

Uruguay⁶⁴⁷

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

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

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

Length of leave (before and after birth)

- 14 weeks: up to 6 weeks can be taken before the birth, 1 week of which must be taken at this time.

Payment. Funding and taxation

- 100 per cent of earnings with no upper limit on payment.
- Payments are not taxed, except for contributions for retirement and social health insurance.
- Funded from general taxation.

Flexibility in use

- None, except for 5 weeks of leave that can be taken before or after birth.

Eligibility

- All female public sector employees.

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

- In the case of premature births with less than 32 weeks of gestation and requiring hospitalisation, both parents (biological or adoptive) are entitled to

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leave for the duration of such hospitalisation, up to a maximum of 60 days. Upon the termination of this license, the usufruct of Maternity or Paternity leave will begin.

- Maternity leave is set at 18 weeks for full-term births when the baby's birth weight is 1.5 kg or less. Regardless of the week of pregnancy in which the birth occurs, if the newborn has a disorder, illness, comorbidity, or condition that, due to its nature or severity, poses a risk or compromises the newborn's life, requiring hospitalization or home treatment, maternity leave may be extended until the child is 6 months old. The maternity leave period will be extended by the same period if the newborn has a disorder, illness, comorbidity, or condition that, while not life-threatening, involves sensory, physical, or intellectual disabilities that require hospitalization or treatment. In such cases, a medical specialist must confirm that the mother's care is necessary or beneficial (Law No. 20212, 2023).

Regional or local variations in leave policy

- None.

Additional note (e.g., if leave payments are supplemented by collective agreements, employer exclusions, or rights to postpone)

- None reported.

a. Maternity leave (private sector) (*Subsidio por maternidad*) (responsibility of Instituto de Seguridad Social)

Length of leave (before and after birth)

- 14 weeks: up to 6 weeks can be taken before the birth.
- It is obligatory to take all the leave.

Payment, funding and taxation

- 100 per cent of earnings with no upper limit on payment. For employees, this is based on average earnings in the 6 months before taking leave. For self-employed workers, this is based on average earnings over the 12 months before taking leave.
- Payments are not taxed, except for contributions for retirement and social health insurance.
- Funded by the social security system, which is financed by contributions and taxes: for sickness and maternity benefits, 3 to 6 per cent of employee earnings and 5 per cent of payroll from employer, plus earmarked proceeds of certain taxes.

Flexibility in use

- Women may postpone the start of Maternity leave (if authorised by their doctor).
- If the birth occurs earlier than 42 days before the due date of delivery, the beginning of the subsidy is modified to the actual day of the baby's birth. The start of postpartum leave is not modified, that is, the original postpartum

leave period is maintained, granting more days of leave.

- If the birth occurs after the due date of delivery, the postpartum leave is extended, considering the number of days of the delay.

Eligibility

- All female employees who contribute to the Social Security Institute (BPS).
- Self-employed workers who are covered by the BPS, with no more than 1 employee.
- Other self-employed workers who are covered by the BPS.

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

- In the case of illness resulting from pregnancy or childbirth, the mother is entitled to an extension of pre- or post-natal leave.
- In the case of full-term births, if the baby's birth weight is 1.5 kg or below, Maternity leave is extended to 18 weeks.
- Maternity leave may be extended until the child turns 6 months in cases when: the new-born presents any disorder, illness, co-morbidity or condition, which due to its nature or severity involves a risk to the life of the new-born; the new-born presents any disorder, illness, co-morbidity or condition that involves sensory, physical or intellectual disabilities; the new-born requires hospitalization or treatment, and a specialist doctor recommends the mother's care.

Regional or local variations in leave policy

- None.

Additional note (e.g., if leave payments are supplemented by collective agreements, employer exclusions, or rights to postpone)

- None reported.

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

Length of leave (before and after birth)

- 10 business days or 20 calendar days according to preference.

Payment, funding and taxation

- 100 per cent of earnings with no upper limit on payment.
- Payments are not taxed, except for contributions for retirement and social health insurance.
- Funded as for Maternity leave.

Flexibility in use

- None.

Eligibility

- All male public sector employees.

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

- In the case of premature births with less than 32 weeks of gestation and requiring hospitalisation, both parents (biological or adoptive) will be entitled to leave for the duration of such hospitalisation, up to a maximum of 60 days. Upon the termination of this period, Maternity or Paternity leave begins.

Regional or local variations in leave policy

- None.

Additional note (e.g., if leave payments are supplemented by collective agreements, employer exclusions, or rights to postpone)

- None reported.

b. Paternity leave (private sector) (*Inactividad Compensada por Paternidad*) (responsibility of the Instituto de Seguridad Social)

Length of leave (before and after birth)

- Employee: 20 continuous days of leave beginning on the day of delivery. The first three days are paid by the company, and the next fourteen are paid by the BPS (Social Security Institute).
- Non-employee: 20 continuous days of leave beginning on the day of delivery (Law 20312, 2024).
- In the case of dependent workers, the right to Paternity leave is mandatory and non-waivable.

Payment, funding and taxation

- 100 per cent of earnings with no upper limit on payment. For employees, this is based on average earnings in the 6 months before taking leave. For self-employed workers, this is based on average earnings over the 12 months before taking leave.
- For employees, the first 3 days are paid by the employer and the next 14 days are paid by the social security system.
- Payments are not taxed, except for contributions for retirement and social health insurance.
- Funded as for Maternity leave.

Flexibility in use

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

Eligibility

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

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

- In cases of multiple births, low birth weight (1.5 kg or less), medically complex births, or premature births, the days payable by the BPS may be extended up to a maximum of 30 consecutive days, as prescribed by the attending physician, as established in Law No. 20,000. This law applies to births as of its entry into force (4 December 2021), as well as to those still receiving the subsidy on that date.
- The parents of stillborn children born more than 20 weeks pregnant or weighing more than 500 grams are entitled to Paternity leave (Law No. 20,377, 2024).

Regional or local variations in leave policy

- None.

Additional note (e.g., if leave payments are supplemented by collective agreements, employer exclusions, or rights to postpone)

- None reported.

c. Parental leave (public sector)

- Public sector workers have a right to Parental leave after the end of Maternity leave, until the baby reaches 6 months of age. This is extended to 9 months of age, in situations where the child's life is at risk or the child has a disability. Mothers and fathers can alternate use of Parental leave, but cannot be on Parental leave at the same time. Mothers or fathers can only

take leave as long as the mother remains economically active or is covered by medical leave.⁶⁴⁸

c. Parental leave (private sector)

Length of leave

- Until the child reaches 6 months.
- Leave must be taken part time; the parent taking leave cannot work more than 4 hours a day.
- Leave is a family entitlement.

Payment, funding and taxation

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

Flexibility in use

- Parents can alternate taking leave in days, weeks or months.
- Leave cannot be taken at the same time by both parents.

Eligibility

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

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

- None.

Regional or local variations in leave policy

- None.

Additional note (e.g., if leave payments are supplemented by collective agreements, employer exclusions, or rights to postpone)

- None reported.

d. Childcare leave or career breaks

No statutory entitlement.

⁶⁴⁸ <https://www.impo.com.uy/bases/leyes/20212-2023>

e. Other family employment-related measures

Adoption leave and pay

- In the case of adoption, workers in both the public and private sector are entitled to a continuous 6 week leave and a reduction of the working day (up to 50 per cent) for 6 months. These leaves may be used by one of the 2 parents from the time the child is placed in the family, while the other parent is then granted 10 working days of leave.

Time off for the care of dependents

No statutory entitlement.

Specific provision for (breast) feeding

- If the worker (public or private) breastfeeds her child, she may interrupt her daily work for that purpose, and has a choice between two 30 minute periods or one period of 1 hour. This time is counted as employment. Her doctor is responsible for determining the duration of these breastfeeding breaks, which may be extended for up to 2 years. Workers are required to present a doctor's certificate to their employer with whom they need to agree on how and when they will use the 1-hour reduction of the working day.

Flexible working for carers

- Mothers in the public sector may work part-time, but only if they are breastfeeding. This lasts according to the baby's needs but usually continues until the baby is 12 months old. The worker must present a medical certificate that confirms she is breastfeeding.
- Civil servants of the Central Administration may work part-time, at least 4 hours per day, when their baby is between 6 and 12 months old. Mothers and fathers are eligible, but reduced hours can be used by only one of the parents.

Time off for antenatal appointments and care

- No information.

Other provisions for leave

- None reported.

2. Relationship between leave policy and early childhood education and care policy

The maximum period of full-time post-natal leave is just under three months, paid at a high rate; part-time unpaid leave can be taken in the private sector until 6 months after childbirth. There is an entitlement to Early Childhood Education and Care (ECEC) once children are four years of age and attendance also becomes obligatory at that age. There is a gap, therefore, of more than three and a half years between the end of well-paid leave and an entitlement to ECEC.

National statistics report that 56.2 per cent of children from birth to 4 years attended ECEC, but attendance is very different according to age: 13.3 per cent for children under the age of 1 year, 38.7 per cent for 1 year-olds, 57 per cent for 2 year-olds, 77.7 per cent for 3 year-olds, and 93 per cent for 4 year-olds.⁶⁴⁹ Moreover, if children who attend 20 hours a week or more, which is equivalent to at least a part-time working day, are considered these figures drop to 2.5 per cent for children under the age of 1 year, 13.8 per cent for 1 year-olds, 42 per cent for 2 year-olds, 70.4 per cent for 3 year-olds and 86.9 per cent for 4 year-olds.

Until 2 years old, most children attend private ECEC centres (funded by families), as public centres are not extended, especially for children under one year of age. From the age of three, public centres are more widely covered.

During the period 2015-2020, within the framework of the implementation of the National Integrated Care System, early childhood education and care services were increased, adding 16,000 new places to the public system. In 2022, there were 78,344 children cared for in public centres, but due to the decrease in births, coverage was 53 per cent of the population between 0 and 3 years old.⁶⁵⁰

No information for ECEC attendance levels in 'relationship between leave and ECEC entitlements' in the [cross-country tables](#) at the front of the review.

3. Changes in policy since April 2025 (including proposals currently under discussion)

No changes reported.

4. Uptake of leave

a. Maternity leave

Data on Maternity leave show a steady increase in the period 2011-2016, from 14,264 users in 2011 to 16,108 users in 2016. However, no significant impact can be observed since the new law, Nr.19161. From 2013, there has been a stability in the number of users (around 16,000): this means that when it comes to the first years of implementation, the new legislation has not involved a significant increase, in comparison to previous years. The new law, with the inclusion of new groups, did not imply substantial changes in the use of Maternity leave – probably because the non-dependent mothers who can use this leave represent a very small

⁶⁴⁹ Own elaboration based on micro data from the Nutrition, Child Development and Health Survey, INE, MIDES, 2018. See: <http://www.ine.gub.uy/web/guest/encuesta-de-nutricion-desarrollo-infantil-y-salud-endis-2018->

⁶⁵⁰ <https://www.gub.uy/sistema-cuidados/comunicacion/publicaciones/memoria-quinquenal-2015-2020;>

<https://www.gub.uy/sistema-cuidados/institucional/informacion-gestion/memorias-anuales/sistema-cuidados-informe-anual-2022;nd> <https://www.gub.uy/sistema-cuidados/comunicacion/publicaciones/memoria-quinquenal-2015-2020>

proportion. In any case, it is interesting to investigate the state's capacities to disseminate and guarantee the rights of these groups.⁶⁵¹

The number of individuals utilising Maternity leave has shown a continuous decline from 2016 to 2025. While in 2016 there were 16,911 users, this number fell to 12,554 in 2020 and to 11,356 in 2025.⁶⁵² It is important to note that also births in Uruguay have decreased over this time period. In 2016 there were 47,058 births, while in 2025 there were 29,903. The reduction of births occurred across all age groups, with the most significant decline observed among women under 24 years old. There has also been a decrease in the adolescent fertility rate (number of births among women aged 15 to 19) in recent years.

A recent policy document published in November 2020⁶⁵³ states that a comprehensive explanation of the recent decline requires not only to consider the factors that converged on the exit from fertility stagnation adolescent, but that it is also necessary to understand reasons and the mechanisms that inclined the rest of women to limit their offspring. The fact that births of three and more children have decreased, whose mothers usually belong to groups of advanced age, suggests that interest in controlling more fertility is not exclusive to women teenagers and very young.

b. Paternity leave

There was a substantial rise in the take-up of Paternity leave up to 2016, from 8,799 in 2014 to 15,862 in 2016 (an increase of 80 per cent). This represents a significant advance for fathers' right to care, at least during the first days of the baby's life.⁶⁵⁴ However, there has subsequently been a decrease, from 15,372 users in 2017 to 11,275 in 2025. Again, this needs to be considered together with the decreased number of births.

c. Parental leave

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

Regarding the evolution in the use of Parental leave, it increased from 6,258 users in 2014 to 9,525 in 2016, signifying an increase of 52 per cent⁶⁵⁵. However, a decrease in users is observed in 2017 and 2018, a slight increase in 2019 and again a decline in 2020 and 2021.⁶⁵⁶

⁶⁵¹ Batthyány, K., Genta, N. and Perrotta, V. (2018) *Uso de licencias parentales y roles de género en el cuidado* [Use of parental leave and gender roles in caregiving]. Departamento de Sociología, FCS-UDELAR, MTSS, SNIC, OIT, ONUMUJERES.

⁶⁵² Own elaboration based on BPS, Social Security Indicators, 2026.

⁶⁵³ Comisión de Expertos en Seguridad Social. NOTA TÉCNICA N°1 Proyección de la Población de Uruguay a 2100. 27 November 2020.

⁶⁵⁴ Batthyány, K., Genta, N. and Perrotta, V. (2018) *Uso de licencias parentales y roles de género en el cuidado* [Use of parental leave and gender roles in caregiving]. Departamento de Sociología, FCS-UDELAR, MTSS, SNIC, OIT, ONUMUJERES.

⁶⁵⁵ Ibid.

⁶⁵⁶ Own calculation based on BPS, Social Security Indicators, 2022.

Between April 2024 and April 2025, there was a decrease of 9.42 per cent. A monthly average of 2,001 (individuals on Parental leave) were recorded in April 2025 and they were 2,035 in April 2026.⁶⁵⁷

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

As observed in international precedents, when either parent is eligible for the benefit, it is normally used by women. In Uruguay, use reflects a rigid gender contract in social representations around childcare. The impact of social representations around childcare is reinforced by the state's strong promotion of exclusive breastfeeding in the first 6 months. National regulations adopted in 2009 (Ministry of Public Health Ordinance 217/09) establish the importance of exclusive nursing in the first 6 months, and supplementary breastfeeding up to the age of 2 years, while defining the obligations of health services in that regard. Such recommendations form part of campaigns conducted by the state and health provider institutions. In other words, the shared use of part-time leave is discouraged by an apparent contradiction: on the one hand, women are advised to breastfeed their children during the first 6 months and, on the other, they are afforded the opportunity to transfer their right to part-time leave to their partners in the same six months.⁶⁵⁸

Results of the *National Parental Leave Survey*, implemented in 2017, showed that men's major reason (72.1 per cent) for not using part-time leave was its overlap with the nursing period. The next most frequent reason given by fathers (6 out of 10) was that they believed the baby is better cared for by mothers. One-third of the men replied that caring for babies in the 1st year of life is the task of mothers.⁶⁵⁹

During 2025, with the new government that took office in March, the Social Dialogue on Social Protection and Care was implemented. It was a national participatory process convened by the Uruguayan Government and coordinated by the Office of Planning and Budget (OPP). It brought together representatives from government institutions, social organizations, academia, social partners, political actors, and citizens to discuss the future of Uruguay's social protection system. The process focused on four main areas: childhood protection, the care system, protection for people during their working lives, and pensions. Regarding care-related leave policies, the final recommendations emphasize the need to strengthen the framework of leave entitlements as part of a broader care system. The document highlights the importance of promoting co-responsibility in caregiving, advancing gender equality, improving the reconciliation of work and

⁶⁵⁷ Social Security Indicators, Social Security Institute (BPS), 2026.

⁶⁵⁸ Batthyány, K. and Perrotta, V. (2018) 'Maternity/paternity and paid employment: progress in and obstacles to the exercise of the right to care in Uruguay', *Journal of the Ministry of Employment and Social Security Economics and Sociology*, Vol. 136. Available at: https://www.academia.edu/37432019/Revista_del_Ministerio_de_Empleo_y_Seguridad_Social.

⁶⁵⁹ Ibid.

family life, and ensuring better conditions for the care of children during their early years. The recommendations are presented as part of a broader strategy aimed at expanding care protections and supporting families throughout the life cycle. These recommendations are expected to be incorporated into a bill that the government will submit to parliament during the current legislative session.

d. Childcare leave and career breaks

No statutory entitlement.

e. Other family-employment related measures

No information available.