					
Health care visits in total	2.1	5.7	11.1	15.6	8.3
- at doctor's reception	2.0	4.0	4.1	3.1	3.9
- house calls	0.0	0.3	0.9	1.4	0.6
- supervised nursing at home	0.1	1.4	6.1	11.1	3.8
Public health care visits in total	1.2	0.4	0.4	0.3	0.4
<i>Specialised nursing<sup>1)</sup></i>					
Visits in total	0.9	1.1	1.1	0.9	1.1
<b>Private sector</b>					
Doctor-patient contacts	0.7	0.9	1.1	0.8	0.9

<sup>1)</sup> including health centre hospitals directed by specialists

In 1992, the number of examination and treatment visits in the private sector made on personal liability by persons aged 65-74 and persons aged 75-84 was 0.3 on average and for persons over 85 0.2.

In 1992, health centres arranged a total of 8 750 health guidance events aimed at the elderly for groups and the public at large.

Supervised home nursing means nursing of the person in the home, which is arranged by the local health centre. Clients are nursed at home according to a treatment plan and their health is under continuing supervision through house calls agreed on previously. In 1992, the number of client households within the supervised home nursing scheme was 74 000, some 80% of which were elderly households. Elderly persons who were clients of the supervised home nursing system received some 45 house calls by a doctor or nurse during the year. Most of the house calls (78% in 1992) are made to the homes of persons over 75 years of age. There are no statistics on the total number of clients within the supervised home nursing and home service systems.

### *Service centres, day centres and day hospitals*

Service and day centre activities arranged by municipalities have expanded rapidly in the 1990s. The expansion is partly explained by changes that have taken place in the activities of various institutions, for example, some old people's homes have been converted into non-residential day centres. In 1990, the number of service and day centres was 285 and in 1992 441. The total number of places for the elderly in service and day centres was 5 900.

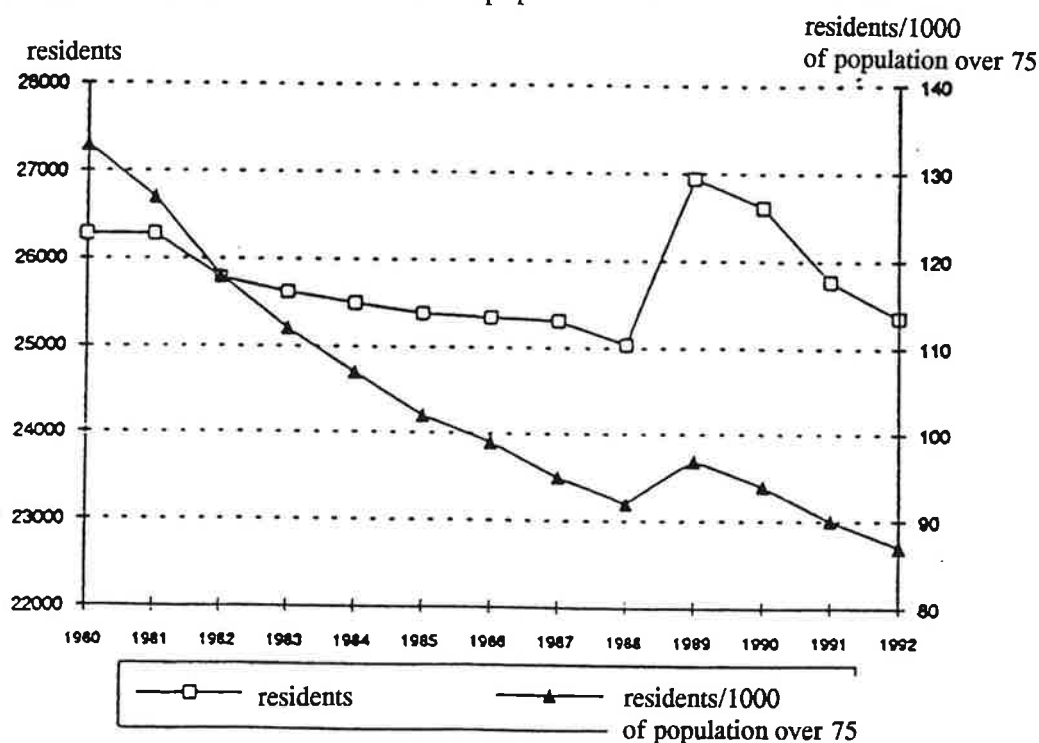
Day hospitals are usually treatment units operating in connection with health centres, where the patient stays one or more days a week. The aim is to maintain and promote the physical capacity of the elderly. Day nursing usually means short-term care in hospital. The number of beds in day sick nursing was in 1980 80, in 1990 884 and in 1992 857. At the close of the 80s, the target was to reserve 3 beds in day hospitals per 1000 residents over 65. The actual number of beds in 1992 nevertheless clearly fell short of the target at 1.2.

### *Old people's homes*

In 1992, the number of old people's homes was 500. A half of the old people's homes were built in the 1950s and a third after the 1970s. In 1992, the number of bed-days in old people's homes amounted to 9 million, which is about one month for each Finnish person over 75.

The number of the elderly in old people's homes owned by municipalities did not change much from the beginning of the 1980s to the year 1992. However, in relation to the population over 75, the number of the elderly in old people's homes decreased significantly. (Figure 1)

Figure 1. The elderly in old people's homes run by municipalities at year end, their total number and number in relation to the population over 75 in 1980-1992.



In 1992, 24 500, or 3.6% of persons over 65 were looked after in old people's homes 24 hours a day. The corresponding figure for those over 75 was 21 360, which is 7.4% of the age group. The proportion of elderly people in old people's homes increased with age, almost one fifth (18.6%) of persons over 85 being in old people's homes. The number of clients looked

after in old people's homes 24 hours a day varied from the 7.9% in Uusimaa province to 10.9% in Lappi province in relation to the population over 75 in the province concerned (Table 13).

Table 12. Persons in old people's homes and their proportion in the population in 1992 (24-hour care).

Age	Number	Per cent	Per cent of age class
- 64	850	3	0,0
65 - 74	3 140	12	0,8
75 - 84	10 870	43	5,2
85 -	10 490	42	18,6
Total	25 350	100	0,5
65 -	24 500	97	3,6
85 -	21 360	85	7,4

Table 13. Persons over 65 in old people's homes (24-hour care) and their number in relation to the population over 75 in the province.

Province	Number	Per cent	Per 100 persons over 75
Uusimaa	4 930	19	7,9
Turku ja Pori	4 740	19	9,8
Häme	3 900	15	9,3
Kymi	1 680	7	7,7
Mikkeli	1 410	6	10,5
Pohjois-Karjala	880	3	8,4
Kuopio	1 280	5	8,5
Keski-Suomi	1 270	5	9,1
Vaasa	2 220	9	7,6
Oulu	2 100	8	10,7
Lappi	940	4	10,9
<b>Finland in total</b>	<b>25 350</b>	<b>100</b>	<b>8,9</b>

A start has been made in developing the care given in old people's homes in such a way that it will become an integral part of the comprehensive social welfare and health service package. Short-term rehabilitation, periodical treatment, shift nursing, and part-time day care have been increased. In 1992, 10% of all old people's home places were short-term and part-day places. Old people's homes also provide a wider range of auxiliary services than before for elderly people living in their own homes.

A long-term institutional care of an elderly person may be postponed, for example, by shift care. The expression shift care means that the person is given 24-hour rehabilitative treatment with the aim of transferring him back to non-institutional care and more intensive home care. The increase in home care increases the need for shift care and other short-term institutional

care to rehabilitate the elderly and to give the family some time off. Table 14 is a summary of places within different forms of care given in old people's homes and the total number of clients cared for by these means in 1992.

Table 14. Number of places for different forms of care in old people's homes and number of elderly people in old people's homes in 1992.

	Number of places	Places per 100 persons over 75	Number of patients during the year	The number of patients per 100 persons over 75
24-hour care - long-term care	25 500	8.8	30 690	10.6
- short-term care	2 040	0.7	18 350	6.3
Day care	710	0.2	3 240	1.1
Night care	70	0.0	120	0.0
<b>Total</b>	<b>28 320</b>	<b>9.8</b>	<b>51 500</b>	<b>17.8</b>

### *Hospital care*

Most hospital care for the elderly is given in health centre hospitals. In 1981, 15 600 patients on average were nursed in health centre hospitals (directed by a GP or a specialist). Of persons over 65, 1.4% were nursed in health centres for more than 3 months.

The closing of wards in old people's homes during the 1980s increased the need for nursing of the elderly in health centre hospitals. According to the 1991 patient statistics, there were 23 800 patients in health centre hospitals (Table 15). Of these 12 580 were patients over 65 nursed in health centre hospitals for more than 3 months, which is 1.8% of the age group (Table 16). A half (48%) of the patients aged 75-84 and six out of ten (61%) patients over 85 had been nursed in a health centre hospital for more than 6 months without a break. One fourth (24%) of patients aged 75-84 and one third (35%) of those over 85 had been patients for more than three years. (Table 15)

Table 15. The number of patients in health centre hospitals and their distribution by age group according to the duration of care in 1991.

Duration of care	Age 0 - 64		65 - 74		75 - 84		85 -		All	
	No.	%	No.	%	No.	%	No.	%	No.	%
less than 3 mths	1 880	65	2000	52	4 270	42	2 060	29	10 220	43
3-5 mths	150	5	290	8	880	9	620	9	1 940	8
6-11 mths	170	6	360	9	1 080	11	800	11	2 420	10
1-2 yrs	170	6	390	10	1 340	13	1 050	15	2 950	12
3 yrs -	520	18	840	22	2 460	24	2 470	35	6 280	26
<b>Total</b>	<b>2 890</b>	<b>100</b>	<b>3 880</b>	<b>100</b>	<b>10 040</b>	<b>100</b>	<b>7 000</b>	<b>100</b>	<b>23 810</b>	<b>100</b>



Table 16. The number of patients over 65 in health centre hospitals and proportion of the population according to age and duration of care in 1991.

Age group	Duration of care less than 3 months, Number	Duration of care less than 3 months, % of age group	Duration of care more than 3 months, Number	Duration of care more than 3 months, % of age group
65 - 74	2 000	0.5	1 880	0.4
75 - 84	4 280	1.8	5 760	2.5
85 -	2 060	3.6	4 940	8.8
65 -	8 340	1.3	12 480	1.8

In 1991, 430 hospital beds in University Central Hospitals, Central Hospitals and regional hospitals (2.4% of all hospital beds) were occupied by patients nursed for more than 30 days. Of the patients, 328 (76%) were over 65 years old, 59% over 75.

Since the late 1980s, geriatric wards have been founded in central hospitals. The aim of these wards is to serve as consultative units for the care of the elderly. At the end of the year 1992, there were 113 geriatric hospital beds in Finland. The total number of care periods during the year was 2 230. The average duration of the care period was 15 days.

The number of hospital beds in psychiatric institutions was reduced substantially in the 1980s. In the early 1980s, 1% of all persons over 65 were in psychiatric institutional care, while in 1991, the corresponding figure was less than half of that, or 0.4%. However, the proportion of psychiatric patients in institutional care increases with age (Table 17). The duration of the care period for elderly people explains the fact that persons aged over 65 use nearly a half (47%) of all bed-days in psychiatric institutional care. The average duration of care periods in total was 1.8 years for persons over 65 (646 bed-days) in 1991.

Table 17. The number of patients in psychiatric institutional care.

Age group	Number/1983	Number/1991	%/1983	%/1991
- 64	10 400	5 780	0,7	0,3
65 - 74	2 790	1 190	1,2	0,5
75 - 84	2 380	1 040	1,5	0,6
85 -	520	320	1,5	0,6
Total	16 070	8 520	0,3	0,2
65 -	5 670	2 540	1,0	0,4

Table 18 shows the number of bed-days in health centre hospitals and specialist medical care by age group in 1992. Persons over 65 used 62% of all bed-days in health centre hospitals and specialist care. Of health centre hospital bed-days, the elderly over 65 used 85% of bed-days. In specialist medical care, the proportion of persons over 65 was 33%.

Table 18. Bed-days in hospital care by age group in 1992

*Health centre hospitals directed by a GP or a specialist*

Age group	Bed-days, million	Bed-days/ person in the age group
- 64	1,2	0,3
65 - 74	1,2	2,9
75 - 84	3,1	13,1
85 -	2,4	40,1
Total	7,8	1,5
65 -	6,6	9,5

*Specialist medical care*

Age group	Bed-days, million	Bed-days/ person in the age group
- 64	4,1	0,9
65 - 74	1,2	2,9
75 - 84	0,8	3,4
85 -	0,1	1,2
Total	6,1	1,2
65 -	2,0	2,9

*Services offered in institutional care**Quantitative growth of institutional care*

One of the targets of old-age policies during the whole 1980s has been to reduce long-term institutional care of the elderly. Long-term care in an institution is seen as the last resort for individual, social and financial reasons. There is a great deal of information from research bearing witness to the fact that elderly persons, like others, prefer living in their own homes and they have the resources to do this. Living in an institution limits the person's independence and social contacts. Furthermore, institutional care is the most expensive form of care.

In 1992, the total number of places and beds in institutions was 85 700, which means there are places and beds for 1.7% of the Finnish population. They are divided as follows:

- beds in public health care institutions directed by a GP           25 000
- beds in public health care institutions directed by a specialist   5 000

- beds in general hospitals giving specialised medical care	18 000
- beds in mental hospitals giving specialised medical care	7 500
- places in institutions for the disabled	5 100
- places in old people's homes run by the municipality	25 100

When care periods of more than 3 months and decisions on permanent institutionalisation are taken as the criteria for long-term care, 41 000 persons of the 47 300 persons in long-term institutional care were 65 years of age or older according to the 1991 client and patient statistics. This means that nearly 6% of the population over 65 were in long-term institutional care. Four fifths of them were elderly women. The average age of patients in old people's homes was 83 years, in health centres 80 years and in mental hospitals 77 years.

The number of persons over 65 in institutional care has not decreased substantially since the beginning of the 1980s. Their proportional share of the elderly population has nevertheless fallen by some 2% because of the growth in the number of the elderly. Most institutional care of the elderly takes place in old people's homes and health centre hospitals.

Table 19. The proportion of the population aged over 65 in institutional care in various countries at the beginning of the 1990s, per cent.

	%		%
Finland	6	Great Britain	4
Denmark	5-6	Germany	5
Sweden	5-6	Greece	<2
The Netherlands	10	Italy	<2
Belgium	4	Portugal	<2
France	6	Spain	<2
Ireland	5		

Although the elderly persons in institutional care are nowadays older and in poorer health than they used to be, not all of them need 24-hour-a-day care in an institution. In 1991, the nursing staff estimated that 4 030 persons in old people's homes and 4 410 patients in health centre hospitals, which is 18% of all patients, were inappropriately placed considering their physical and/or mental condition. The staff of old people's homes usually recommended for these patients service housing (44%), long-term institutional care in another institution (28%) or home care (11%). For patients, for whom the health centre hospital is not an appropriate solution, an old people's home was usually recommended.

Almost one fifth (17%) of the patients aged over 65 in long-term care in old people's homes and in health centre hospitals were estimated to be inappropriately placed. Of these patients, 10% were estimated to need some other kind of institutional care. Some 2 200 in total (5%) of long-term patients in old people's homes and health centres were estimated to be able to live at home or in service housing with the help of various services for the elderly. 1% only were considered to be able to manage at home alone.

Table 20. The most appropriate placing of long-term patients aged over 65 in various institutions according to staff in 1991, per cent.

Placing at time of estimation	The most appropriate placing according to estimation				
	Institutional care, current	Institutional care, other	Home	Service, housing	Part-time inst. care
Old people's home	84	7	1	7	1
Private old people's home	88	8	2	2	0
Health centre hospitals	81	16	1	2	0

In Finland, the duration of institutional care of the elderly in the last phase of their lives is often rather long. However, since the year 1986, the proportion of care periods lasting for less than six months has been on the increase (Table 21). In 1991, the average duration of the care given to patients in health centre hospitals was 1.7 years and the care of clients in old people's homes had lasted about 4.5 years. The corresponding figures for patients who had been in long-term care (more than 3 months) were 2.5 and 4.6 years.

Table 21. Care periods of patients in old people's homes <sup>1)</sup> and in health centre hospitals in 1981, 1986 and 1991, per cent.

Treatment period	Patients in old people's homes			Patients in health centre hospitals			Total		
	1981	1986	1991	1981	1986	1991	1981	1986	1991
- 180 days	10	12	20	52	46	51	24	26	35
181-365 days	9	10	11	12	12	11	10	11	11
1-1,5 yrs	8	9	8	8	8	7	8	8	8
1,6-2 yrs	7	7	8	6	6	6	7	6	6
2,1-2,9 yrs	12	12	12	8	9	8	11	10	10
3-5,9 yrs	21	21	20	10	12	12	17	17	16
6-9,9 yrs	15	13	11	3	4	5	11	9	8
10-14,9 yrs	8	7	5	1	1	1	6	5	3
15-19,9 yrs	4	4	2	0	0	0	3	2	1
20-24,9 yrs	2	2	1	0	0	0	1	1	1
-25 yrs	3	0	2	0	0	0	2	2	1
N. A.	1	1	0	0	3	0	0	2	0
Total	100	100	100	100	100	100	100	100	100
Patients in total	32 080	29 200	26 600	15 600	21 050	23 800	47 680	50 250	50 400

<sup>1)</sup> including old people's homes run by municipalities and private organisations

In order to improve the quality of care given in old people's homes, new ideas have been introduced, for example, a personal nurse system and resident participation. The staff's job profiles, schedules and other routines have also been made looser, the elderly persons' own initiative in recreational activities encouraged and the old people's homes made more homely. Furthermore, various means have been used to improve communication between clients and their families and the surrounding community.

### **B. Services provided by private and public organisations**

So far, commercial, non-subsidised services have not played a significant role in meeting the needs of the elderly. Private services have to some extent been used by elderly people with a good income living in major cities. On the other hand, the work of various voluntary and other organisations and the Evangelical-Lutheran church plays a major part in the social and mental well-being of the elderly and in developing the range of services aimed at them. These organisations run, for example, befriending services and recreation activities as well as coordinating cooperation between services arranged for the elderly and children in public day care.

### **Article 4, para 3**

#### **A. and B. Assistance to the elderly living in institutions and the inspection of these institutions**

Institutional care in Finland includes full upkeep, and the necessary health care services. Most of the institutions are maintained by municipalities and their activities are inspected by provincial governments. Institutions maintained by private or other organisations or foundations are inspected by the local authorities in the municipalities where these institutions are located, and by provincial governments.

#### **C. Rights of the elderly in institutions**

The Act on the Status and Rights of the Patient prescribes the rights the patient has in all health care units, and the right of the patient to make a complaint to the responsible director of the relevant health care unit. The Act also prescribes the right of the patient to make an appeal concerning his hospital care or his treatment during hospital care to the authority supervising health care and medical care in Finland.

If the patient's complaint gives reason to initiate procedures under the Patient Injury Act, the Compensation for Damages Act or the Act on Practising Professions, the staff shall counsel the patient how the matter is to be brought before a competent authority or organ.

The Act on the Status and Rights of the Patient also includes a provision on appointing legally trained patients' ombudsman to a health care unit and on his duties. It also includes provisions on documents concerning patients.

The Social Welfare Act of Finland includes provisions on the implementation of institutional care as an integral part of the social services. According to the Social Welfare Decree, when implementing institutional care, the person concerned shall receive the rehabilitation, treatment and care he needs. The staff shall also aim at creating for the patient a safe, home-like and stimulating environment, which affords him stimuli and privacy, and thus promotes his rehabilitation, initiative and ability to cope on his own.

Institutional care may be arranged in the form of long-term or continuous day or night care or 24-hour care. Institutions may also arrange rehabilitation and activities supporting the ability to live independently for the person concerned.

### **Comments of the Labour Market Organisations:**

The Central Organisation of Finnish Trade Unions and the Confederation of Technical Employee Organisations in Finland have the following comment on Article 1: the privatisation of services and the tendency to transfer nursing work to households represents a threat to women's opportunities in the labour market. Those caring for family members do not have an employment relationship and thus remain outside the scope of employment relationship legislation.

The Central Organisation of Finnish Trade Unions also wishes to draw attention to the government's tendency to favour part-time employment relationships, and it emphasises that the trade unions oppose the policy of promoting part-time work which is against the wishes of the employees and which does not provide a sufficient livelihood.

The Central Organisation of Finnish Trade Unions is concerned about the rapid spread of the sex industry, which has worsened employment relationships, employment security and safety at work especially in the restaurant and catering trade.

As to Article 2, the Central Organisation of Finnish Trade Unions points out the fact that the recession has had an adverse effect on the employment security of shop stewards. In addition, the Organisation underlines that, in small enterprises falling outside the Act on Codetermination in Companies, the employees have no legal means to obtain information about the financial situation of the enterprise or the sufficiency of the work.

As to Article 3, the Central Organisation of Finnish Trade Unions emphasises that the provisions in the Occupational Health Care Act have not been broadened although the EU directives require this.

The Confederation of Unions for Academic Professions in Finland has the following comment on Article 2: Codetermination is implemented in municipalities by means of a special collective agreement. Failure to follow the provisions in this agreement and the Act on the Right of Local Government Officers to Negotiate (389/44), which is still valid for state employees, has resulted in legal appeals made to relevant courts of law. Furthermore, the Parliamentary Ombudsman and the Chancellor of Justice have drawn attention to the matter. In addition, concerning Article 2, the Confederation of Unions for Academic Professions in Finland points out that local government officers have no rights to continue their employment relationships in cases where municipalities are joined or federations of municipalities broken up or dissolved.