

FERTILITY IN FORMERLY SOCIALIST COUNTRIES OF CENTRAL AND EASTERN EUROPE: THE ROLE OF FAMILY POLICIES AFFECTING CHILDBEARING

Co-ordinators: Stuart Basten and Tomas Frejka (University of Oxford)

Collaborators: Liga Abolina (University of Latvia), Anđelko Akrap (University of Zagreb), Ekaterina Antipova (Belarusian State University), Mirjana Bobic (University of Belgrade), Ivan Čipin (University of Zagreb), Liudmila Fakeyeva (Belarusian State University), Ionut Foldes (Babes-Bolyai University), Arjan Gjonca (London School of Economics), Aiva Jasilioniene (MPIDR), Dora Kostova (MPIDR), Irena E.Kotowska (Warsaw School of Economics), Elena von der Lippe (Robert Koch Institute, Berlin), Iryna Kurylo (Mykhailo Ptukha Institute of Demography and Social Research, Kiev), Ausra Maslauskaitė (Demographic Research Centre of Vytautas Magnus University, Kaunas), Julia Mikolai (University of Southampton), Cornelia Muresan (Babes-Bolyai University), Vasic Petar (University of Belgrade), Michaela Potančoková (Vienna Institute of Demography), Tatyana Pronko (UNFPA in Belarus), Mirjana Rasevic (Institute of Social Sciences), Anna Rybińska (Warsaw School of Economics), Luule Sakkeus (Estonian Interuniversity Population Research Centre), Jože Sambt (University of Ljubljana), Tomáš Sobotka (Vienna Institute of Demography), Branislav Sprocha (Slovak Demographic Research Centre), Vlada Stankuniene (Demographic Research Centre of Vytautas Magnus University, Kaunas), Marin Strmota (University of Zagreb), Krzysztof Tymicki (Warsaw School of Economics), Anatoly Vishnevsky (Institute of Demography, Higher School of Economics, State University, Moscow), Sergei Zakharov (Institute of Demography, Higher School of Economics, State University, Moscow), Kryštof Zeman (Vienna Institute of Demography), Peteris Zvidrins (University of Latvia)

INCOMPLETE, PRELIMINARY DRAFT FOR EUROPEAN POPULATION CONFERENCE 2014

PLEASE DO NOT CITE

Still to be completed sections marked in red

1. INTRODUCTION

1.1. THE BROAD HISTORICAL BACKGROUND

The post-World War II history of Central and Eastern Europe (CEE) has been strongly divergent from that seen elsewhere in the continent in terms of being characterised by authoritarian and centrally planned economic regimes. Not only has the economic, social and political structure of CEE countries been generally divergent from other European settings, but these countries also generally followed a different demographic pathway – in particular as concerned fertility. During the late 1960s, 1970s and 1980s as fertility was declining in the remainder of Europe and approaching below replacement levels, fertility in CEE was quite stable and above replacement.

After the collapse of state socialism at the turn of the 1990s, the institutional transition towards economies and political structures more closely resembling other European societies, in part driven by a growing number of Central and East European countries joining, or planning to join, the European Union, developed rapidly. In other words, despite great heterogeneity and numerous exceptions, as the countries of CEE generally make a transition towards open, market-based, capitalist economies, so too are economic, political and social institutions developing closer degrees of similarity to systems prevalent elsewhere in Europe (Ekiert & Hanson, 2003). The societal changes taking place in CEE during the 1990s immediately triggered rapid demographic changes, in particular in childbearing behaviour. Marriages and births were being postponed together with a decline of cohort fertility. Throughout the region of the formerly socialist countries of CEE fertility declined below replacement. Experience with the possible consequences of such fertility levels for individual countries in this region is scarce. Notably, CEE is the only region in the world where in the majority of countries population size has been declining in recent years in part due to low fertility. Moreover, in the context of population ageing and shrinking labour forces, in some countries exacerbated by high levels of out-migration, many governments both among the CEE countries and in some other fertility regimes in Europe are turning their attention towards policies which could directly, or indirectly, impact upon fertility levels.

It was felt that now was a suitable time to reflect upon the likelihood of reversing recent trends of declining cohort fertility in CEE, paying special attention to the effect of policy measures. While some country-level studies of fertility in CEE have been performed (e.g. various chapters in Frejka et al. 2008), and some synthesis articles of childbearing patterns in the region have also been written (e.g. Sobotka 2011), relatively few attempts have been made to examine recent fertility trends in the CEE region in a holistic manner.

1.2. THE LAUNCHING OF AN INTERNATIONAL COLLABORATIVE PROJECT TO ANALYSE CURRENT AND EXPLORE LIKELY FUTURE FERTILITY TRENDS IN COUNTRIES OF CENTRAL AND EASTERN EUROPE

The project *Prospects for a fertility increase in the formerly socialist countries of Central and Eastern Europe* (CEE) is a collaborative undertaking of scholars from 18 CEE countries conducted under the aegis of the *Department of Social Policy and Intervention, University of Oxford, UK*.

The project has the following mutually complementing goals:

- A. The principal goal of the project is to outline likely directions of cohort fertility trends for the coming decade or so in individual CEE countries and possibly for the entire region. Is fertility likely to decline further, stabilize or increase? To this end the project will conduct analyses of fertility trends and important conditions affecting them with a distinct focus on family and population policies.
- B. The project will provide an overview of past and present efforts to affect fertility trends in CEE, and evaluate the extent to which population and family policies have been effective in raising cohort fertility, in the past and at present.

The participating countries and the personnel working on the project are listed in Appendix 1. Project personnel are scholars employed at academic or research institutions, as a rule in the respective countries, exceptionally at international institutions with close ties to the country concerned. Country personnel assemble and analyse data and information for the respective country, and collaborate with project coordinators in preparing project-wide documents.

1.3. PLAN OF THIS PAPER

1.3.1. A road map

In his seminal 1974 overview of *Population Policies in Developed Countries*, Bernard Berelson asserted that ‘Each country reviews its own situation in the light of its own history and tradition, its own values and operating procedures, and determines its position accordingly. Thus the whole issue of population, already complicated in its very nature, becomes involved in a range of economic and social concerns of national importance and becomes progressively decided in that light’ (Berelson, 1974, p. 771). However, Berelson did observe that the fundamental elements of population change ‘are the same everywhere and hence give rise to similar perceptions, problems and reactions’ (Berelson, 1974, p. 771).

In this paper, we follow the ‘spirit’ of Berelson by trying to elucidate both individual country-level strategies/trajectories as well as identifying commonalities in the ‘bases of concern’ regarding demographic change in the former socialist countries of Central and Eastern Europe as well as, in his words, the ‘courses of action’.

In order to adequately present and understand the ‘bases of concern’, namely the presently low fertility found across the former Socialist countries of Central and Eastern Europe, it is necessary to demonstrate overall patterns and trends in fertility in the region and then try to define the contextual background. These overall trends were presented in an accompanying paper and first output of this project, which was presented at the 2014 *Population Association of America Annual Meeting* (Frejka & Basten, 2014). In this paper, therefore, we present only a brief overview of these trends. We will then continue with a brief macro-historical discussion of the reproductive pattern of these countries under the previous state-socialist regime, followed by a more in-depth analysis of recent histories of the post-transitional era.

We then go on to identify how these patterns of low fertility have been translated into ‘bases of concern’ for national governments in the region, and try to examine how fertility has been used in the discourse of population and family policy. In this section, again in the spirit of Berelson, we try to identify the extent to which commonalities exist across the region, or whether there are emergent ‘typologies’ of population and family policy.

Finally, through detailed demographic analysis of certain countries, we will attempt to examine the extent to which particular population or family policies may, independently of broader contextual factors, had any particular impact upon some aspect of fertility or childbearing. Of course, any such assertion would be grounded in a series of caveats and would only be indicative rather than implying any concretely ‘provable’ causal link backed up by complex statistical or econometric modelling.

We conclude with thoughts from elsewhere in Europe, and other low fertility settings, and consider possible likely future directions in population and family policy in the region.

1.3.2. Defining regions

The presentation and analysis in this paper concerns eight ‘regions’ of European countries. Four of these comprise Central and Eastern Europe and the other four are often referred to as West European populations or societies¹. Central and Eastern Europe consists of ‘Central’ Europe, ‘South-Eastern’ Europe, the ‘Baltic States’ and ‘Eastern’ Europe. The West European populations consist of ‘Northern’ Europe, ‘Western’ Europe, the German-speaking countries, and ‘Southern’ Europe. The basic criterion for including countries into these regions is geographic, while historical, linguistic, cultural, economic, political and other ones also played a role. A consensus has developed to use these regions (and variations thereof) in the analytical demographic literature of the recent past (see e.g. Sobotka 2011). The following countries are included in our investigation²:

- *Central Europe*: Croatia, the Czech Republic, Hungary, Poland, Slovakia, Slovenia.
- *South-Eastern Europe*: Albania, Bosnia and Herzegovina (not covered in this paper), Bulgaria, Moldova (not covered in this paper), Montenegro, Romania, Serbia.

¹ The term ‘Western Europe’ is often used loosely in a broad sense, especially in a political discourse, to comprise all West European societies, or in the narrower sense as in this and other studies. This can be confusing, but tends to be clear within the respective context.

² Some relatively small countries or those with a lack of available data have been omitted.

- *Baltic States*: Estonia, Latvia, Lithuania.
- *Eastern Europe*: Belarus, the Russian Federation, Ukraine.
- *Northern Europe*: Denmark, Finland, Norway, Sweden.
- *Western Europe*: Belgium, France, the Netherlands, the United Kingdom.
- *German-speaking countries*: Austria, Germany, Switzerland.
- *Southern Europe*: Greece, Italy, Portugal, Spain.

1.3.3. Quantitative data

As part of the project, country-collaborators were asked to populate an Excel workbook of quantitative data pertaining to fertility and childbearing trends. In particular, this included the gathering of data relating to period and cohort TFR, period and cohort mean age of birth, age-specific fertility rates by birth order (and for all birth orders combined) and projected TFR assumptions, as well as population projections, information on fertility intentions and basic migration figures. The principal source of data regarding the childbearing elements of this was, for many countries, the *Human Fertility Database* (HFD³). However, to a greater or lesser degree by country, data were also acquired from national statistical offices. Finally, these data have been complemented by evidence from the *Eurostat Statistics Database - Fertility Indicators*.

1.3.4. A note on measurements

A principal issue pertaining to fertility indicators is how to use them to measure change, i.e. a decline, increase or stability of fertility. The reliable way to do that is to use cohort fertility data. In this case, however, one is confronted with the issue of timeliness. Even if one uses a cumulated cohort fertility rate at age 40 (CCFR 40) rather than the CTFR this provides information about fertility change that occurred several years ago. For instance, CCFRs 40 calculated in 2010 for birth cohorts 1965-1970 will inform about real fertility trends approximately in 1990-2000 when these women were in their prime childbearing years. In other words, conclusive evidence of real fertility change can be obtained only with about a 10 to 20 year time lag. On the other hand, the advantage of CCFR 40 is that its value tends to be only marginally lower than the respective CTFR and, equally importantly, a series of CCFRs at age 40 illustrates the direction of change accurately.

To obtain an impression of up-to-date information about recent quantum fertility trends, one may resort to A. *cohort fertility projections*, or to B. *utilizing period fertility rates* even though these are at risk of being tainted by a timing effect, i.e. they might be inflated when fertility is being advanced, or deflated when childbearing is being postponed. All one really wants to know in the context of the present project is whether cohort fertility is being significantly raised as a result of policy measures designed to increase fertility. Prior to briefly describing the procedures it is worth noting that it is advisable to use several of these as complements in each particular country of interest.

A. Cohort fertility projections.

- a. Myskylä et al. (2013) developed a method to forecast cohort total fertility rates essentially by using real fertility rates up to a certain age, at least up to age 30, and then estimating fertility of the remaining ages. In this paper the authors predicted cohort fertility for birth cohorts 1966 to 1979 for 37 developed countries.
- b. Frejka and Zakharov (2013) used a similar principle for the Russian population taking actual children born by 2011 for successive birth cohorts (1955-59 to 1980-84) and assuming additional births would be born applying age-specific fertility rates for the missing ages to be 10 or 20 per cent higher than in previous cohorts, respectively.

B. Utilizing period fertility rates.

³ The HFD is a joint project of the Max Planck Institute for Demographic Research (MPIDR) in Rostock, Germany and the Vienna Institute of Demography (VID) in Vienna, Austria, based at MPIDR.

- a. A number of methods to calculate adjusted total fertility rates (AdjTFRs) have been developed, initially by Bongaarts and Feeney (1998) and more recently by Bongaarts and Sobotka (2012). The adjusted TFRs are designed to eliminate the effect of the timing shifts in childbearing. The levels of the adjusted TFRs tend to come close to eventual total cohort fertility rates. Thus a considerable rise in adjusted TFRs for several years, probably five or more, is likely to indicate a real (cohort) fertility increase. The relatively long time series is considered advisable because the adjusted TFRs are not accurate in depicting trends as they are based on period data.
- b. One can take a time series of several years of period total fertility rates (PTFRs) and if following the initial increase, say of five years, the TFRs start to slacken off, this is an indication that cohort fertility may not have increased (see Frejka and Zakharov (2013), Table 2 for an example).

1.3.5. Qualitative data

A key element of the project was to elicit a comprehensive body of information regarding the societal context of fertility in individual countries in CEE as well as data on population and family policy strategies and their current implementation.

A number of existing databases allow for both the comparative calculation of family policy expenditure as well as cash benefits, maternity, paternity and childcare leave allowances. The two most notable ones are the *Comparative Family Policy Database* and the OECD's *Family Support Calculator* (Gauthier, 2011; OECD, 2014). Some evidence can be found on broad social expenditure relating to 'families/children' in the EUROSTAT *Social Protection* database [ESSPROS] (Eurostat, 2014). In addition to this, an international project, *the Population Policy Acceptance Study* recently set out to define the parameters of European population policies and examine how these interacted with the general electorate (Höhn, Avramov, & Kotowska, 2008). These resources feature both in this paper and will be instrumental in underpinning much of the output of the project. However, we felt it was necessary to try to elicit further information regarding population and family policies across CEE for two distinct reasons. Firstly, as Table 1 demonstrates, these three important databases do not have a universal, comparative coverage across all CEE countries. Indeed, the *Family Policy Database* (not listed in Table 1) does not contain any information from CEE countries.

Table 1: Coverage of OECD Family Support Calculator, EUROSTAT Social Protection Database [ESSPROS] and Population Policy Acceptance Study

	<i>OECD Family Support Calculator</i>	<i>ESSPROS (only exp. For family/children function)</i>	<i>Population Policy Acceptance Study</i>
Albania			
Belarus			
Bulgaria		X (from 2005)	
Croatia		X (from 2008)	
Czech Republic	X	X (from 2005)	X
Estonia	X	X (from 1999)	X
Hungary	X	X (from 1999)	X
Kosovo			
Latvia		X (from 1997)	
Lithuania		X (from 1996)	X
Montenegro			
Poland	X	X (from 2000)	X
Romania			X
Russia			
Serbia		X (from 2010)	
Slovakia	X	X (from 1995)	

Slovenia	X	X (from 1996)	X
Ukraine			

Sources: (Eurostat, 2014; Höhn et al., 2008; OECD, 2014)

A second important reason to elicit further data lies in the need to have a deeper understanding of the types of family policies and expenditures, their restrictions and coverage, and how these change over time – and how this change is linked to shifts in political, economic and other social contexts. For example, the data from *ESSPROS* only presents an aggregate view of expenditure on children and families expressed as euros per person. While this can be indicative in providing net shifts in budgetary priorities, it tells us relatively little about the nature or form of these expenditures.

In this vein, country-collaborators – defined as some of the leading experts in demography and family policy in their respective countries – were asked to populate a *qualitative* template of information relating to population issues and policy. In particular, country-collaborators were asked to provide (a) a concise history of family policy measures; (b) details of documents dealing with concerns for fertility levels and documentation describing recent pronatalist measures adopted by governments; (c) an outline of scholarly literature analysing fertility trends, including analyses of past and present policy measures intended to alter childbearing behaviour; (d) principal representative materials from the media dealing with fertility trends and evaluating the implementation of policies and (e) a concise discussion of trends in fertility preferences. In addition, country-collaborators were asked for their views and/or analyses on the role of changing societal contexts on fertility development in their countries. This could include political stability, economic growth, gender relations, unemployment, prospects for the young or any other relevant theme.

Appendix 2 of this paper forms the main empirical contribution of this part of the project. Using the qualitative templates and other sources, we sought to try to harmonise the evidence received and produce country-level overviews divided broadly into four general sections: (a) societal conditions affecting fertility; (b) family (and population) policy strategy; (c) specific (particularly contemporary) family policy measures and (d) specific trends in fertility. Throughout the main body of the paper we try to synthesise and draw out examples from these countries while constantly referring to the Appendix.

With this information, we feel more strongly equipped to identify both the quantitative and *qualitative* similarities and differences in population and family policy in CEE countries not just in terms of simple expenditures or systems, but also in terms of how they fit into variously constructed dialogues relating to low fertility. By linking these to structural shifts in political and economic context, we should then be in a better position to both identify typologies of family/population policy regimes in the region. Furthermore, by triangulating to the detailed demographic data from the quantitative templates we may be better positioned to identify any relationships between changes in family/population policy and a demographic outcome above and beyond a simple ‘expenditure up, birth rate up’ view of policy levers.

Finally, in the finished paper, we hope to be able to provide a state-of-the art, comprehensive overview of current family and population policies in all CEE countries as well as their recent trends. This will be a significant addition to the scholarly literature on the field.

2. RECENT TRENDS IN CHILDBEARING IN CEE, AND THEIR SOCIETAL CONTEXT

2.1. INTRODUCTION

The first paper emanating from this project was presented at the 2014 Population Association of America Annual meeting (Frejka & Basten, 2014). The goal of that paper was to present an overview of the most important fertility developments of the recent past and to establish whether certain fertility trends in CEE such as those of period and cohort total fertility rates [PTFR, CTFR], mean ages at childbirth and age patterns of fertility are starting to resemble other fertility regimes in Europe. In this section, we briefly outline the findings of the paper which was designed to serve as a background document for this present paper concerning family and population policy.

2.2. A CONCISE OVERVIEW OF FERTILITY IN CEE

2.2.1. Fertility under state-socialist systems

In the 1950s, there was a significant level of heterogeneity between the socialist countries of Central and Eastern Europe. Looking at period TFR alone, Latvia and Estonia already had some of the lowest fertility rates in Europe, already around – or below – replacement levels. On the contrary, the southern areas of the Former Yugoslavia – Bosnia and Herzegovina, FYR Macedonia and Montenegro all had TFRs above 4.0. Albania was already an outlier among the CEE countries, with TFRs in the 1950s of over 6.0 births per woman. However, during the period 1945-1970, a convergence towards a relatively uniform system of reproductive behaviour gradually developed based around a strong two-child family preference, universal and early marriage and low levels of childlessness, especially in the 1980s (Stankūnienė and Maslauskaitė 2008). While some differences did exist – not least within the former Yugoslavia – this ‘Eastern European Reproductive Pattern’ was seen both *across* countries and across different social groups *within* countries. This ‘reproductive pattern’ was closely linked to broader family patterns driven by: universal education and employment; the rhetoric of an egalitarian ideology; diminishing importance of private property lowering barriers to marriage; rapid secularization; high rates of women’s labor force participation and high divorce rates (Sobotka 2011, 253). The ‘reproductive health’ landscape was also subject to shifts and differential accessibility. A combination of an ‘abortion culture’ with low uptake of the contraceptive pill in almost all of CEE led to many unwanted and mistimed pregnancies. At times government policy reacted by restricting access to abortion and family planning services with Romania in 1966 being the most notorious case. In combination with social and family policies typically including maternity leaves, birth allowances, expansion of childcare institutions and housing construction, often enacted within a pronatalist agenda, tended to generate short-lived baby booms (Sobotka 2011, 254).

This ‘Eastern European Reproductive Pattern’ remained in the ascendancy during the 1970s and 1980s, in stark contrast to the evolving patterns associated with the ‘Second Demographic Transition’ [SDT] seen in North- and Western-Europe over the same period (R. J. Lesthaeghe, 1995). This difference was especially notable in early vs. late marriage and childbearing, almost universal childbearing in CEE, childbearing outside of marriage and cohabitation (see Sobotka 2011, Table 1, 255). Despite this overall stability in the socialist countries of Central and Eastern Europe, there were some signs of gradual changes – some of which can be identified with those seen in North- and Western-Europe over the same period, but with a number of differences in terms of intensity and timing. For example, the spread of divorce and non-marital cohabitation did not lag behind Northern- and Western Europe in several CEE socialist countries while some other features (postponement of childbearing, sub-replacement fertility) did not develop (Council of Europe 2006; Katus et al. 2007; Puur et al. 2012). Indeed, to account for this heterogeneity, Lesthaeghe (2010: 225-226) has introduced a concept of types/subnarratives of the SDT which has been extended to CEE in Puur et al. (2012).

2.2.2. Post-transitional fertility change

In the 1990s and 2000s, however, fertility in CEE has been generally characterized by a collapse followed by a moderate recovery in some countries. The initial collapse – most spectacularly in Eastern Germany – is characterized by Sobotka as a temporary ‘freeze’ on births, marriages and divorce as a rational response to both opportunities and challenges driven through huge economic and social upheaval (Conrad et al. 1996; Goldstein and Kreyenfeld 2011). By the early 2000s, the ‘lowest-low’ rates of period fertility became near universal in CEE (Kohler et al. 2005; Goldstein et al. 2009) – even if it did only last for just a few years in some countries. In CEE during the 1990s, the ‘postponement transition’ – to fertility at older ages – constituted the most important factor in shaping period fertility rates. The shift from the notable uniformity of early childbearing patterns to later ages in some of these countries was remarkable – in Slovenia the mean age at first birth in 1988 was 23.2 years rose to 28.2 years by 2008. Yet in this, and in many other trends, change was highly uneven. Take, for example, births outside of marriage, which were (with the exception of Estonia, Eastern Germany and Slovenia) rare before 1990. By the end of the 2000s, such births accounted for around 60% of all births in East Germany and Estonia (up from 1990 rates of 30% and 27% respectively), over 50% in Bulgaria (up from 9% in 1990), and around 40% in the Czech Republic and Hungary – meanwhile much lower increases were seen in Poland and Croatia – with the latter having one of the lowest shares of such births within Europe (Sobotka 2011, 264). Over the same period, marriages were generally postponed, modern contraceptive prevalence increased and abortion rates decreased. Sometimes, as in the case of Poland, these decreases in abortion rates were driven by increased restrictions imposed by the state (Kulczycki, 1995). In essence, an increased diversity between the CEE countries re-emerged (Sobotka 2003).

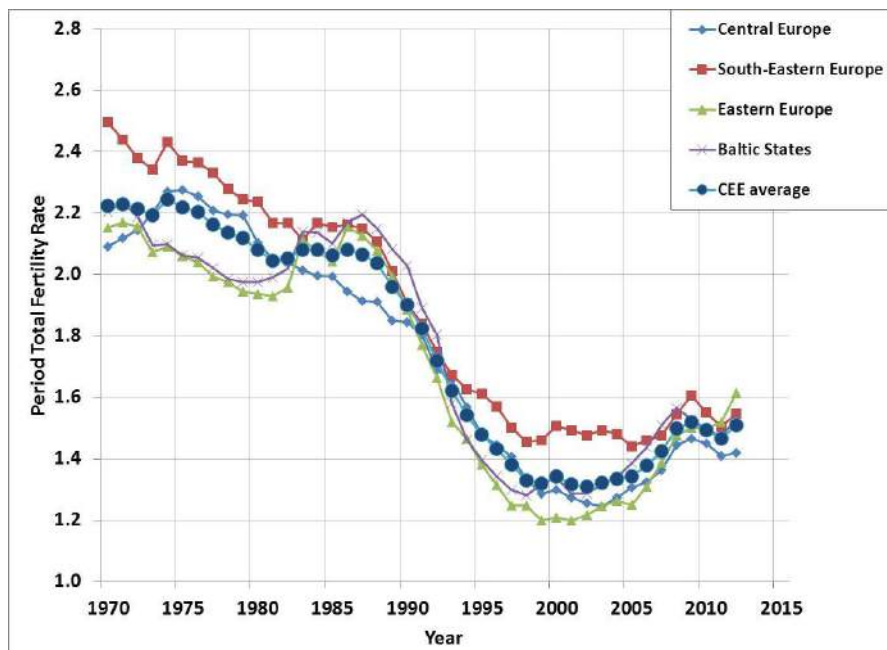
During the 2000s, these trends generally continued (albeit to a less intense degree) with two important differences. Firstly, an increasingly marked ‘recuperation’ of births occurred at older ages which has played a significant role in switching the direction of period fertility rates (Goldstein et al. 2009). Secondly, increased heterogeneity by social status can be observed – particularly in relation to education, with more highly educated women and men postponing union formation and childbearing to older ages while those of a lower educational status beginning their family formation at an earlier age – in contrast to earlier uniformity (Kantorová 2004; Sobotka 2011). As of the early 2010s, while the main feature all CEE countries share is low period fertility rates, Sobotka (2011, 286) suggests that “after two decades of intensive changes, reproductive behaviour in [Central and Eastern Europe] is still in flux”.

2.3. MACRO-LEVEL MEASUREMENTS OF FERTILITY ACROSS CEE COUNTRIES: ANY PATTERNS OF CONVERGENCE WITH OTHER EUROPEAN REGIONS?

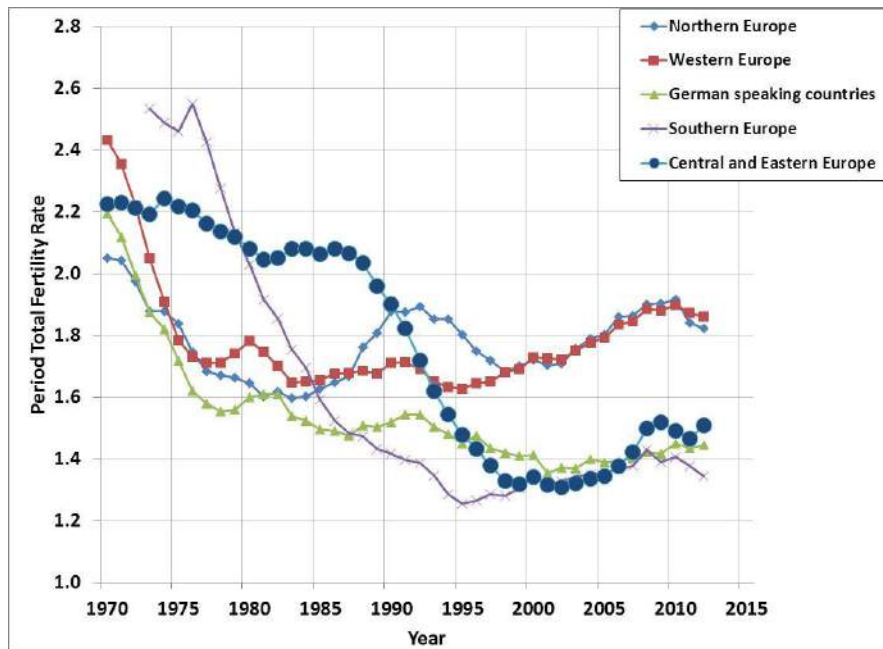
As of the early 2010s, most CEE populations have PTFRs in the range of 1.4 – 1.6 births per woman and an average of around 1.5 (Figure 1). PTFRs in other European countries are in two clusters: in Northern and Western Europe PTFRs were around 1.8 - 2.0 with an average of close to 1.9. In a second cluster, PTFRs were between 1.3 and 1.5 births per woman. These are the German-speaking countries and those of Southern Europe with an average PTFR close to 1.4 births per woman. In reality the period fertility levels in the CEE countries have been becoming increasingly similar to those of Southern Europe and the German-speaking countries.

Figure 1: Period total fertility rates, Central and Eastern Europe, Northern, Western, Southern Europe and German-speaking countries, 1970-2012

A. Central and Eastern Europe



B. CEE and other European regions



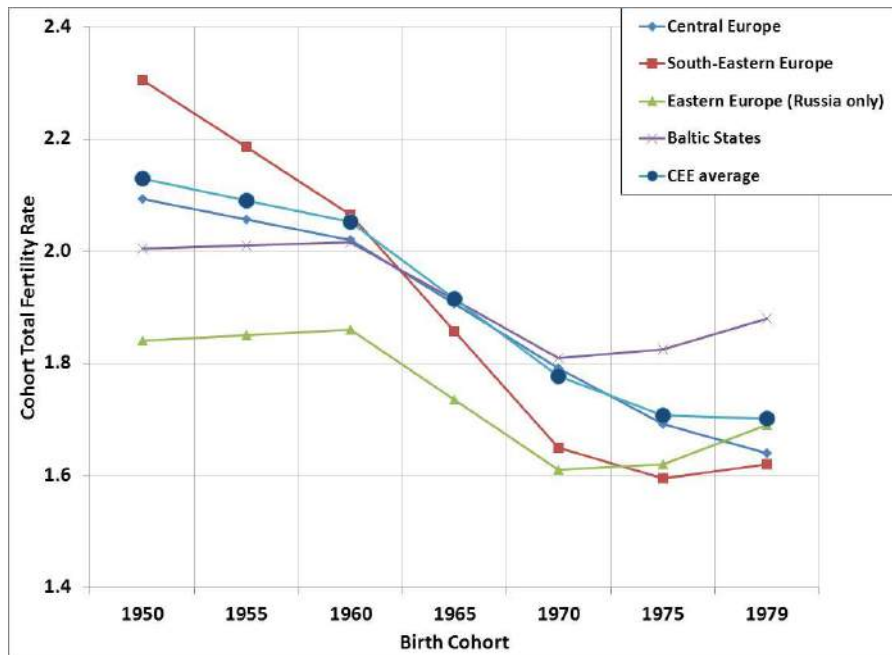
Sources: HFD & Eurostat, 2014

Note: Cf. Appendix Tables 1 and 2 in (Frejka & Basten, 2014)

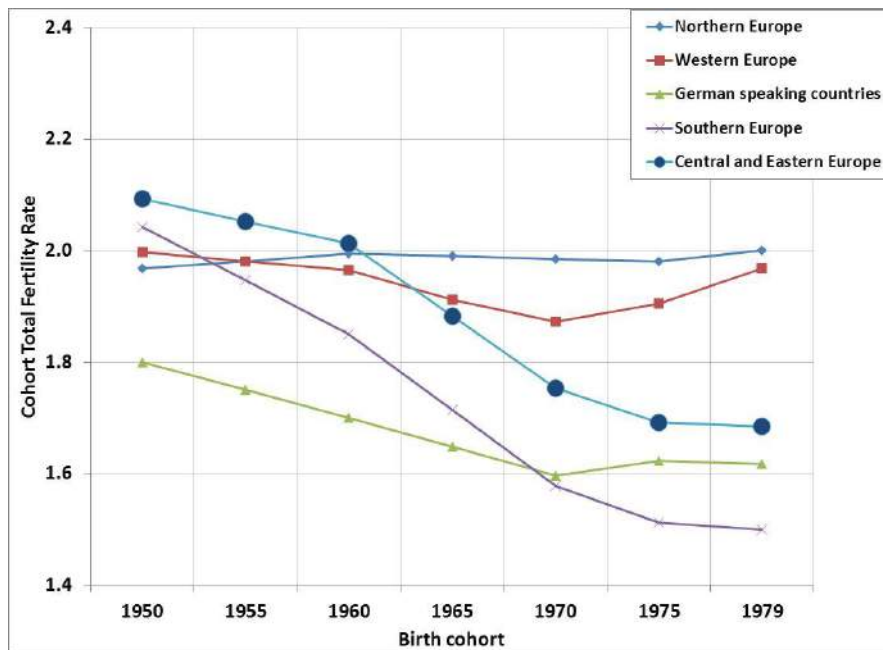
Not surprisingly, similarities in cohort fertility rates are developing as well. The range of the cohort total fertility rates in CEE among the birth cohorts of the late 1970s is estimated to be around 1.5 – 1.9 births per woman (Myrskylä et al. 2013) with an average of close to 1.7 births per woman (Figure 2). Western CTFRs are again in two clusters; 1.4 – 1.7 in Southern Europe and the German-speaking countries with estimated CTFRs of 1.5 and 1.6 births per woman, respectively. The range for the CTFRs of Northern and Western (narrowly defined) Europe is 1.8 – 2.1 (Myrskylä et al. 2013) with estimated averages of close to 2.0 births per woman.

Figure 2: Actual and forecasted cohort total fertility rates, Central and Eastern Europe, Northern, Western, Southern Europe and German-speaking countries Europe, birth cohorts 1950, 1955 (interpolated), 1960, 1965 (interpolated), 1970, 1975 and 1979.

A. Central and Eastern Europe



B. CEE and other European regions



Source: (Myrskylä, Goldstein, & Cheng, 2013)

Therefore, despite a great deal of variation, it is possible to state that in terms of total period and cohort fertility levels the CEE countries do appear to be developing strong similarities to the German-speaking countries and the countries of Southern Europe.

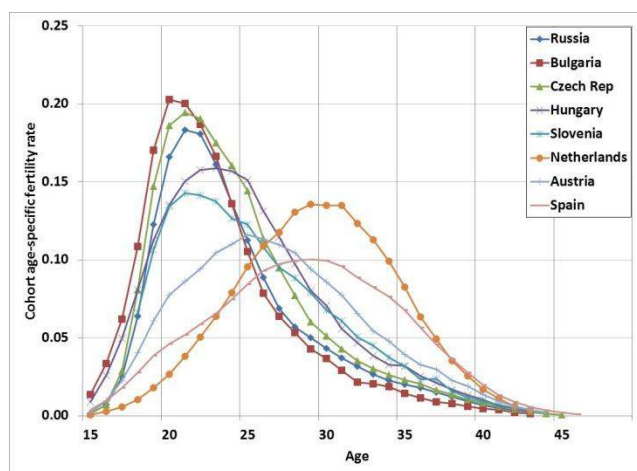
To the extent that information is available, parity data reflect fertility levels and trends. Shares of low parity women, i.e. zero and one, were growing in CEE countries and were relatively stable in other European regions. In particular, shares of women with one child were increasing faster in the CEE countries compared to West European populations among women of the 1960s birth cohorts. In Bulgaria and Romania, for instance, these shares were reaching around 40 percent among the early 1970s birth cohorts.

Interestingly, some similarities are emerging with regard to childbearing patterns. As the period mean ages of women at first birth (PMAFB) for the CEE populations have been increasing faster than earlier in other European regions, the PMAFB in a number of the CEE populations around 2010 came close to the average of 29 years of age for the latter. In 2012 the PMAFB for Slovenia was 28.5 years of age and for the Czech Republic it was 27.9 years. The increases in the mean ages at first birth are likely to continue in CEE populations and some may soon catch up with other European fertility regimes. Despite this, there are still important differences in PMAFB within Europe. In 2012 the PMAFB was below 26 years in Bulgaria, Romania, Belarus, and Ukraine compared to 29 or above in Netherlands, Denmark, Sweden, Greece and Spain.

It also appears that cohort age patterns of childbearing among many CEE countries might be drawing closer to other European fertility regimes (Figure 3). In this figure the progress of cohort age patterns of childbearing for Russia, Bulgaria and the Czech Republic as well as Hungary and Slovenia⁴ are depicted in the 1965, 1975 and 1985 cohorts with the respective patterns for the Netherlands, Austria and Spain serving as a base for comparison. The 1965 cohort in all the CEE countries have young age patterns of childbearing with peak ages of 20 and 21, exceptionally Hungary has the peak age of 23, whereas the Netherlands and Spain already have late cohort childbearing patterns with peaks at ages 29-30 with Austria in between with a peak age of 26 (Figure 3). Panel B in Figure 3 for the 1975 birth cohort requires a close examination which illustrates that the age pattern for Russia and Bulgaria has remained young with a peak age of 20. The peak ages for the Czech Republic, Hungary and Slovenia have all shifted distinctly to the right to a peak around age 29 (Figure 3, Panel B). Finally, for the 1985 birth cohorts (Figure 3, Panel C) the known parts of the cohort age patterns of childbearing in the Czech Republic, Hungary and Slovenia are very similar to those of the Netherlands, Austria and Spain. On the other hand, childbearing patterns in Russia and Bulgaria continue to be relatively young and very different from those of the other countries. While these observations are quite reliable, caution is nonetheless advised because these are data only for young women whose proportions of overall births are small and diminishing.

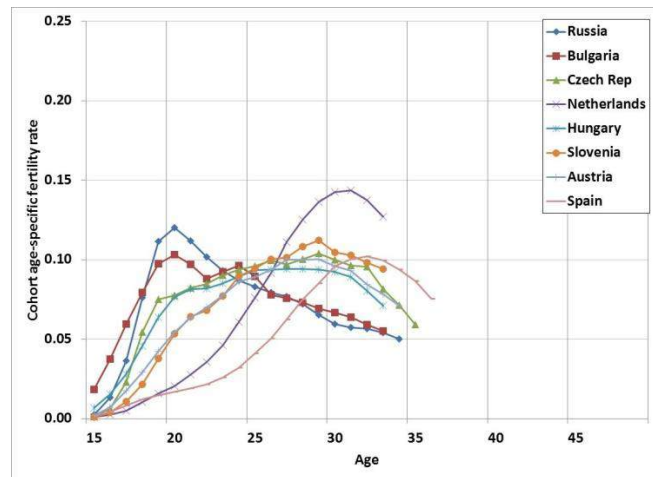
Figure 3: Cohort Age Specific Fertility Rates, Russia, Bulgaria, Czech Republic, Hungary, Slovenia, Netherlands, Austria and Spain, birth cohorts 1965, 1975, and 1985

A – 1965 cohort

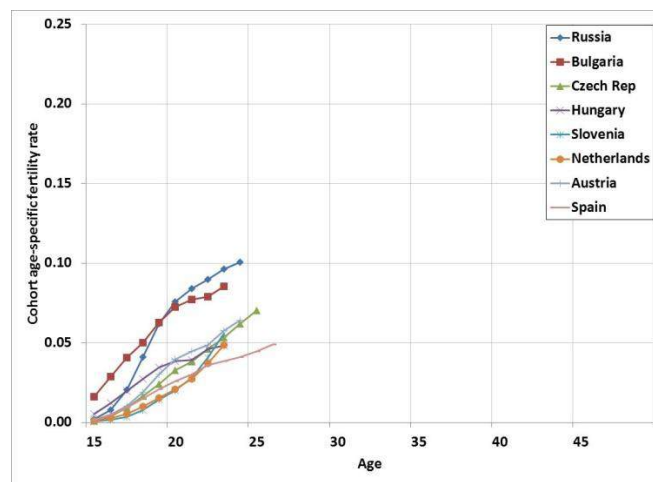


B – 1975 cohort

⁴ Two CEE countries had to be added in this particular analysis to demonstrate representative changes in cohort age patterns of childbearing.



C – 1985 cohort



Source: HFD 2014

In sum, the data demonstrate that the childbearing postponement transition has progressed rapidly in many CEE countries and age patterns of cohort fertility in most of these countries have become “older” and are displaying similarities to other European fertility regimes, notably those in Southern Europe and the German-speaking countries. Levels of period and cohort fertility in CEE countries have also changed rapidly in the past 20-25 years. These have declined from around replacement levels before 1990 to levels that in the early 2010s are 20 to almost 30 percent below replacement.

2.4. THE SOCIETAL CONTEXT OF CHILDBEARING IN THE POST-TRANSITIONAL ERA

During the four decades of state socialism prior to 1990 societal conditions in the authoritarian and centrally planned regimes had developed an environment that was favourable for early and relatively high rates of childbearing. When these regimes collapsed in 1989-91, the entire societal and institutional system was transformed. Incentives and constraints related to childbearing started to change and were being replaced by new societal conditions similar to those in Western societies. A full-fledged transition to capitalist political, social and economic conditions ensued. The political environment was no longer dominated by the unlimited power of the communist party and its bureaucracy. Multi-party systems began to function with varied success. Conditions in the labour market changed as enterprises became concerned with productivity and profitability. Employment was no longer guaranteed and job security diminished. Employment conditions became

particularly difficult for women. Demand for highly qualified positions increased, which required a well-educated work force. Institutions of higher learning expanded, as did tertiary and secondary school enrolment rates. Professional and leisure time opportunities became more varied, and young people were taking advantage of them. Many of the entitlements of the previous socialist welfare state were curtailed or disappeared. Modern contraceptives became more readily available, and, for the most part, access to induced abortion was retained. Family formation and childbearing patterns adjusted to the changing societal environment. Exit from the parental home, union formation and childbearing were being postponed, various forms of partnership arrangements became acceptable, and cohabitation became more popular.

All of these elements are taken up in great depth in the country studies in the Appendix. It is worth, however, first pausing to consider some particular elements relating to the societal context of childbearing in CEE countries which come out strongly from the qualitative data. Firstly, inadequate provision of childcare facilities is frequently cited in the country studies as being a critical element in shaping the societal context of childbearing in the CEE countries. In some cases, this dearth of adequate facilities is reflected in more generous parental allowances (see Section 3.3.3. and, as an example, the Czech Republic study on p.70). A second issue related to guaranteeing of rights in the labour market of parents – and, especially, how they are enforced.

2.5. BASES OF CONCERN: WHY DO GOVERNMENTS CARE ABOUT LOW FERTILITY?

Governments care about low fertility because the consequences are perceived deleterious, and costs presumably outweigh benefits. Low fertility generates an age structure with a momentum for population decline and population ageing. Population aging implies serious issues, such as rising health care costs, a declining share of working age population, relatively low demand hampering economic growth.

However, governments (and the public) work with period fertility rates which are at present distorted downward (Frejka & Basten, 2014; Frejka, 2011; T Sobotka, 2004). The period fertility rates are below quantum rates because childbearing is being postponed. Therefore governments are basing their considerations and decisions on imperfect and defective information. Nonetheless, even the distorted measure reflects a real state of affairs: low fertility begets relatively small cohorts. As these small generations move through the age structure they may be the core of major societal issues.

It would be ideal if governments could work with a known measure of a current fertility quantum, but that does not exist. It is the perennial problem that the period fertility rate that is currently available is distorted. In the early 21st century in the CEE countries period total fertility rates provide information lower than corresponding cohort fertility rates because childbearing is being postponed. The degree of distortion is not known in the “present” time and will be known only ± 15 years later.

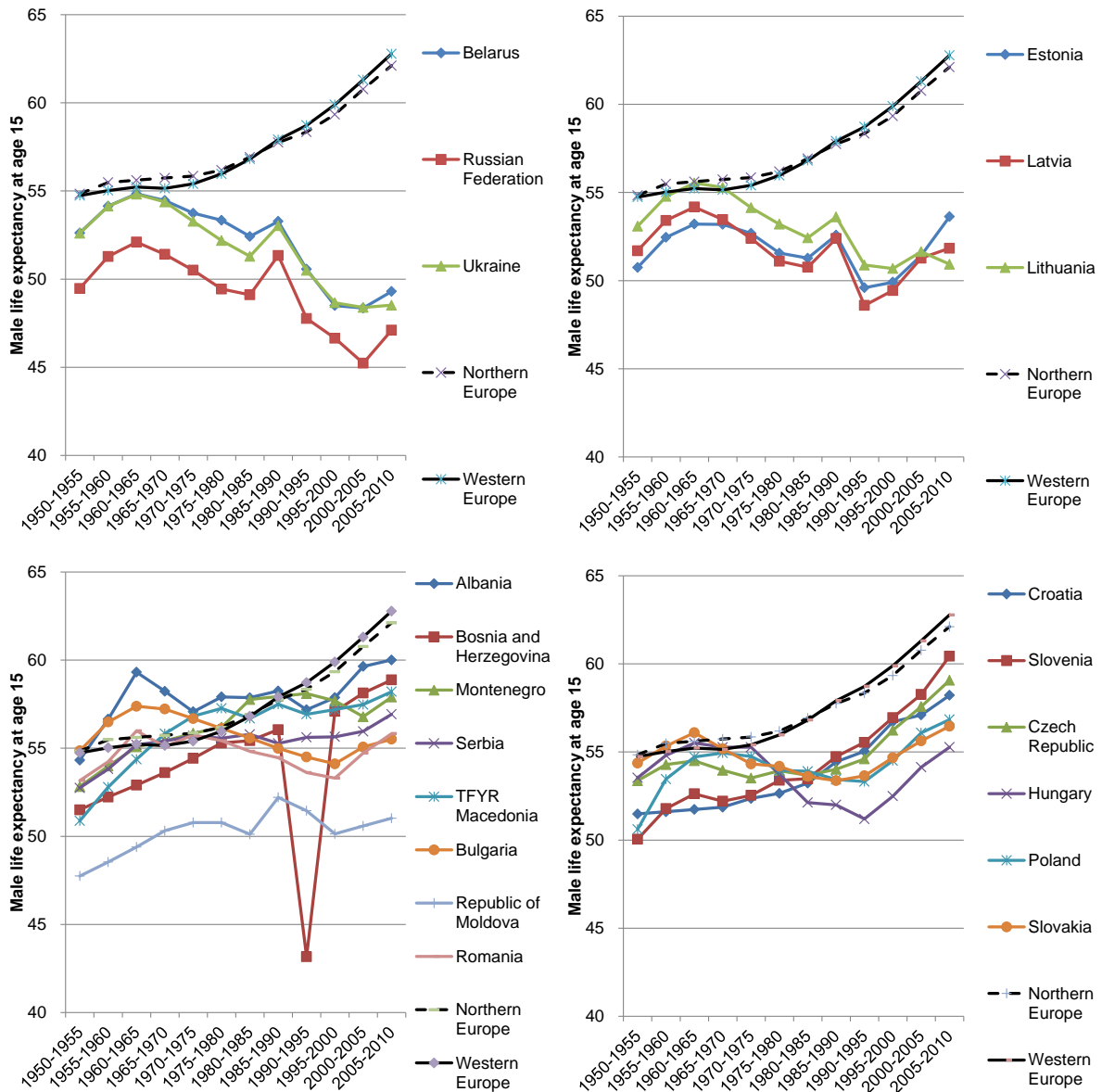
In 2004, Billari & Kohler coined the term ‘lowest-low fertility’ (set at TFR 1.3) which then assumed some significance as a ‘dangerous’ boundary which, if fertility fell below this, would have strongly negative consequences for future population systems. This phenomenon particularly characterised countries in CEE. However, lowest-low fertility occurs only once in the history of each population. It occurs when period fertility is maximally distorted. The lowest low (period) total fertility rate is comprised of the relatively lowest points of a cross-section of older and of younger cohorts in the postponement sequence. In other words, it contains low age-specific fertility at high ages of old cohorts that have not yet postponed childbearing and low age-specific fertility at low ages of cohorts that are ± 20 years younger that are postponing childbearing into higher ages.

We consider the role of low fertility in the discourse surrounding the formulation of family and population policy in Section 2.6 below. Firstly, however, we consider how low fertility fits into a broader picture of demographic change in CEE countries.

It must not be forgotten that, in many parts of CEE, low fertility is just one element of a broader set of demographic issues – all of which contribute to a check on population growth. Firstly, stagnation or decline in life expectancy across many post-socialist countries (especially in Russia and the Baltic States) has been well documented (Leon, 2011). As Figure 4 demonstrates, while trends in male life expectancy in Northern and Western Europe continued to rise unabated, many countries in CEE saw a highly divergent pattern. However, these higher mortality rates had, in effect, been in place in many settings for some time before the collapse of state-socialism. Numerous analyses since then have linked this to the relatively high rates of alcohol consumption in many countries in the region (Popova, Rehm, Patra, & Zatonski, 2007) as well as high levels of psychological stress, smoking and high-fat intake (Cockerham, 1997). Some have argued that this was

compounded by the ‘implementation of neoliberal-inspired rapid, large-scale privatization programs in healthcare which further contributed to psychosocial stress as well as a decline in available health care resources (Lawrence King, Hamm, & Stuckler, 2009).

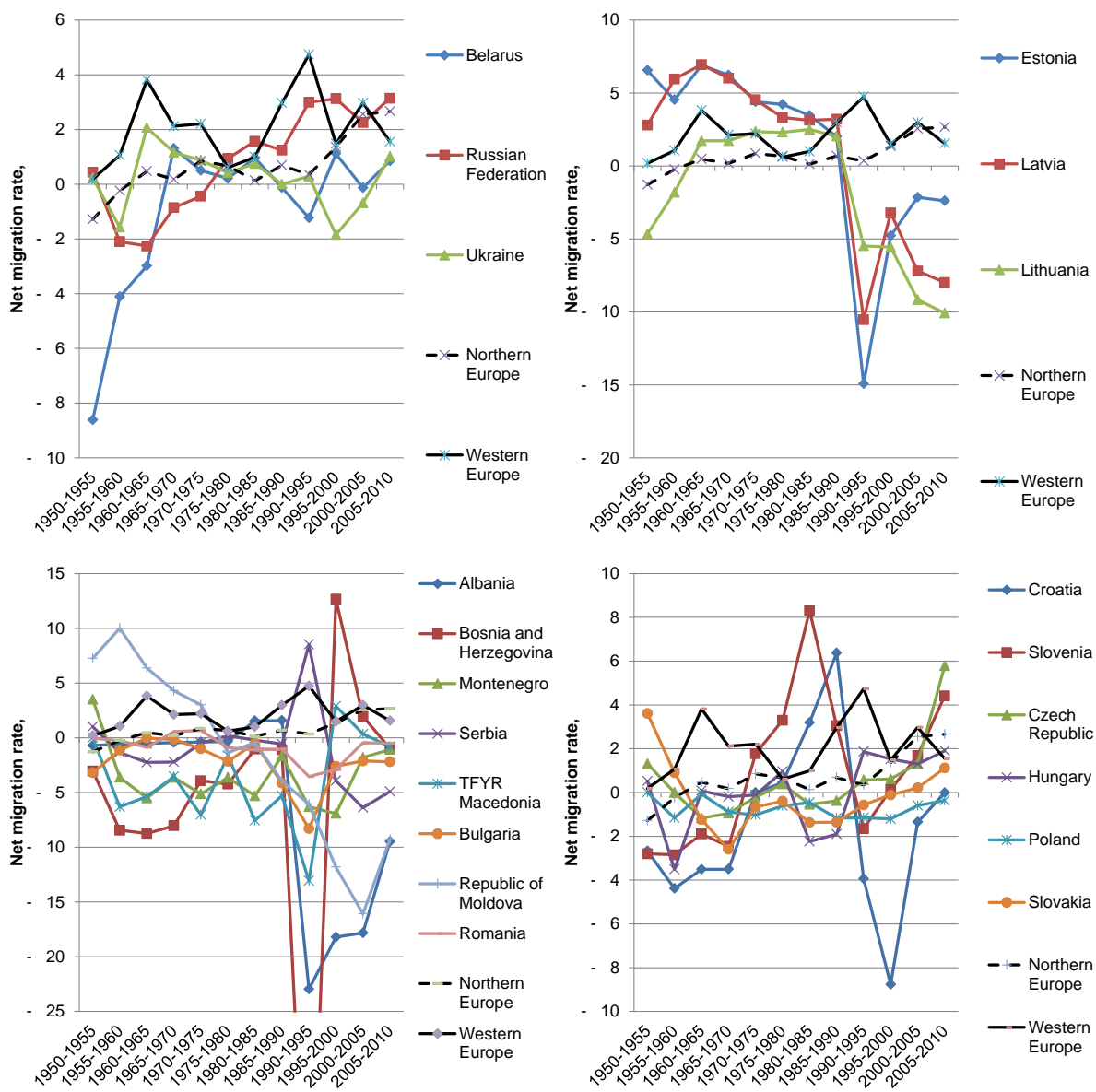
Figure 4: Male life expectancy at age 15, CEE countries and W/N Europe



Source: (UNPD, 2013)

Secondly, as Figure 5 demonstrates, unlike the countries of Western and Northern Europe, CEE countries are generally characterized by a higher degree of out-migration. This process has been expanded through the process of EU enlargement and the ability of an increasing number of people in CEE to move freely for work across Europe (Engbersen, Okolski, Black, & Pantiru, 2010). In 2007, for example, it was estimated that almost two million Poles were resident elsewhere in the European Union for more than two months (up from 451 thousand in 2002 (Burrell, 2009, p. 28). This out-migration was often heavily skewed towards young, educated, skilled men and women. As such, this had a number of effects: in terms of labour market size/skill availability and raw national population size as well as potentially playing a role in postponing childbirth, or ‘increasing the population’ of another country.

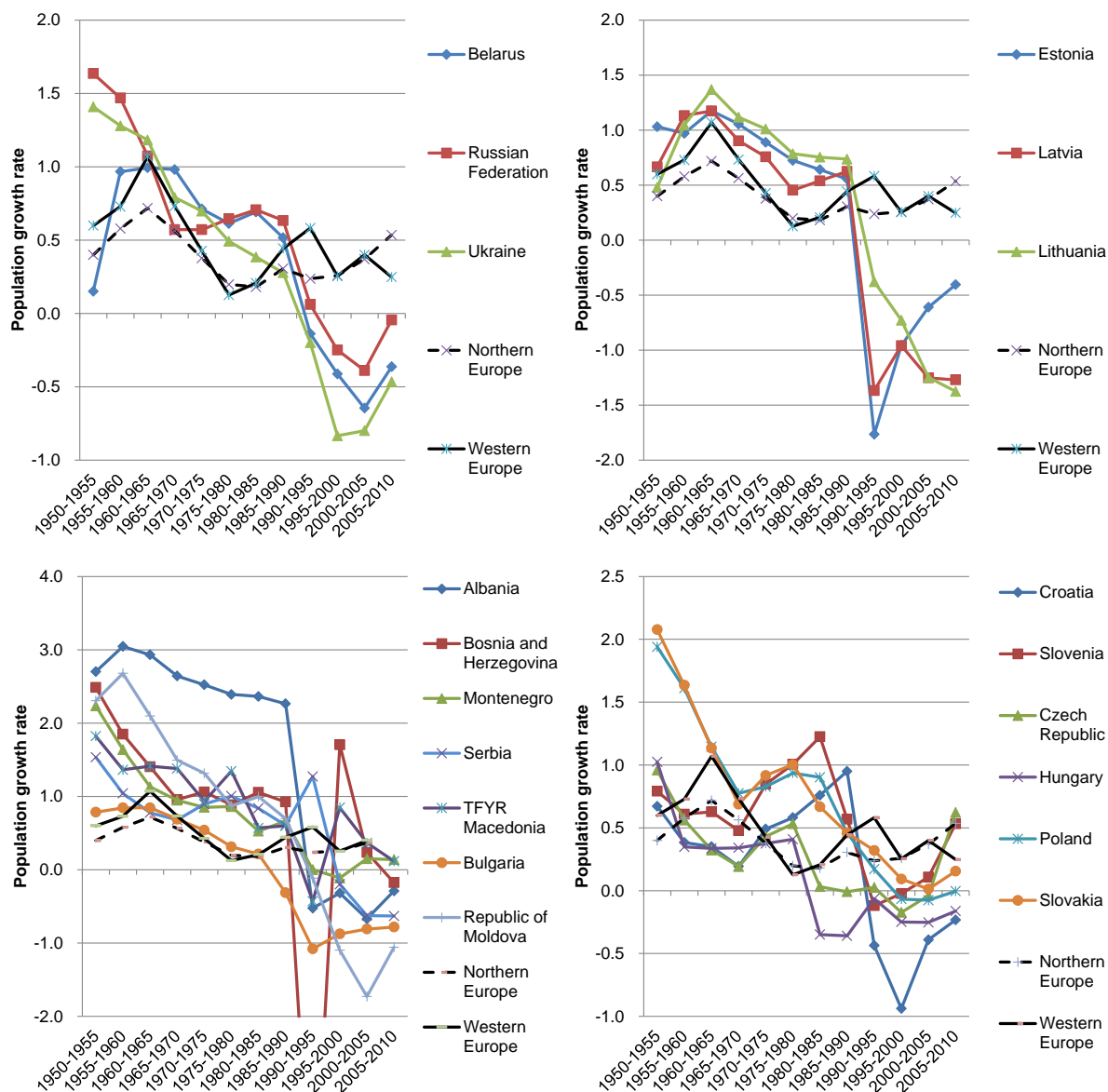
Figure 5: Net migration rates, CEE countries and N/W Europe



Source: (UNPD, 2013)

From a demographic perspective, therefore, many CEE countries are facing conditions akin to a ‘perfect’ storm – if, indeed, population stagnation or decline is deemed to be a deleterious outcome. Combining such low rates of fertility (Billari, 2008) with high levels of out-migration and higher rates of mortality is, indeed, conducive to negative growth rates in terms of population increase which, indeed, as Figure 6 shows we are able to see across much of CEE (in contrast to Northern and Western European Countries). However, it is important to note that the addition of high rates of male mortality in some CEE countries may actually be ameliorating the extent to which these countries are ageing. Despite this, there is clearly an important issue surrounding ageing in CEE countries which are, ultimately, the flip side to strategies of dealing with low fertility.

Figure 6: Population Growth Rate, CEE Countries and N/W/ Europe



Source: (UNPD, 2013)

2.6. FROM 'BASES OF CONCERN' TOWARDS 'COURSES OF ACTION'

In the previous sections we have outlined what Berelson would have termed the 'bases of concern'. Demographically, this is clearly a prolonged era of low fertility which, when coupled with higher mortality and high rates of out-migration (especially among the younger, skilled population) contributes to a demographic malaise. Before we turn to what Berelson termed 'Courses of Action' – namely the explicit population and family policies which have been implemented to try to address this issue of low fertility – it is important to think about the process of how these 'bases of concern' may have been 'translated' into said 'courses of action'.

In trying to answer the question of why many governments across CEE have invested a large amount of both economic and political capital into family and population policy, from a demographic perspective, it is therefore natural to assume in that maintaining national 'strength' through maintaining a stable or growing population in the face of higher mortality, high emigration and low fertility is likely to be an important motive – even if it is not expressed explicitly in such terms. Pronatalist policies – or policies with clear pronatalist connotations – can therefore fit into a model of either civic/cultural nationalism or an ethno-nationalist which can not only be traced back to the pre-transitional state-socialist era, but can also be seen in many other settings from France to Singapore to Turkey and Iran (Leslie King, 2002). Indeed, there are some elements which suggest the important role which low fertility can be seen to be perceived as a threat to 'demographic security' –

as was famously explicitly cited in Taiwan where the low birth rate was cited by President Ma as a ‘serious national security threat’ (Branigan, 2012). Indeed, the majority of respondents to a survey in Belarus felt that low fertility was a threat to their nation (described in the Appendix A2.2.1. Societal conditions affecting fertility, see page 28). Russia’s President Putin has been among the most vocal of CEE leaders in terms of setting out a ‘goal’ TFR and a suite of policies designed to ‘endeavour to generate a strong, happy family with many children’ (Frejka & Zakharov, 2013).

However, it would be *far* too simplistic to view the development of family policy in CEE through this very narrow lens of a nationalist-pronatalist response to population stagnation/decline or other notions of a lack of population ‘vitality’. We argue that it is absolutely essential to see population and family policy interventions as profoundly *political* tools which need to be examined and considered outside of the context of a rational response to a demographic situation. Clearly, arresting the demographic malaise described above is an important element of the implementation of family and population policy in CEE. But, if we only think in terms of raw numbers and do not consider differing *political-ideological* motivations, we miss a fundamental element of the policy procedure.

There is a wide variety of ways that CEE governments deal with low fertility ranging from taking a strong position and considering low fertility as a basic issue in need of focused government attention (Russia/Putin 2006) to considering it as unimportant and thus not dealing with it as a response to low fertility (Slovenia and Estonia). The latter approach does not mean that the respective government will not have family policies. These governments may have various kinds of measures providing benefits and services assisting families with the upbringing of children, however these will be based on humanistic concerns rather than any concern for low fertility.

The political environment for defining, designing and implementing policy measures differs across CEE countries. All countries have a multi-party system, however, in some countries one party dominates, whereas in others parties alternate as majority parties or coalitions. The handling of family policies may be relatively consistent over time, whereas as governments alternate over time, so do policy measures. At times the position of parties may be changing over time or may depend on personal views of important players.

Furthermore, we must not underestimate the heterogeneity of the CEE countries. As Sobotka observes, the region consists of ‘countries that are very secularised and culturally rather ‘liberal’ (e.g., the Czech Republic, Estonia, Slovenia, the former GDR or East Germany, and, in many respects, also Hungary) and countries that are more culturally conservative, where people attach higher importance to traditional family values, and where religion often continues to play an important role (e.g., Poland, Romania, or Slovakia). It also consists of societies that are culturally close to Western Europe, and that considered themselves part of the ‘Western world’ before the Second World War (e.g., the Czech Republic and the Baltic countries); and of countries that had been historically distinct from the ‘West’, a category that includes most of the predominantly Christian Orthodox and Muslim countries’ (Tomáš Sobotka, 2008, p. 188).

There are two clearly interrelated elements relating to population and family policy that emanate from the country studies in the appendices which go beyond the management of low fertility. These are that the *type of family* is the locus of policy concern just as much as the sheer *number of families*; and that, not surprisingly, these policy measures are often implemented in sync with the electoral cycles of politicians with stakes in them.

2.6.1. The Second Demographic Transition in CEE

The process of the Second Demographic Transition [SDT] in Europe in general, and in CEE in particular, has been described so extensively in the literature that only the briefest review is necessary here (see, for example, (Katus et al., 2007; R. Lesthaeghe, 2010; Puur, Rahnu, Maslauskaitė, Stankuniene, & Zakharov, 2012; Tomáš Sobotka, 2008). While some SDT elements were in place before 1990 in some settings, there has been a general rapid acceleration of postponement of first marriage and birth (greater in Central Europe and Baltic States; less in Eastern and SE Europe); higher percentages of non-marital births; high and/or increasing divorce rates and lower marriage rates. In almost all countries cohabitation has been spreading rapidly; is becoming extended in time and is increasingly replacing marriage as the dominant form of first union (although there are strong regional differences) (Katus et al., 2007; Tomáš Sobotka, 2008). Coupled with this was an acceleration in the ‘sexual revolution’ through both availability of contraceptive technology and shifting attitudes towards pre-marital sex (Potancokova, Vano, Pilinska, & Jurcova, 2008). Of course, linked in to this is the ongoing (though in some settings decreasing) high rates of female labour participation.

When reading through the family policy strategies in the Appendix, one is often struck by how closely the twin issues of low fertility and the changing nature of the family are intertwined. Consider, for example, the following line from *The National Programme of Demographic Security of Belarus for 2011 – 2015* (see Appendix p. 28).

The low birth rate in the country coincided with the crisis of the family institution. Almost half (44%) of marriages are breaking up. Every fifth child born to mothers who are not officially married.

On a more subtle level, the extent to which family-friendly policies which explicitly address the combination of motherhood and work alternate between political era and electoral cycles. Consider, for example, the shifting patterns of support for female employment followed by a strengthening of the male breadwinner model (and back) in the Czech Republic as mediated through which party was in government as well as the impact of joining the EU (see Appendix, p.69). The second Orbán Government in Hungary is one of the most significant political protagonists of linking family policy to a traditional family-oriented discourse – with the new constitution stating that families are ‘the basis of the nation’s survival’ and that the family is ‘defined exclusively as a marriage of a man and a woman and the foetus from the moment of conception’ (See Appendix p. 94). In the context of some countries of CEE, it is also possible to see ‘rollbacks’ of more ‘progressive’ gender legislation relating to family as being, in some way, linked to a [conservative] counter-reaction to the policies of the Soviet era – for evidence of this, see the discussion of the evolution of Lithuanian family policy in the 1990s in the Appendix, p.102).

On the other hand, other family policy strategies (implemented either in different countries, or at different times in a given country) have been explicit in trying to ameliorate the tension between childbearing and work through a more progressive, gendered mechanism. This is, for example, particular the case in the Baltic States (see, for example, the case of Estonia, p. 82).

As well as these ideological motivations for implementing and rolling back more progressive family policies, we also have to consider the acute role played economic growth and decline in terms of shaping public expenditure on family and population policy. This is clearly the case in terms of both painful economic restructuring in the 1990s and austerity measures brought in after the economic crash in 2008 (see, for example, the cases of Latvia (p.98) and Lithuania (p.102)).

Finally, we must not forget that family policy interventions can also be considered in the day-to-day pragmatism of politics in terms of being a financial incentive to vote for a particular party – possibly even net of any given ideological bent. This seems perhaps strongest in the Ukraine and the increases of the child benefit allowances there around the time of the 2004 election (see Appendix p. 138). Of course, the extent to which self-interest from receiving benefit from a new family policy intervention affects voting behaviour is highly contested. However, the electoral cycle clearly plays a role in the shifting patterns of population and family policy.

To conclude this section, therefore, we suggest that the translation of ‘Bases of Concern’ through to ‘Courses of Action’ is far from a straightforward one. Firstly, this is because the ‘Bases of Concern’ stretch way beyond low fertility both demographically (in terms of population health, mortality and migration) and ideologically (in terms of the playing out – and attempts to stem – changes in family structure and gender roles). In other words, the ‘bases of concern’ cover both the quantitative *and* qualitative elements of the SDT framework. Given the heterogeneity of these ‘bases of concern’ it is not surprising, therefore, that the ‘Courses of Action’ prescribed by different governments are often haphazard – trying to tackle a number of frequently ill-defined ‘problems’ at the same time as trying to (explicitly or implicitly) raise fertility. Finally, the process of translating the ‘Bases of Concern’ into the ‘Courses of Action’ is, fundamentally, framed within the political-democratic process. This means that the timing and intensity of family policy interventions are often based around the cycles of elections (and their ideological and economic climate) rather than explicitly linked to a response to a demographic ‘need’. It also means that there can be a profound **lack of consistency** as policies wax and wane with prevailing political moods and incumbent governments.

3. ‘COURSES OF ACTION’

3.1. INTRODUCTION

This section represents a synthesis and overview of the family policy strategies and interventions described in the country studies presented in the Appendix which are, in turn, based upon the completed qualitative templates described above (see p.5) returned by country-collaborators. As of May 27th 2014 we have received qualitative

templates from Belarus, Bulgaria, Croatia, the Czech Republic, Estonia, Hungary, Latvia, Lithuania, Poland, Serbia, Slovakia and the Ukraine. As such, our analysis here will be predominantly based upon these countries while drawing on the general literature on others. As the project (and this paper) develops, all countries of CEE will be included in this analysis.

3.2. BACKGROUND LITERATURE REVIEW ON FAMILY POLICY IN EUROPE AND CEE

3.3. FAMILY AND POPULATION POLICIES IN CEE

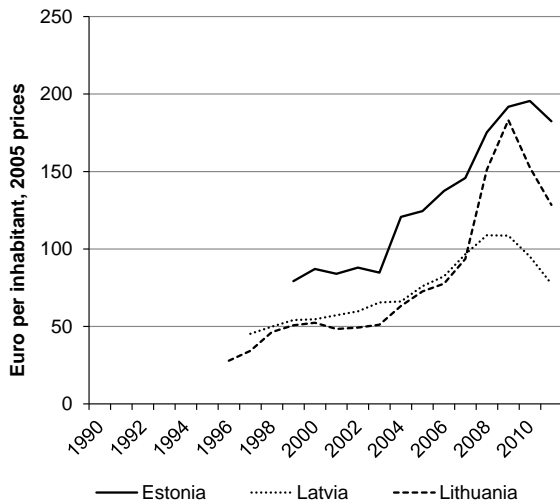
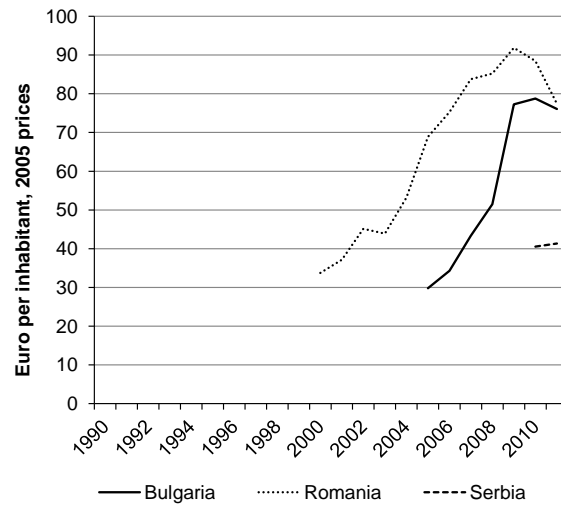
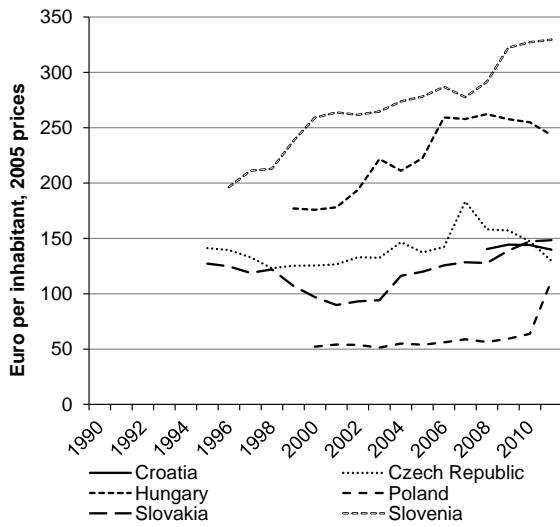
3.3.1. Introduction

As the country studies demonstrate, different countries approach the assorted issues related to the SDT – i.e. low fertility, postponed childbearing, lower marriage rates, and the associated socio-cultural issues relating to changing family structures in quite different ways. Few countries – if any – have a uni-directional approach, preferring instead a suite of measures; some conditional, others unconditional; some targeted at some groups others universal; some means-tested, other available to all income groups. In short, the family policy systems in place in the CEE are as diverse as the region itself.

Despite this, it is possible to (cautiously) group together certain typologies within the CEE countries in terms of their family policies. Essentially, this can be broadly delineated between strong and weak packages of policies supporting a combination of motherhood and parenting AND strong and weak packages of policies favouring the consolidation of the male bread winner model. The former is akin to the “Scandinavian model,” the latter to the “West Germany” model.

Before we consider particular policies in different countries, it is worth briefly pausing to consider overall patterns of spending on children and family policies across the CEE using ESSPROS data. Figure 7 gives overall trends in social protection expenditure on children and family policy (as listed in Table 1) for many countries under analysis here. A number of patterns become apparent. Some central European countries such as Czech Republic, Slovakia and Poland are characterised by relatively stable levels of expenditure; while a second group can be characterised by a significant growth in expenditure, ranging from a rather modest level of increase (e.g. Hungary and Slovenia) through to a very rapid and significant level of increase (Bulgaria, Serbia, Baltic States). However, it is critical to note two important qualifiers. Firstly, while the *relative* level of expenditure may have increased dramatically in some places, the *absolute* level may still be quite low. Secondly, the impact of the financial crisis in 2008 (and the subsequent austerity packages) are visible in many countries: most notably in the Baltic States and in south-eastern Europe. Note that in the final version of this paper we will be able to provide more detailed breakdowns of spending on family policy measures in all CEE countries.

Figure 7: Expenditure on family/children policies (as distinct from Sickness /Health care; Disability; Old age; Survivors; Unemployment; Housing; Social exclusion not elsewhere classified), European countries



Source: (Eurostat, 2014)

In the next two sections we outline two of the core elements of family policy expenditure in CEE countries, namely ‘baby bonuses’, or lump sum payments upon birth; and other parental allowances (including maternity payments and leave as well as other ongoing child benefits). While investment in childcare and policies promoting gender equity (at home and in the workplace) are often considered as part of the family policy framework, here we consider it as part of the ‘structural’ or societal context of childbearing alluded to in Section 2.4 and elucidated upon in Section 4.

3.3.2. ‘Baby bonuses’

Most countries make direct cash payments of some sort to, ostensibly, ameliorate the cost of childbearing. This is variously delivered through ‘baby bonuses’ or lump sum payments upon the occasion of birth and/or through other ongoing parental allowances. In order to consider the extent to which these two elements can be utilised as *major* or *minor* components of a state’s family policy strategy, it is instructive to compare Belarus and Lithuania. Both countries pay out both lump sum ‘baby’ bonuses as well as parental allowances. As Table 2 demonstrates, however, the balance between these two elements is completely different in the two countries, with Belarussian family policy heavily reliant on a ‘baby bonus’ with the opposite the case for Lithuania.

Table 2: Comparing ‘baby bonuses’ and parental allowances in Ukraine and Lithuania

	‘Baby Bonus’	Parental allowances

Belarus (2010-2014)	€828-1159	Minimum around €40 per month
Lithuania	€418	Choose between a one- and a two-year benefit payment period. If a one-year benefit payment period is chosen, a benefit in the amount of 100 per cent of the compensatory wage is paid; if a two-year period is chosen, a benefit in the amount of 70% of the compensatory wage is paid during the first year, and in the amount of 40% during the second year

As Table 3 demonstrates, a number of CEE countries currently offer ‘lump sum’ payments to parents upon the birth of a child. In some cases these are conditional and in others they are determined by the parity of the child. In this context, the ‘baby bonuses’ payable in Russia (termed ‘maternal capital’) and Belarus are of particular interest. Firstly, both increase with parity – a clear nod towards encouraging having more children. Secondly, the two are marked out by the relationship of the ‘baby bonus’ to the GDP per capita. In Belarus, the baby bonus for the second and third (and above) births are around one-quarter of GDP per capita (see p.29); while in Russia the ‘maternal capital’ payment is around four-fifths the GDP per capita.

Table 3: ‘Baby bonuses’ in CEE countries

	Conditions, circumstances	1 st Child, €	2 nd Child, €	3 rd + Child, €	GDP per capita, 2013 €	See p.
Belarus	<i>Unconditional</i> <i>If twins</i>	828 +166	1159 +166	1159 +166	4872	29
Bulgaria	<i>Unconditional, paid 45 days before birth</i> <i>If university student</i> <i>If twins</i> <i>Means-tested</i>	75 1440 600 125	75 1440 600 300	75 1440 600 100	3800	38
Czech Republic	<i>Low-income families</i>	473	0	0	11300	70
Hungary	<i>Unconditional</i> <i>Additional grant if mother attends 4 pre-natal medical care sessions</i>	168 209	168	168	9000	96
Latvia	<i>Payable from 8th day of life</i>	421	421	421	7100	98
Lithuania	<i>Unconditional</i>	418	418	418	8500	104
Russia	<i>Unconditional*</i>	0	8182	8182	10236	⁵
Slovakia	<i>Conditional on proof of undergoing all medical tests, check-ups, and child survival of 28 days</i>	829.89	151.4	151.4	13155	129
Ukraine	<i>Unconditional: 2010-14**</i>	720	726	750	2818	138
Poland	<i>Low income families</i> <i>Childbirth grant</i> <i>Additional grant if mother attends 2 pre-natal medical care session</i>	 240 240	 240 240	 240 240		172

* Can only be spent on housing improvement: to buy housing, to pay off mortgage loans, or to build a house; any of the family children's education: in kindergarten, institutions of high education, institutions of higher education, postgraduate course. As well as to pay for hostel the child lives in; to augment the mother's future accumulative pension.

** Note that since March 2014 the grant has been significantly reduced in the Ukraine owing to economic and political crises and cuts in expenditure.

3.3.3. Other parental allowances

The second major element of direct cash payments concerns parental allowances. These may be paid to the mother and/or father (or possibly transferable between them). In truth, these are a highly heterogeneous, complicated array of benefits across the CEE countries; each with particular conditions attached regarding eligibility, transferability, relationship to work etc. As such, only a very cursory and partial overview can be presented here. For a full description of the nature and characteristics of these policies, it is necessary for the reader to consult the Appendix.

As Table 4 demonstrates, there is a wide array of parental allowances available in different CEE countries. These allowances are split between immediate post-birth maternity allowances and/or ongoing support for a certain number of years beyond childbirth. Some are universal; others based upon social insurance contributions. Some have certain conditions regarding combining with work and childcare while others are

⁵ http://www.pfrf.ru/ot_en/mother/

unconditional. Some are based upon a salary replacement system; others are a flat allowance. Some are gradated by parity; others are not. Some are very generous; others are rather more marginal. In short there is a high degree of heterogeneity in these allowances across CEE and, as such, it is not possible to identify such a thing as a 'CEE Family Policy Typology', at least with regard to paid allowances.

As the country studies show, allowances which are explicitly targeted to *men* as an additional payment (as opposed to those which can be transferred from women to men) are few and far between; with Latvia and Lithuania being only a small number of countries with such provision (see pages 98, 104).

Table 4: Overview of maternity and other parental allowances

Country	Duration of allowance	Conditions	Cash benefit	Appendix page
Belarus	30 weeks of gestation to 126 days after birth	Dependent on salary for previous two years, days sick etc.	Min. €40	29
Bulgaria	410 days (inc. 45 before birth) After end of maternity period to age two	Mother worked at least 12 months prior to birth Can be transferred to father or grandparents (if they work under contract and have social insurance)	90% of gross salary 'Minimum monthly wage' (~€173)	38 38
Croatia	<i>See from page 61</i>			
Czech Rep.	28 weeks (inc.6 week prior to birth) From ~22 weeks after birth to age four From birth to age 26	Worked for 270 days in previous two years 'To provide full-time and proper care' for first child. Transferable to fathers. Income less than 2.4 times subsistence minimum	Income dependent. <i>Average</i> 68.9% of FTE wage. Based on amount of leave taken up to total value of €8000. <i>Average</i> 25.3% of FTE wage €18-20 per month per child	70
Estonia				
Hungary	From birth until age three Until youngest child is between three and eight years old Until end of school education (max. child's 20 th birthday) 24 weeks of maternity leave	Universal but mother not allowed to work until age one Universal, raising three or more children under age 18; can work ma. 30 hours per week (or unlimited if from home). Transferable to fathers. Universal Insurance based if employed/insured for 365 days prior to birth. Mother only. If one parent employed for at least 365 days in previous two years	€93 per child per month €93 per month €40-€55 per child per month depending on number of children and whether one-parent family 70% average income of woman in year prior to birth 70% average salary (up to 70% of twice minimum wage, ~€462 per month)	96
Latvia	From birth to age two From age one to 15 years (or older if attending school or college) 56 days after birth to 1/1.5 years 56/70 days before and after childbirth	Universal. 'Child care benefit' if not claiming 'parental benefit (see below) Universal For paid and insured people, 'Parental benefit' 70 days if undergoing medical supervision from 12 th week of pregnancy; 70 days after birth if health problems during pregnancy or in case of multiple births	€171 per month (€42.69 from age 1.5-2) €11.38 per child per month Dependent on plan chosen (either 1/1.5 years). 60% or 43.75% from the social insurance contributions wage of mother or father 80% of average insurance contributions salary up to €32,75 per day. If above that figure benefit shall be paid in the amount of EUR 32,75 per calendar day plus 50 percent of the benefit amount granted that exceeds EUR 32,75 per calendar day.	98
Lithuania	126 days before and after delivery From end of maternity cover to one/two years of age	If insured	100% salary Dependent on either one- or two-year benefit payment period. One-year: 100% compensatory wage is paid; Two-year: 70% compensatory wage paid during first year, 40% during the second year	104
Poland	26 weeks (if a parent is on maternity leave) Up to next 26 weeks (if a parent is on family leave) Up to 2 weeks (if the father is on paternity leave) From the age 1 to 3 (if the parent is on parental leave)	Mother employed, 14 weeks obligatory for the mother then can be transferred to the father Mother/father employed, to be used by mother or father Father employed, uniquely for the father If insured, can be used by mother or father	100% or 80% salary 80% or 60% salary 100% salary None or 95 euro for low income families	172
Serbia	To age one for first and second child; to age two for third and fourth child <i>Parental allowance</i>	Must be on parental leave NEED MORE INFO ON THIS	Full compensation of salary	128
Slovenia	12 months from birth		100% salary compensation for first 3 months, then decreased to 90% if salary above €763.90. Cannot exceed twice Slovenian average salary.	133
Slovakia	Up to 3 years Child benefit	Must stay out of work Universal	€204 per month €23.5per child per month	129
Ukraine*	12 months for first child; 24 months for second child; 36 months for third child Up to age three		€93 per month for first child; €126 per month for second child; €188 per month for third child and above €46 per child per month	138

*Note that the data for the Ukraine are valid until March 2014. Current family policy mechanisms will be updated in later versions of this paper

3.4. OTHER FAMILY POLICY INTERVENTIONS IN CEE COUNTRIES

It would, of course, be a mistake to consider only cash payments as the only family policy interventions currently seen in CEE countries. In fact, a wide array of policies beyond cash transfers can be found in the country studies in the Appendix. These include policies to increase childcare availability; unpaid parental leave; leave for fathers; housing assistance and so on. These will be covered in depth in the later version of this paper.

3.5. EVALUATING FAMILY POLICY PACKAGES IN CEE

In this section, we have identified two tenets of family policy interventions in CEE countries, namely ‘baby bonuses’ or lump sum payments made upon birth and ongoing (paid and unpaid) parental leave. Other policies, such as maternal and parental leaves, child care, and possibly other measures such as housing policies and loans to newly-weds can be of equal importance. We have shown the extant wide variety of population and family policies. In principle, some countries frame their family policies with a modern approach enabling women and couples to combine work and childbearing while others support the male breadwinner model, some have explicitly pro-natalist policies while others promote a comprehensive family friendly societal environment. Gender roles and the construction of the family is a critical variable; with some countries placing key elements of conditionality concerning the maintenance of ‘the family’ within their pronatalist policies.

However, one of the main problems in presenting the *current* main family policy interventions (as we do in Table 3 and Table 4) is that it does not adequately show change over time. As the country studies demonstrate, the nature and extent of family policy interventions fluctuate highly significantly over time and this is not captured in the overview table. For this, it is necessary to examine the individual country level studies.

4. PRELIMINARY FINDINGS AND CONCLUSIONS

4.1 PRESUMED FINDINGS AND CONCLUSIONS

It is still rather early to formulate final findings and conclusions of this paper. Much work still needs to be done on the main body of the paper as well as improving the country overviews. Nonetheless it might be useful to summarize what is emerging.

- a. Thus far, i.e. starting from around 1990 with the demise of state socialism, through the early 2010s, all countries are progressing on similar paths of period total fertility rates.
- b. All populations experienced a significant PTFR decline during the 1990s a bottoming out around the year 2000 of a few years and a PTFR increase from the mid to late 2000s which more or less stabilized around 2010.
- c. The total populations of almost all CEE countries declined during the past two decades. This decline can be traced to several factors, a decline in cohort fertility (quantum), childbearing postponement, in numerous cases emigration. Mortality in a number of countries was also quite high and is considered an issue.
- d. Almost all countries have expressed a concern with low fertility, but the degree and nature of concern varies.
- e. All countries have designed policy measures affecting childbearing, which differ widely along various lines, ranging from those with a modern approach enabling women and couples to combine work and childbearing to those which support the male breadwinner model, ranging from explicitly pro-natalist to those which promote a comprehensive family friendly societal environment. Eventually it might be possible to sort out a discernible typology of family and population policies for the Central and East European countries.
- f. Political environments differ significantly. All countries have multi-party systems, however in some one party dominates. In some countries a consensus regarding family policies has emerged, in others the views of parties differ and at times are not well defined. At times family policies depend on views of individuals in influential positions within parties.
- g. Arguably very important is the question of how to assess the effect of policies on fertility. The effect on the quantum of fertility can be measured conclusively only with a ± 15 year delay. Thus in the early 2010s the levels and trends of cohort fertility at age 40 are indicative of what happened during the 1990s for individual

populations. The fertility quantum, cohort fertility, either declined continuously or eventually apparently stabilized. This implies that the real ultimate effect of contemporary policy measures intended to affect fertility, directly or indirectly, cannot be adequately assessed at the time when these are in place and executed.

h. Evidence from countries confirms the fact that numerous societal circumstances -- such as levels and trends in living conditions, wealth and income, housing, employment, especially of young people – are decisive in shaping childbearing decisions and thus in shaping levels and trends of a country's fertility.

i. The immediate effect on various period measures are known. Some might be informative, such as the composition of births by birth order; others such as levels of period total fertility rates will be inaccurate because of timing distortions. However, even the levels and trends of PTFRs can be informative, for instance, if PTFRs peak and stabilize at low levels.

j. A desired outcome of the research undertaken in this project was to be able to establish whether CEE cohort fertility is likely to decline further, stabilize or increase in the foreseeable future. The various analyses of this paper appear to exclude the alternative that cohort fertility might rise in the coming 20 years or so. We speculate that conceivably levels of fertility might remain at the levels of the 1990s. It is equally possible that fertility could continue to decline modestly.

k. It is inevitable that almost all CEE populations are going to continue to shrink during the coming two to three decades. That is implied by the assumption that present fertility is not going to increase from its relatively low level. Almost without exception, even medium official population projection variants, which contain assumptions of modestly rising fertility from present levels (PTFR = ± 1.5 births per woman), project declines in population size by the middle of the 21st century.

4.2. POSSIBLE REASONS FOR THE CONTINUING MALAISE IN FERTILITY TRENDS IN CEE

The question is often posed why policies which have sought to *reduce* fertility across the world have invariably been more successful than policies to *increase* fertility. In other words, policies to help lower fertility, including provision of easy technology, have since the mid-sixties, had clear and substantial effects, especially in East and South-East Asia and Latin America and the Caribbean. At present around 3 billion people are still living in countries whose governments consider it desirable to lower fertility (Many in Africa, and in South Asia, including India [1,277 mln.], Indonesia [248 mln.], Pakistan [191 mln.], Bangladesh [157 mln.]).

In contrast, policies to increase fertility have either managed to retain moderate fertility, but hardly ever to raise it. Irrespective of low fertility levels (moderate or very low) experience to date has shown that if and when developed country governments become concerned with fertility levels, policies can manage to retain existing levels. Some countries became concerned while fertility (in particular cohort fertility) was still at moderate levels (Scandinavia and France), thus that level has basically been retained. This requires long-term, decades long, sustained non-partisan efforts. On the other hand, thus far few, if any, governments are managing to implement policies that raise fertility. That is generally what appears to be going on in the 2000s in CEE. At first occasionally it might appear that policies are succeeding, because period fertility rates are increasing, but for the most part that might be a temporary phenomenon (see above, and Frejka & Zakharov, 2013).

We have already identified the major issues relating to the societal context of childbearing in the CEE countries in Section 2.4 above. The general 'rollercoaster' of social, political and economic changes seen in the region over the past 25 years is unlikely to be that conducive to childbearing; whether this is in terms of a frequently inconsistent family policy strategy which waxes and wanes with the prevailing governmental ideology or in terms of the economic restructuring of the 1990s, followed by strong growth, followed by economic crisis and austerity after 2008 as was seen in a number of countries. We have also identified that some core elements of family policy strategy- especially regarding the provision of high quality and easily accessible childcare and security in the labour market for parents – are still lagging behind in many settings.

APPENDICES

APPENDIX 1: COUNTRY COLLABORATORS

Participating countries and personnel working on project Prospects for a fertility increase in the formerly socialist countries of Central and Eastern Europe

Country	Collaborators
Albania	Arjan Gjonca
Belarus	Ekaterina Antipova, Tatyana Pronko & Liudmila Fakeyeva
Bulgaria	Elena von der Lippe & Dora Kostova
Croatia	Ivan Cipin & Anđelko Akrap and Marin Strmota
Czech Republic	Tomáš Sobotka & Kryštof Zeman
Estonia	Luule Sakkeus & Allan Puur, Martin Klesment, Liili Abuladze
Hungary	Julia Mikolai
Kosovo	Arjan Gjonca
Latvia	Peter Zvidrins & Liga Abolina
Lithuania	Vlada Stankuniene, Aiva Jasilioniene, Ausra Maslauskaite
Montenegro	Arjan Gjonca
Poland	Irena Kotowska, Anna Rybińska, Krzysztof Tymicki
Romania	Cornelia Muresan & Ionut Foldes
Russia	Anatoly Vishnevsky & Sergei Zakharov
Serbia	Mirjana Rasevic & Mirjana Bobic and Vasic Petar
Slovakia	Michaela Potančoková & Branislav Sprocha
Slovenia	Jože Sambt & Nada Stropnik
Ukraine	Iryna Kurylo & Svitlana Aksyonova and Boris Krimer
Project coordinators	Stuart Basten & Tomas Frejka

APPENDIX 2: COUNTRY STUDIES

A2.1. ALBANIA

A2.1.1. Societal conditions affecting fertility

A2.1.2. Family policy strategy

A2.1.3. Specific family policy measures

A2.1.4. Fertility trends

A2.1.5. Summary and conclusions

A2.2. BELARUS

A2.2.1. Societal conditions affecting fertility

Politically, Belarus has been characterised by the rule of Alexander Lukashenko since 1994. Under his presidency, state-ownership of many industries has been maintained. As elsewhere, the 1990s were characterised by prolonged economic crisis linked to the collapse of the Soviet Union and, latterly, the fallout from the financial crisis in Russia of 1998-99. In 1999, consumer prices grew by 294%. Between 2001 and 2005, meanwhile, the national economy saw a degree of stabilisation and an era of sustained economic growth of 7-9% p.a. In 2011, an economic crisis hit the country, with strong governmental control of the economy, budget deficit and an arbitrary increase in salaries (of US\$500) before the presidential election cited as core reasons. In 2011, inflation reached 108.7% while the interest rates of several banks soared to over 120%. This has contributed to the levelling off of recent increases in GDP per capita.

While official *registered* unemployment is very low (<1%) it has been estimated from surveys that *actual* unemployment (in 2011) could be as high as 30% for men and 19% for women.⁶ The World Bank, meanwhile, estimates that unemployment is around 7%, with around one-fifth of the working age population being economically inactive. The discrepancy between these figures is explained by the low levels of benefits accruing from registration as unemployed (8% of average wage) as well as the complexity of the registration process and the compulsory participation in public works schemes.⁷

A2.2.2. Family policy strategy

Low fertility is a high priority in both the political and public discourse in Belarus. In a 2011-12 survey [N1535] conducted by EcooM⁸, the overwhelming majority of respondents (89.8%) stated that the increase of fertility in the country is an important challenge facing the state. 32.4% of respondents believes that the current situation in Belarus with fertility is difficult; 23.1% felt it was not a simple problem, but manageable; 14.7% felt it was an acute or critical problem, 8.9 % no more problematic than anywhere else.

The first state document under the sovereignty of the Republic of Belarus with the status of demographic policy was entitled *The Concept of State Demographic Policy and the Guidelines for the Implementation of Population Policies Based on Sustainable Economic Development in the Transition Period* (Decree of Council of Ministers of the Republic of Belarus, 24.06.1998 № 996).⁹ This strategy sought to stabilise the birth rate and improve reproductive health as well as decrease the prevailing ‘abortion culture’ and move towards more contraceptive use – all within a broad pro-family values framework. The strategy was largely concerned with increasing knowledge of reproductive health and family planning; but explicitly with regard to childbearing policy, it sought to ‘provide conditions conducive to the implementation of existing reproductive attitudes of couples and individuals’, ‘create a material base and training of qualified personnel for the full satisfaction of the population in the treatment of infertility’ and ‘create real conditions for the harmonious combination of women motherhood and professional responsibilities’. As will be seen in specific family policy measures below, the role played by the Chernobyl explosion is explicitly referred to and actioned in the state’s family policy.

Currently, the basic principles of state demographic policy measures the Republic of Belarus are presented in the *National Programme of Demographic Security of Belarus 2007-10* (National Register of Legal Acts of the Republic of Belarus, 2007, № 79, 1/8434) and *The National Programme of Demographic Security of Belarus for 2011 - 2015* (Presidential Decree of September 12, 2012 № 406.) According to the 2011-15 *National Programme*:

The demographic situation in the country is characterized by a steady depopulation since the early 90-ies of XX century. Absolute decline in population size was over 750 thousand people during the period of 1993-2010. The main factor of depopulation in the Republic of Belarus is a low birth rate. In 2010, the total fertility rate was 1.49 per woman when for reproduction 2.15 is a minimum. Low birth rate in the country coincided with the crisis of the family institution. Almost half (44%) of marriages are breaking up. Every fifth child born to mothers who are not officially married. There are more than 25 thousand orphans and children left without parental care in the country, of which 6.7 thousand children raised foster homes. Annually guardianship authorities identify and arrange for upbringing about 4 thousand children left without parental care.

⁶ <http://www.charter97.org/en/news/2012/7/6/54765/>

⁷ <http://www.interfax.by/article/1113685>

⁸ <http://www.ecoom.org/node/304>

⁹ http://www.bankzakonov.com/republic_pravo_by_2010/blockm3/rtf-t9c2q4/index.htm

As such, pro-natalist policy is intrinsically bound up with a pro-family values agenda.

The *National Programme* aimed for an increase in the TFR by 2015 to 1.55-1.65 (up from around 1.5 in 2012); stabilization and reduction of infant mortality rate to 3.8 per 1,000 babies born alive; and an increase the proportion of births without complications to 40%.

A2.2.3. Specific family policy measures

Since 2012, the Law of the Republic of Belarus *On state benefits for families with children* has been in operation. In this document the types and amounts of benefits for specific categories of families, mothers and children are described in detail.

Maternity allowance

Maternity allowance is assigned from 30 weeks of gestation to 126 days after birth (although in the case of complicated deliveries, including the birth of two or more children, the allowance is assigned for 140 days after birth).¹⁰ In the case of births occurring before 30 weeks of pregnancy maternity allowance is assigned to 140 days after birth.¹¹ In the case of a stillbirth the allowance is paid until 70 days after birth. Upon adoption of a child under three months old, the person who adopts the child (or the child's guardian) is eligible for payment of maternity allowance for 70 days from the date of adoption or guardianship.

Child and birth allowances

A lump sum payment is made for each birth. For the first birth this is €828; for the second and subsequent birth this rises to €1159. In the case of multiple births (e.g. twins) and additional €166 is paid per child. The full details of this can be found in the table below.

A universal care benefit for a child under three years is paid at 35% of the average wage for the first child and 40 % of the average wage for the second child and above.¹² The average monthly wage for the fourth quarter of 2013 was €408. In Q1 of 2014, the average care benefit for a child aged up to three years for the first child is €143 per month and €163 per month for the second child and subsequent children.¹³

Other benefits are available for children with HIV/AIDS (up to aged 18) and other allowances for the provision of care for disabled children

The share of social policy (include costs associated with the increase in fertility, maternity and childhood welfare) in budget of the Republic of Belarus is an average of 10%, or €359.9m in 2010. Costs for the implementation of the *National Programme of Demographic Security of the Republic of Belarus* for the period of 2011 - 2015 in prices of 2010 was €55m, or 15 % of total expenditure on social policy.

A2.2.4. Fertility trends

From the 1960s through the 1970s period total fertility rates were around 2.0 - 2.3 births per woman. Following modest fluctuations during the 1980s the PTFR plunged from 2.25 in 1988 to 1.25 in 1997 (Figure 1). The corresponding cohort fertility rate at age 40 declined from 1.91 births per woman for the 1961 cohort to 1.56 in the 1972 cohort implying that a part of the PTFR 1990s decline was caused by a drop in the quantum of fertility as well as by childbearing postponement. The childbearing postponement and recuperation is also illustrated by the sharp decline in the cumulated period fertility rate of young women below age 27, CumPFR 15-26, between

¹⁰ For women who are (mostly) living and (or) working on the territory of radioactive contamination, the allowance period is 27 weeks of gestation to 146 calendar days, and 160 days in the case of complicated deliveries or two or more children.

¹¹ For women living and/or working in the territory of radioactive contamination, this allowance is available if the child is born at 27 weeks or later, and is payable for 160 days after birth.

¹² Care benefit for a disabled child under the age of 3 years is granted and paid in the amount of 45 % of the average wage.

¹³ Care Benefit for a disabled child under the age of 3 years is €184 per month.

1988 and 1997 and subsequently by the considerable increase in the fertility of older women, CumPFR 27-49, throughout the 2010s (Figure 1).

The period total fertility rate was stable at about 1.3 births per woman between 1997 and 2005 when it started to increase to reach 1.6 by 2012. Note that the levels and trends of the Belorussian PTFRs followed an almost identical path as the average for the CEE countries (Figure 1).

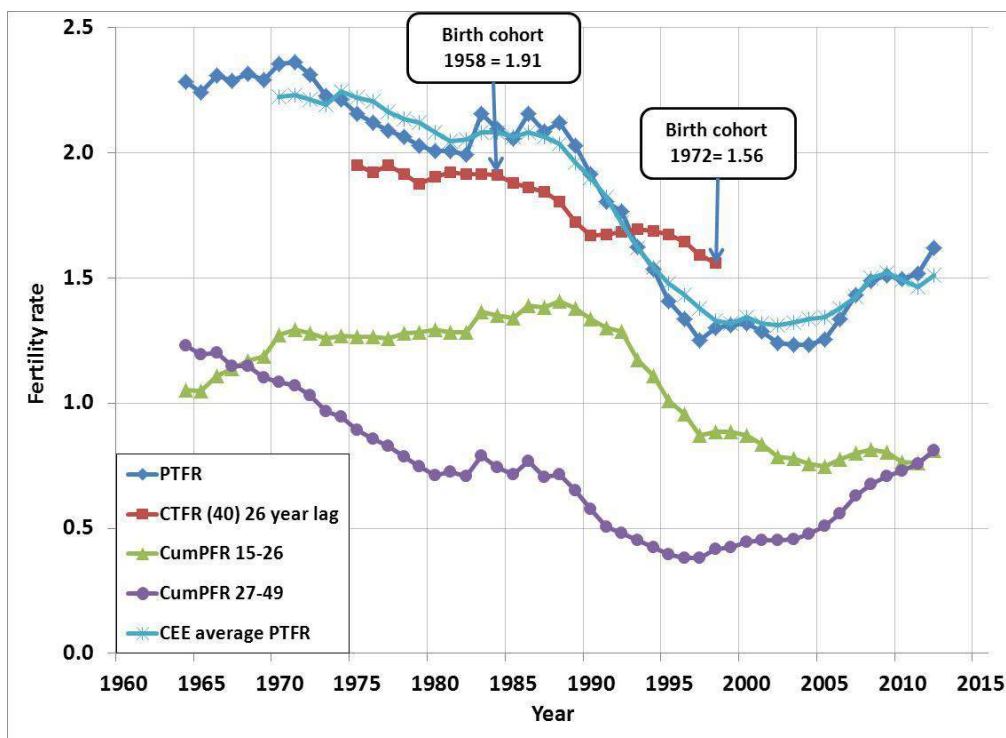
Rapid childbearing postponement is also illustrated by the increase in the mean age of women at first birth starting in the mid-1990s at age 23 and increasing to age 25 by the early 2010s (Figure 2).

The combined effect of the quantum fertility decline and childbearing postponement is reflected in the changing age structure of childbearing (Figure 4). The birth cohorts of the 1960s have a distinct peak of childbearing in their early twenties. Major changes occurred among the cohorts of the 1970s. The 1980 still retains an early childbearing pattern, however the age-specific fertility rate at age 21 is significantly lower than in the 1970 cohort and the ASFRs retain a similar value of around 0.10 births per woman through age 27 (Figure 4).

The increase in the period total fertility rate between 2004 and 2012 has resulted from increases mainly of second and third order and higher birth order births (Table 1 and Figure 3). By 2012 the contribution of older women aged 27 – 49 became as large as that of younger women, 0.81 births per woman. Among the older women even first birth order births increased substantially as did those of 2nd and 3rd+ birth order, all by around 70 percent (Table 1 and Figure 3). By 2012 most births were still of the first birth order, 51 percent, but shares of 2nd and 3rd+ birth order increased (Table 2).

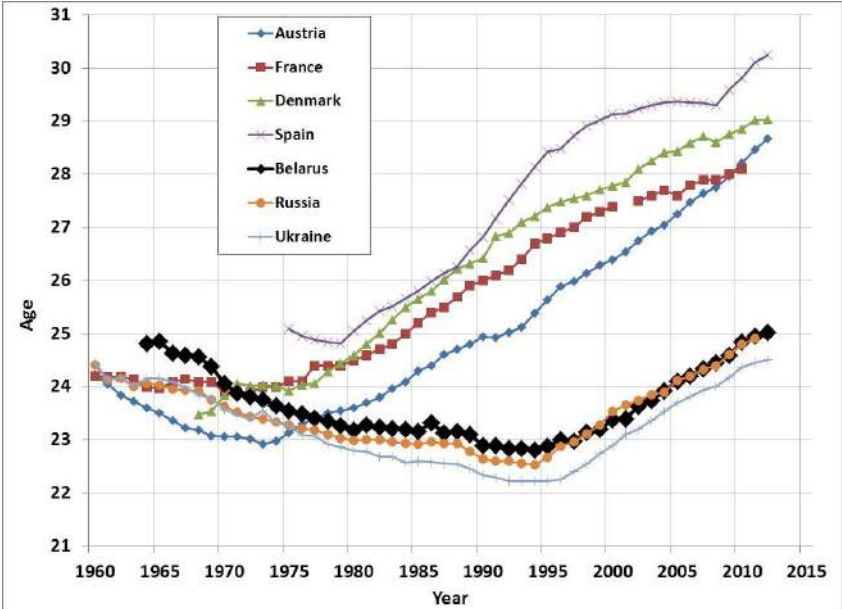
The population of Belarus declined from 10.2 million in 1990 to 9.5 million in 2010 (Figure 5). A decline in population size is projected to continue according to the medium variant to 7.7 million by 2050. This would mean a loss of almost a fifth of its population.

FIGURE 1 Cohort total fertility rate at age 40 (lagged by 26 years) and period total fertility rates, women all ages, aged 15-26 and 27-49, Belarus and average period total fertility rate for Central and Eastern Europe, 1964-2012



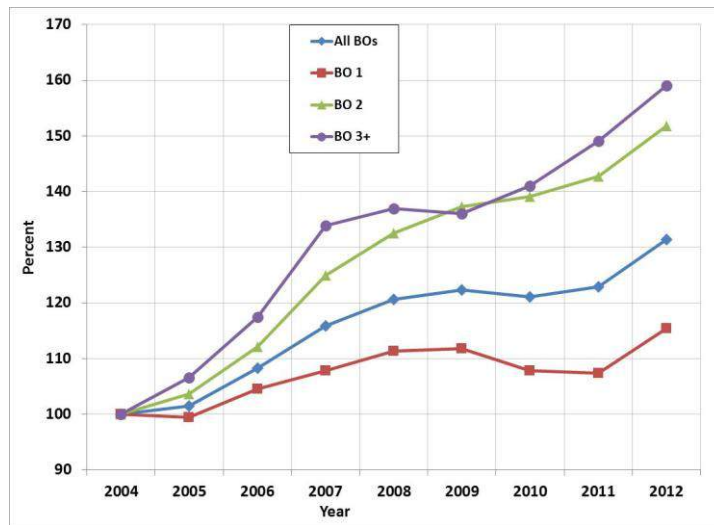
SOURCE: Human Fertility Database 2014

FIGURE 2 Period mean age of mother at first birth, Belarus, Russia, Ukraine, Austria, France, Denmark and Spain, 1960-2012



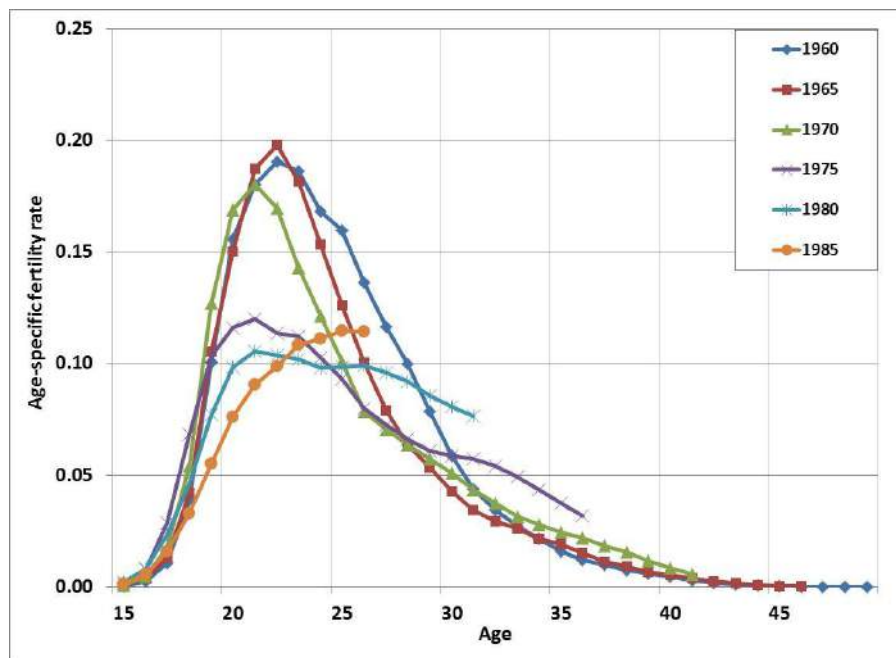
SOURCES: HFD, HFC & Eurostat, 2014

FIGURE 3 Period total fertility rate indexes, all birth orders combined and by birth order, Belarus, 2004-2012



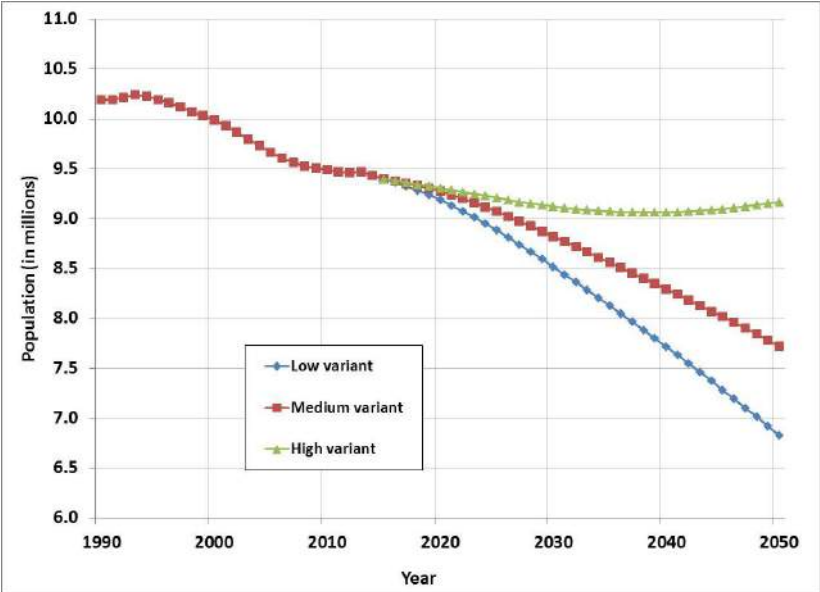
SOURCE: Human Fertility Database 2014

FIGURE 4 Cohort age-specific fertility rates, Belarus, birth cohorts 1960, 1965, 1970, 1975, 1980 and 1985



SOURCE: Human Fertility Database 2014

FIGURE 5 Total population (1990-13) and projections (2014-50), low, medium, and high variants, Belarus



SOURCE: Belarus Statistical office

TABLE 1 Period total fertility rates, by birth order and age group, and percent increase between 2004 and 2012, Belarus, 2004 and 2012

Birth order	Total fertility rates		Percent increase 2004-2012
	2004	2012	
All women			
All	1.23	1.62	31.4
1	0.72	0.83	15.4
2	0.39	0.59	51.8
3+	0.13	0.20	59.0
Women aged 15-26			
All	0.76	0.81	7.0
1	0.58	0.59	2.8
2	0.15	0.18	20.4
3+	0.02	0.03	22.4
Women aged 27-49			
All	0.48	0.81	70.0
1	0.14	0.23	68.0
2	0.24	0.41	72.1
3+	0.10	0.17	67.9

SOURCE: Human Fertility Database 2014, Authors' calculations

TABLE 2 Composition of period total fertility rate by birth order, Belarus, 2004, 2008 and 2012

Birth order	Total Fertility Rates		
	2004	2008	2012
All	1.23	1.49	1.62
1	0.72	0.80	0.83
2	0.39	0.52	0.59
3+	0.13	0.17	0.20
Composition by birth order			
All	100	100	100
1	58.1	53.6	51.1
2	31.6	34.8	36.6
3+	10.2	11.6	12.4

SOURCE: Human Fertility Database 2014

A2.2.5. Summary and conclusions

A2.3. BULGARIA

A2.3.1. Societal conditions affecting fertility

The political situation in the last decade was relatively stable compared to the turbulent 1990s. Despite the changes in political life, relative economic stability was maintained and huge fluctuations (such as inflation rates of 1058% in 1997) were not observed. However, the financial situation is still on a very low level and many people hardly make ends meet. The unemployment rates stay on high level (13.1 % at the end of 2013) and are particularly high in the younger age groups (22.2 %). Many young people after finishing education have difficulties to find a job. The economic situation in the cities, especially in the capital, is better, however, the salaries in Bulgaria are still the lowest in the European Union (mean salary in the last trimester of 2013 in Bulgaria was €420).

A2.3.2. Family policy strategy

Bulgaria's population strategy was set out in the 2005 document 'National strategy for demographic development in the Republic of Bulgaria for the period 2006 – 2020.' The document consists of about 50 pages, in which the family policies are described and evaluated, and the problematic topics are outlined. A great part is devoted to designing strategies, priorities and directions in the demographic policy in Bulgaria. Aims and strategies concerning fertility are: to encourage fertility through providing facilities necessary for raising up children; lowering the number of emigrating people in reproductive ages; improving the reproductive health in the population and preventing sterility. In particular, a necessity to encourage fertility is seen, due to the fact that about 2/3 of Bulgarian families still state the two-child family model as their reproductive ideal. However, many of them either do not fulfil their ideal, or do not believe that they will ever do, with economic hardship being the most commonly given reason.

To encourage families to have further children, the following measures are considered: further development of gender equality; financial support for raising children, especially for a second child; better opportunities for reconciliation of work and family; introducing services that support raising the children in family environment; improvement in the educational system; better infrastructure and living environments; family planning consultations (free of charge); cultivating of the two-family model.

A2.3.3. Specific family policy measures

Birth and childcare allowances

Universal, non-means tested allowances

The lump payment in case of a registered pregnancy (paid 45 days before the birth term) is €75. Since 2010, mothers who are University students have the right (independent of their income) of a lump payment for a birth of a child (only if the child is not given to an institution). Sum in 2014 is €1440. Since 2010, mothers of twins have the right (independent of their income) of a lump payment for birth of twins. The sum is payable within one year after the birth of the children. In 2010 the amount was €600 for each twin-child.

Means tested allowances

In 2014, the means tested lump sum payment at birth was: €125 for the 1st child; €300 for the 2nd; and €100 for the 3rd and above. In addition a monthly child allowance is paid until finishing secondary school (but not later than age 20). In 2014, this was €18 for the 1st child; €26 for the 2nd and €18 for the 3rd or higher. In case of twin birth each child receives 150% of the basic amount for the second child. Finally, a monthly payment of €50 is made to mothers who are not entitled to parental leave (and benefits) for raising a child at home until the child's first birthday.

Maternity and parental leaves

Maternity leave in Bulgaria is 410 days, 45 of which are used before the birth. With the mother's consent, when the child reaches six months, the leave can be transferred to the father for the rest of the period. During these 410 days, social security beneficiaries who have worked at least 12 months prior to taking the maternity leave are paid an allowance of 90 percent of their gross salary by the National Health Insurance Fund.

At the end of the maternity leave, mothers are entitled to parental leave to raise their child until the child reaches age of two. This leave can be transferred to the father or to one of the grandparents who work under an employment contract and have social insurance. The amount of allowance payable during this leave is equal to the *minimum monthly wage*¹⁴ for the calendar year. The mother has the legal right of 1 more year of parental leave (until child's 3rd birthday) without allowance.

When the parents are married or live in the same household, fathers are entitled to 15 days paid paternity leave following the birth of the baby (since 2009) which is not transferable.

Childcare institutions

The childcare institutions in Bulgaria are crèches (for children aged 10 months – 3 years), and kindergarten (for children at ages 3 to 6). Both, public and private institutions are present. In the private institutions some additional entitlement requirements (for instance an infant being able to walk, etc.) may apply.

Most of the crèches are a part of a Kindergarten unit, however, independent crèches exist as well. Enrolment in crèches and kindergartens in Bulgaria is not obligatory. A law introduced in 2010 made the pre-school education obligatory for children above age of 5. Pre-school education is free of charge. It takes place either in kindergarten (for kids that have visited a kindergarten before is not a real change) or at the elementary schools where pre-school groups were opened. At the end of the pre-school education children receive a certificate which is needed for school enrolment.

The entitlement fees payable for public kindergarten and crèche are determined by law. However, the exact amount is defined on municipality level. In 2011 fees were between €24 and €30 per month.

School starts at age of 7. In some exceptions children may also start with age of 6. Education in Bulgaria is free of charge and is obligatory until age of 16.

State expenditures

State expenditures (include expenditures for the child and birth allowances, monthly payments for helping families, administration services) in 2014 are defined to 5.8%¹⁵ of all expenditures planned for year 2014. In comparison, the percent for these expenditures was 6.2% in 2013, 6.3% in 2012, and 5.9% in 2011.¹⁶

A2.3.4. Fertility trends

In a typical fashion for a Central and East European country period total fertility rates display some fluctuations reflecting mini baby booms generated by the changing emphases in pro-natalist policies from the early 1960s through the late 1980s (Figure 1). Corresponding completed cohort fertility rates of women born in the 1930s through the 1950s remained stable at slightly above 2.0 births per woman, i.e. the quantum of fertility was not changing.

The fundamental turnabout in political, social and economic conditions following the demise of communism had an immediate effect on childbearing behavior. The PTFR declined from 1.97 in 1988 to 1.12 births per woman in 1997 (Figure 1). This sharp reduction was the result of a quantum fertility decline occurring at the same time as women started to postpone childbearing.

The quantum fertility decline is documented by the drop in the cohort fertility rate at age 40 from 2.01 for the 1958 birth cohort to 1.67 births per woman in the 1969 cohort (Figure 1). Childbearing postponement can be observed in a number of ways. The period mean age of mothers at first birth (PMAFB) increased from 21.9 years

¹⁴ The minimum monthly wage is defined every year by the Government.

¹⁵ Own calculations on the basis of the given overall expenditures.

¹⁶ Sources: Council of Europe Family Policy Database www.coe.int/familypolicy/database

in 1992 to 25.7 years in 2010 (Figure 2). Although this was a relatively rapid gain, the PMAFB in Bulgaria around 2010 was still about three years less than, for instance, in Austria, Denmark or France.

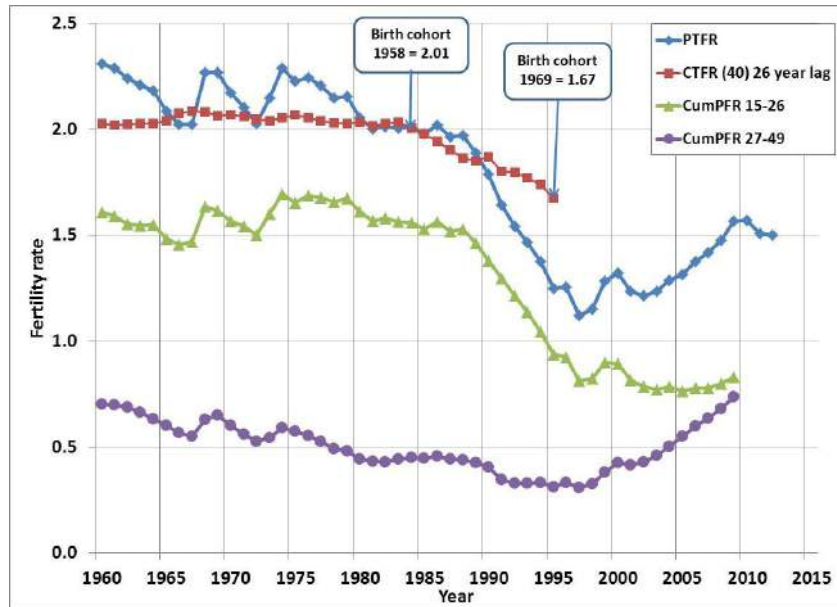
Fertility postponement is likewise depicted by the sharp decline in the cumulated period fertility rate of young women below age 27. The CumPFR 15-26 fell from 1.5 in 1988 to 0.8 in 1997 (Figure 1). Many of the births that were foregone by young women in their teens and early 20s during the 1990s were later recuperated when these women were older during the 2000s. The cumulated period fertility rate for women older than 26 years, the CumPFR 27-49 increased from 0.33 in 1998 to 0.74 in 2009 (Figure 1).

The increasing childbearing of older women during the 2000s was driving the overall increase of the PTFR, which grew from 1.21 in 2002 to 1.57 in 2009 (Figure 1). Whether any quantum fertility increase contributed to this PTFR growth cannot now be determined. There is however evidence that births of all birth orders increased during the 2000s (Figure 3). Again, it was mainly older women above age 26 that contributed to this growth (Table 1). Between 2013 and 2009 fertility of older women grew by 60 percent compared to an increase of only eight percent of young women. Surprisingly, first order births grew almost as fast as second order births among older women. Altogether 2nd order births increased the most, whereas the increase in higher order births was very modest (Table 1). The composition of births by birth order changed only marginally which corresponds to the relatively even increase by birth order (Table 2).

The quantum fertility decline of the 1990s combined with childbearing postponement is reflected in rapid changes in cohort age patterns of childbearing (Figure 4). The high and concentrated fertility around ages 20-21 in the birth cohorts of the 1960s was still present in the 1970 cohort. In contrast, in the 1980 birth cohort age-specific fertility rates are all around 0.08 to 0.09 births per woman for those between the ages 20- 28, the last age for which data were available.

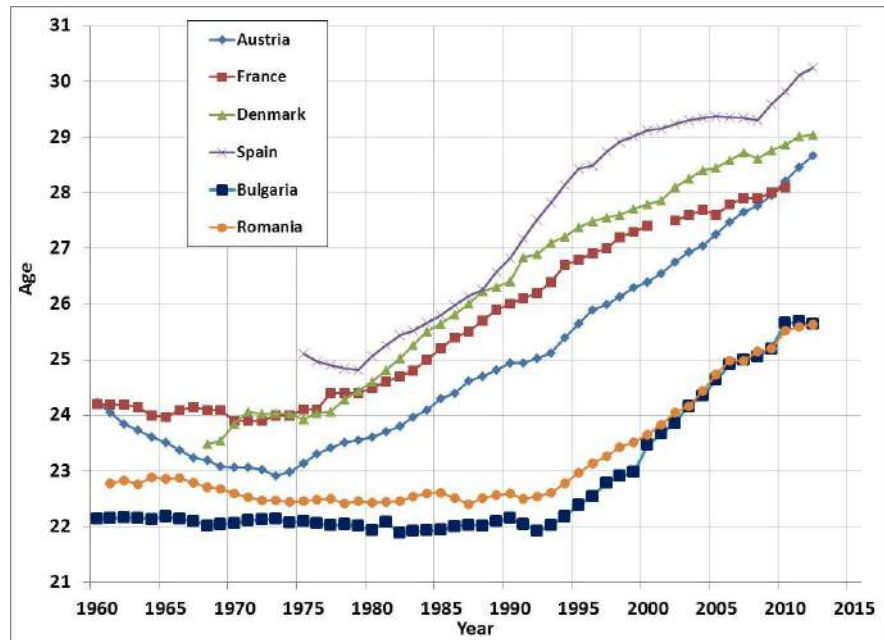
Bulgaria's population has been declining since the late 1980s. In 1990 Bulgaria had 8.7 million inhabitants which by 2013 declined to 7.2 million, a loss of 1.5 million, close to one-fifth of its population. About one million emigrated during the past two decades and the other half million deficit was due to excess deaths over births. Even the high variant of the official population projections of the National Statistical Institute projects a continuing loss of population. According to this variant the total population in 2060 would equal 5.8 million (Figure 6). The medium variant assumes a very modest increase in the PTFR from the 1.52 births per woman in 2015 to 1.61 in 2050. This medium variant is characterized as "as realistic and is estimated according to standard requirements of the European Union with regard to demographic and socio-economic development of the member countries." The medium variant projects a total population of 5.4 million in 2060 compared to the 7.2 million in 2013, a 1.8 million loss, i.e. a 25 percent of the population would be lost within less than half a century.

FIGURE 1 Cohort total fertility rate at age 40 (lagged by 26 years) and period total fertility rates, women all ages, aged 15-26 and 27-49, Bulgaria, 1960-2012



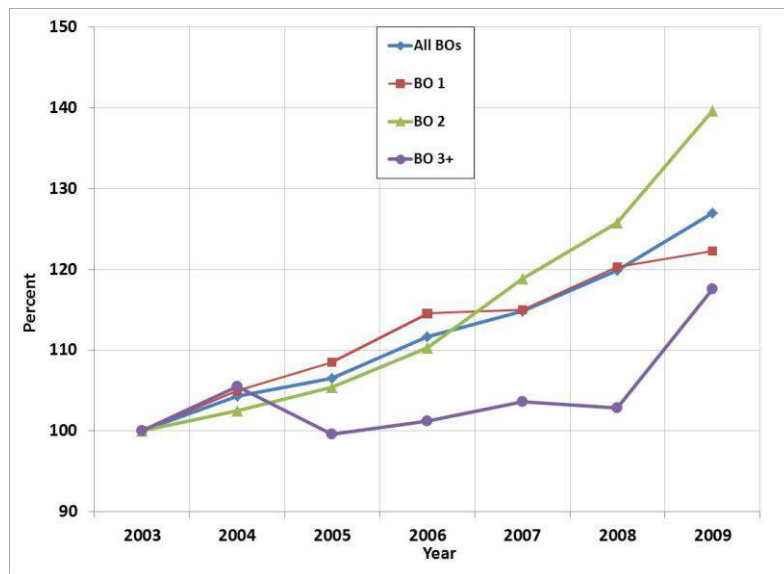
SOURCE: HFD 2014

FIGURE 2 Period mean age of mother at first birth, Bulgaria, Romania, Austria, France, Denmark and Spain, 1960-2012



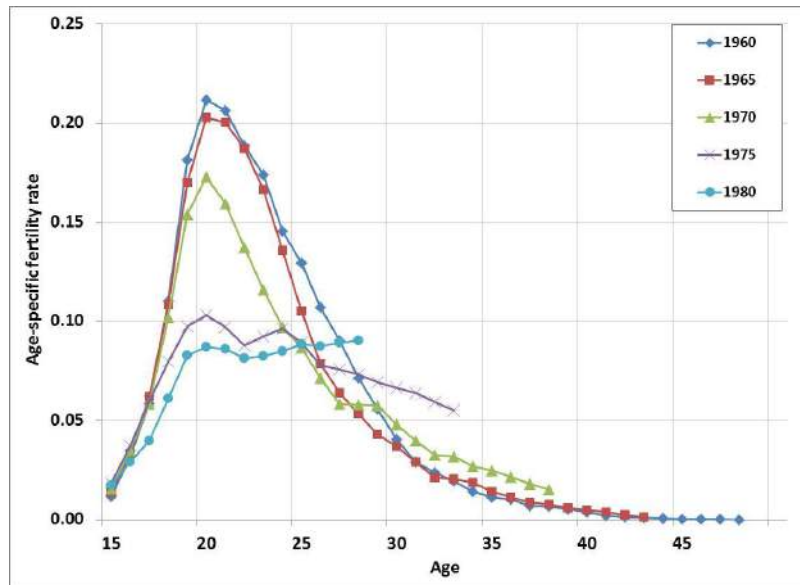
SOURCES: HFD, HFC & Eurostat, 2014

FIGURE 3 Period total fertility rate indexes, all birth orders combined and by birth order, Bulgaria, 2004-2012



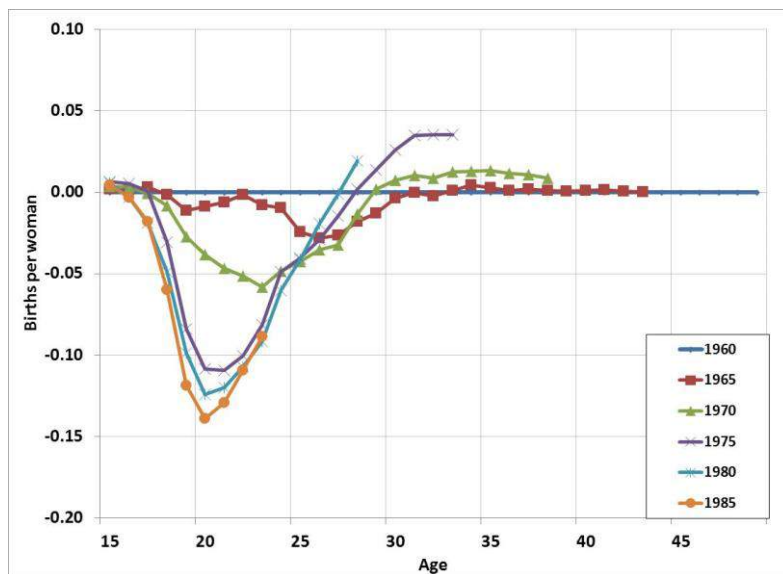
SOURCE: HFD 2014

FIGURE 4 Cohort age-specific fertility rates, Bulgaria, birth cohorts 1960, 1965, 1970, 1975 and 1980



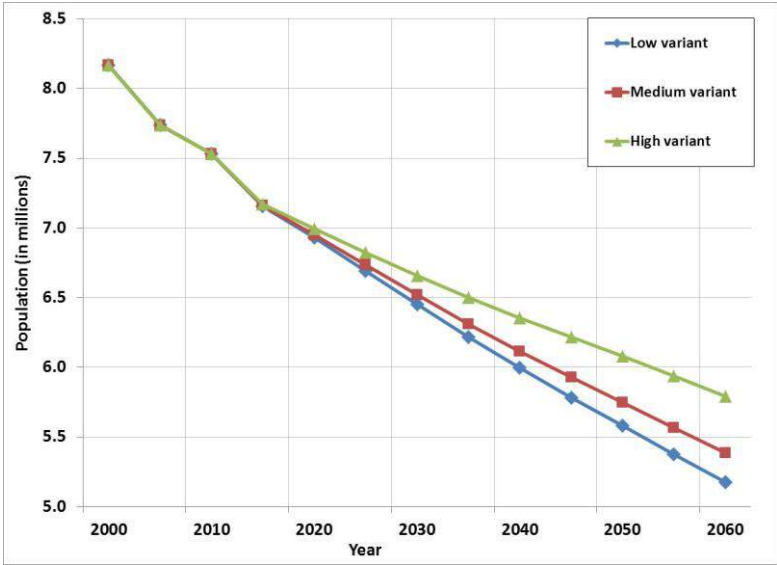
SOURCE: HFD 2014

FIGURE 5 Differences in cumulated age-specific cohort fertility rates between base and subsequent cohorts, Bulgaria, birth cohorts 1960 (base) 1965, 1970, 1975 and 1980



SOURCE: HFD 2014

FIGURE 6 Total population (2000-10) and projections (2010-60), low, medium, and high variants, Bulgaria



SOURCE: Bulgaria National Statistical Institute, 2014,

TABLE 1 Period total fertility rates, by birth order and age group, and percent increase between 2003 and 2009, Bulgaria, 2003, and 2009

Birth order	Total Fertility Rates		Percent increase 2003-2009
	2003	2009	
All women			
All	1.23	1.57	27.0
1	0.71	0.87	22.3
2	0.38	0.52	39.7
3+	0.15	0.17	17.6
Women aged 15-26			
All	0.772	0.830	7.5
1	0.517	0.552	6.7
2	0.192	0.208	8.6
3+	0.06	0.07	10.3
Women aged 27-49			
All	0.46	0.74	59.8
1	0.19	0.32	63.8
2	0.18	0.32	72.1
3+	0.08	0.10	23.1

SOURCE: HFD 2014

TABLE 2 Composition of period total fertility rate by birth order, Bulgaria, 2003 and 2009

Birth order	Total Fertility Rates		
	2003	2006	2009
All	1.23	1.38	1.57
1	0.71	0.82	0.87
2	0.38	0.41	0.52
3+	0.15	0.15	0.17
	Composition by birth order		
All	100	100	100
1	57.6	59.1	55.5
2	30.5	30.1	33.5
3+	11.9	10.8	11.0

SOURCE: HFD 2014

A2.3.5. Summary and conclusions

Family policy related to fertility in Bulgaria are, in general, aimed at promoting the transition to second birth (as seen through the disproportionately higher amount of both lump sum payments and monthly child allowances for second borns. However, there is very little policy implemented for improving the institutional support for parents. For instance, in most of the cities there are insufficient places in the nurseries and kindergartens leading to many problems for parents. Alternatives like daily mothers or parent's collectives are not allowed, and even forbidden by law. There is also very little done in the direction of reconciliation of family and work. Part-time work, or reduced weekly hours for parents with small children is not supported. When mothers return to work they have to work full time, which involves a lot of logistic and management hurdles in organizing the family daily life.

Even if a good practice, the implementation of the obligatory pre-school education was widely criticised. As described above, pre-school education could take place either at kindergarten, or at elementary schools. However, most of the kindergartens have no place for creating additional pre-school groups, while schools do not have the suitable basis for accommodation of such young children (such as toilets for small kids, tables and chairs, canteens, in-school dormitories, etc.).

A2.4. CROATIA

A2.4.1. Societal conditions affecting fertility

Scholarly literature on fertility in Croatia remains relatively scarce. This is largely due to the lack of fertility related data. Existing papers on fertility topics are based on non-random cross-sectional surveys.

Which are the obstacles, what actions should be taken and are there real chances of stopping the decrease in the number of live births in Croatia? Those were some of the research questions in the study carried out in Croatia by Akrap et al (2003). Survey Questionnaire on Fertility in Croatia was created, as research instrument with 50 questions and 250 offered statements (answers), with 650 variations in answers and statements. The questionnaire was created on the basis of the UN questionnaire model, used in the most countries for the purpose of conducting the survey on fertility. Basic goal of the research had been to identify the main problems of women, who are raising children in current Croatian economic and social circumstances and also to identify factors crucial for respondents' decision on giving or not giving birth to another child. That is why the sample of 1220 women in the age group 20-35, who already have one or more children, were surveyed. Field work was conducted in the period from October 2002 until the end of February 2003. The survey has identified significant demographic, economic, social, psychological and socio-psychological variables, directly or indirectly influencing the decision of women regarding the number of children they have or plan to have or do not plan to have in current economic and social circumstances in Croatia. Special attention in the survey had been given to

the research of the possible influence of some family policy measures on the change of decision regarding giving birth to another child.

On the basis of the survey question, respondents were divided into groups of women who wanted to have more children and those who do not. One part of women, who did not want to have more children, would consider changing that decision if some family policy measures were applied. Out of 1220 respondents, 60,6 percent plan to have more children, and the rest 39,4 percent of them do not. Respondents who do not want to have more children have, on the average 2,15 children, and those who plan to have more, have on average 1,41 children. According to all respondents, 2,32 is the „optimal“ number of children for women in Croatia. Respondents who plan to have more children, on the average want to have 2,7 children and consider 2,4 as „optimal „number. Larger number of respondents from the group of women who plan to have more children, want to have three children. This showed respectable potential tendency towards giving birth in the case of State intervention. Existential problems: unemployment, poor housing conditions and high financial expenses needed for raising the children- are the most often pointed out by respondents as the factors that influence the decision on having fewer children. Respondents believed that priorities of the government should be directed towards employing young people, employing women, improvement of housing conditions and care for the elderly people. Finally, the research showed that there are well founded reasons for potential demographic optimism in case of social intervention towards the unfavourable Croatian demographic reality.

In 2007 Akrap and Čipin conducted, on the proportional quota sample of 1309 employed women in Croatia aged 20-39, a survey titled *Women's employment and fertility in Croatia*. Akrap (2011) analyzed the connection between fertility and women's employment sector and finds that women employed in the commercial sector are more prone to postponing pregnancy. The lowest proportion of women not wanting children is found in the public sector of employment (health and education). The author also confirms a link between atypical working hours and fertility. Čipin (2011) focused on educational attainment and its effect on demographic behaviour. The results indicate a statistically significant impact of educational attainment on fertility tempo. Differences between actual and desired number of children are the largest among highly educated women. Akrap and Čipin (2011) investigated how fertility in Croatia is affected by combining professional and family responsibilities of women. Their findings show that employed women mostly prefer dual-earner family models, where both parents work outside of the household. Younger women have a more liberal point of view regarding a woman's position in the labour market. The inability to work part-time represents an obstacle to women who want to combine paid work with family obligations. Unfortunately, further insights into fertility-related behaviour require more detailed data. So far, demographic surveys providing data on complete fertility histories have not been conducted in Croatia. Analyses of past and present policy measures, as far as we know, do not exist.¹⁷

There is virtually no data on fertility intentions in Croatia – discussing trends in fertility preferences is, consequently, not feasible. One notable exception is the dataset provided by Round 5 of the European Social Survey (the ESS), which included information about plans to have (a)nother child (in the next three years). However, the ESS is not a demographic survey and, therefore, does not provide a complete set of fertility-related data needed to conduct a comprehensive study on fertility intentions. Furthermore, it is a cross-sectional study

¹⁷ Akrap, Anđelko; Čipin, Ivan; Pokos, Nenad; Ridzak, Tomislav; Živić, Dražen (2003) *Factors of Demographic Movements in Croatia*, Zagreb, State Institute for the Protection of the Family, Maternity and Youth (in Croatian)

Akrap, Anđelko (2011) Sector of Women's Employment and Fertility in Croatia, *Društvena istraživanja 20 (1)*: 3-23 (in Croatian)

Akrap, Anđelko & Čipin, Ivan (2011) Combining Work and Family Life in Croatia and Their Influence on Fertility, *Društvena istraživanja 20 (1)*: 47-68 (in Croatian)

Akrap, Anđelko & Čipin, Ivan. (2006) *Societal sterility in Croatia - Why are we unmarried and childless*, Zagreb, Ministry of Family (in Croatian)

Čipin, Ivan (2011) Education and Fertility of Employed Women in Croatia, *Društvena istraživanja 20 (1)*: 25-46 (in Croatian)

Čipin, Ivan (2010) *Demography of very low fertility in Croatia*, Doctoral thesis, University of Zagreb

and does not allow the examination of changes in fertility preferences over time (or their fulfilment). Some attempts to use the ESS data in fertility intentions research have been made by Croatian scholars (see, for example, Čipin & Međimurec, 2013), but there are no papers dealing explicitly with the formation, changes, realization or determinants of fertility intentions in Croatia.¹⁸

Družić (2006) analyses the economic state of affairs in Croatia (during a period of over one hundred years) thoroughly throughout his book – only a brief description of economic conditions in Croatia from the second half of the 20th century onwards is provided here. As many other Eastern European economies, Croatia experienced forced industrialization after World War II and became a middle developed industrial country in the 1970s. The period between 1952 and 1980 is characterised by rapid economic growth, average annual employment rate almost three times larger than the half century average, rising labour productivity and relatively low inflation. During the 1980s, Croatia experienced negative economic growth and stagflation, employment grew only slightly, labour productivity fell. The following decade was marked by the Homeland War (1991-95). The average annual growth rate was negative throughout the decade. The inflation rate was extremely high at the beginning of 1990s, but was curbed thereafter. Foreign debt tripled and the average annual employment growth rate was negative. Between 2000 and 2007 Croatia's economic performance began to improve. Economic growth was moderate, but stable, led by a rebound in tourism and credit-driven consumer spending. Inflation over the same period remained tame. Croatia experienced an abrupt slowdown of its economy in 2008 and still has not recovered. High unemployment rate, uneven regional development and a challenging investment climate are the main economic problems Croatia nowadays faces. According to Eurostat data, Croatia has the second largest unemployment rate and the third largest youth unemployment rate among the EU countries.¹⁹

It is generally considered in Croatia that housework and child care are mostly women's duty. Therefore, women have difficulties in reconciling work and family obligations. Majority of women perform most of the housework regardless of their employment status. Survey data on the topic of gender relations in family and gender policy are rare and small-scaled. In the study that included 120 dual-income couples Bartolac and Kamenov (2013) showed that women still contribute more to routine or traditionally female chores and they are less satisfied than men with this division of housework and finance. Both partners are most satisfied when they participate equally in family decisions. One earlier study (Topolčić, 2001) also showed similar results, with 150 married employees in Zagreb concluded that domestic labour division between marital partners is discriminating, with a much greater work burden on women.

UNDP survey (2006) on work-life balance in Croatia showed that women perform household activities to a much greater extent than men, with 35% of women who are involved in child-care and on a daily basis compared with 22.6% of men. More than four-fifths (80.7%) of women perform household chores every day compared with just 32.8% of men. According to the UNDP survey, seven out of ten women (71.6%) take care of children for up to five hours a day, compared with 59.5% of men. A similar scenario emerges in relation to household chores.²⁰

¹⁸ Čipin, I. and Međimurec, P. (2013), *The Impact of Atypical Working Hours on Fertility Intentions across Europe*, paper presented at 28th IUSSP International Population Conference, Busan 2013.

¹⁹ Družić, I. (2006), *A Journey through Transition Time*, Political Culture, Zagreb.

²⁰ UNDP (2006) *Quality of life and risks of social exclusion in the Republic of Croatia, Quantitative research on general population*, Zagreb, Croatia; Bartolac, A. Kamenov, Ž. (2013) Perceived Distribution of Family Obligations Between Partners and Perception of Equity in a Relationship, *Sociologija i prostor*, 195 (1): 67-90 (in Croatian); Topolčić, D. (2001) Men don't do that: Gender segregation of domestic division of labour', *Društvena istraživanja*, 10 (4/5): 767-789 (in Croatian). For more on gender equality in Croatia please

Ilišin, Bouillet, Gvozdanić and Potočnik (2013)²¹ have conducted an extensive study focusing on young people's lives in Croatia. Respondents in their study were aged 14 to 27. The results show that most of them are still at school. The number of unemployed (approximately one fourth) is very close to the number of those having a job (approximately one third). Young people mostly live in households with their parents. Consequently, socio-economic conditions they live in are rather favourable: 90% of respondents live in a family house/apartment with, on average, three other people, having one automobile and one computer with internet access at disposal. Insufficient financial resources are the main reason young people keep on living with their parents. The main professional goal of young people is to find a secure job. Two fifths of those who work have valid reasons to look for a job elsewhere (including a different country). Full-time employed make approximately 80% of average Croatian salary, which confirms the lack of financial funds for emancipation.

A2.4.2. Family policy strategy

Family policy in the period after World War II until 1990 was aimed on employees in the social sector while families of farmers and other private owners were out of sight of socialist family policy in Yugoslavia. In fact, family policy had been in the service of the development of socialist ideology, and everything that was not in the service of state ideology was neglected. In the first half of the 1990s family policy had been in the shadow of war, political, economic and social conditions. During that time basic instruments of family policy from socialist era remained in force, but due to a drastic decline in GDP, high unemployment, massive war damage and the large number of refugees and displaced persons, it had an impact on family policy that had become part of the social policy during the war (Puljiz and Bouillet, 2003). From 1995 until present Croatia formally adopted three documents concerning demographic policy with a goal to encourage an increase in fertility rate, but most of the proclaimed and officially written measures had never been implemented. Before 1990 within the Yugoslavia, Croatia had no official pro-natalist policy, probably due to large differences in fertility rates between various Yugoslav republics.

see: http://ec.europa.eu/justice/gender-equality/files/exchange_of_good_practice_fr/hr_comments_paper_fr2013_en.pdf

²¹ Ilišin, V., Bouillet, D., Gvozdanić, A. and Potočnik, D. (2013), Youths in times of crisis, First research of IDIZ-a i Zaklada Friedrich Ebert of the youths, Institute for Social Research in Zagreb and Friedrich Ebert Stiftung, Zagreb. (in Croatian)

Puljiz, Vlado; Bouillet, Dejana (eds.) (2003) *National family policy*, National institute for the protection of family, maternity and youth, Zagreb (in Croatian)

Firstly what follows is an excerpt from a document entitled National Demographic Development Programme. The publication is printed in Croatian and English in 1997. The Croatian Parliament adopted the National Demographic Development Programme on January 18, 1996. According to Puljiz and Bouillet (2003) proposed measures were very ambitious, with strong explicit pronatalism and with a proposal to go back to the original family values. Most of the measures had never been implemented primarily due to economic problems, and some of them were also subject of public debate in the following years (especially the introduction of so called „Mother Child-Raiser“).

NATIONAL DEMOGRAPHIC DEVELOPMENT PROGRAMME²²

PROPOSED POPULATION POLICY INCENTIVES

The future demographic picture will depend on Croatia's overall development and efficient implementation of special measures. Other prerequisites, in addition to the standard of living, include satisfactory professional standards (normal working conditions) and democratic standards (freedom of choice).

All legislative measures must be affirmative, non-restrictive and incorporate such principles as well ensure the equality of parents and their equal responsibility for child rearing.

The incentives are designed to revive the population growth of the Croatian people and entire population of the Republic of Croatia. The measures proposed herein are primarily aimed at helping families in child bearing and rearing.

Young married couples as well as families with more children should be enabled to solve their employment and housing problems in an easier way, with priority to be given to highly qualified young couples.

All types of privileges and reliefs for employed mothers should be introduced (by making an „infrastructure“ designed to promote maternity).

If a family is left on one provider, it should be made financially secure and in case of divorce a fair alimony must be ensured.

Special care is due to children and young people who should be given moral, legislative and health protection from any detrimental influence, habits of behaviour (drugs, alcohol, prostitution, maltreatment, etc.).

In view of the special importance of demography, a population research institute should be established as soon as possible, with knowledge gained in the area of demography to be built in secondary school and university curricula.

Measures ought to be introduced in succession and synchronously.

MATERIAL STATUS OF THE FAMILY

Children's and family allowances

Children's allowance is to be provided from the state budget. The amount of children's allowance should be linked to the national average pay in the last quarter, regulated as the child's right irrespective of the parent's income, but with higher allowances to be envisaged for lower-income families with children.

²² National Demographic Development Programme (editorial board, Vojnović Franka et al.). Zagreb, Croatia, Government of the Republic of Croatia, Ministry of Development and Reconstruction, 1997

The right to the allowance payable for the two firstborn children would be linked to the income and property status. It would rise progressively for families with three and four children. The increase for fifth child would be the same as for the fourth child and for the sixth and next child the rate would be digressive.

Proposed children's and family allowance:

1. *Family with one child (depending on income status) 20%*
2. *Family with two children (depending on income status) 22% for each child*
3. *Family with three children – 30% for each child*
4. *Family with four children – 35% for each child*
5. *Family with five children – 35% for each child*
6. *Family with six children – 30% for each child*
7. *Family with seven or more children – 27% for each child*

of the average pay. The arrival of the third child and the first and the second child would entitle the family to the allowance irrespective of its income and property status.

Housing

Young couples (both up to 28 years of age) and families with three or more children should be entitled to housing loans under favourable terms and conditions (no participation, low interest rate, three-year grace period, etc.) which would encourage childbearing.

Proposal: *after the birth of second child 5% of the loan debt would be written off, another 10% after the third child and then 15% each for the fourth and fifth child, another 10% after the sixth child and then 5% each for the seventh and next child. The same rates would apply to children born before granting the loan and on account of whom the loan was granted.*

Flats qualifying for such loans should be built in all counties, with special emphasis, however, on strategically important depopulated areas. If a family is interested in building a family house, loans should be granted primarily for locations outside major towns. Attractive loans should encourage young families in the countryside and in depopulated areas. In addition to housing loans such families should be given free building sites as well as agricultural land, subject to special arrangements.

Young married couples (especially highly educated) should be given state-owned flats for use (even if new ones are to be built) until they have solved their housing problem. Welfare council flats ought to be granted for use to poorer families with more children.

Tax reliefs

Of vital importance for the purposes outlined herein is a tax relief system for classified application in dependence on the number of children, to the effect that the tax burden borne by families with children would be less than that of taxpayers without children.

Granting of shares

Families with three and more children up to 18 years of age and for each newborn child should be granted shares at a progressive rate. Shares gained from other sources would not prejudice this right.

Layette

For each newborn infant make a one-time payment in the amount corresponding to the real costs of living.

Nurseries and kindergartens

Adapt the working hours of nurseries, kindergartens and school to office hours.

Lower the parents' share in covering the costs of nurseries and kindergartens and exempt from the share the families with three or more children, with mandatory enrolment advantages to be given to the latter.

For absence due to the child's illness certified by the responsible doctor, reduce the nursery or kindergarten fee.

Arrange medical care on separate kindergarten premises for children not so ill whose parents are unable to stay home with them.

Education

Ensure primary education for all children at state schools financed from the state budget, including textbooks and school accessories.

Ensure secondary school textbooks from the state budget for families with three or more children. Lower the students' participation in secondary school and university hostels and regulate accommodation preference for students coming from families with three or more children.

Ensure free transport to school to children in the countryside.

Welfare and health care

Ensure health care for all children, especially newborns without cost participation, in conformity with European standards.

Ensure medical care for families with sick child.

Exempt families with three or more children from health care cost participation.

Parental status

As the abuse of the newly conceived human life is practiced in Croatia on massive scale, the relevant authorities as well as medical and educational institutions should do their utmost to change this situation.

Accordingly, intense efforts should be put in the work with expectant mothers to ensure high professional and ethical standards.

A continuous working relationship should be established between medical and educational institutions, especially at secondary schools, to ensure proper instructions in the areas of human sexuality, promotion of the dignity of women and men and the values of married family life. Special emphasis should be laid on promoting the respect for the newly conceived human life.

Protection of expectant mothers at work

Prohibit heavy manual and night work of women during pregnancy and up to the completed third year of the child's life.

An expectant or nursing cannot be transferred to another workplace without her consent.

Prohibit dismissal from work for a pregnant woman, mother, father or foster or adopted parent as long as she/he is using the rights associated with the childbearing or parental leave.

Paid maternal and parental leave

Provision should be made for mandatory maternal leave in the duration of six months plus parental leave up to the completed first year of the child's life or up to the third year for the third or each subsequent child. After that neither parent would be entitled to reduced working hours.

***Alternative:** for the third and each subsequent child one of the parents would be entitled to parental leave up to the completed second year of the child's life, along with the right to shorter working hours up to the completed age of eight years of the youngest child.*

During the maternal and parental leaves unemployed mothers would be entitled to the average wages in Croatia, health and social insurance and pension scheme. A self-supporting parent should be afforded the same right to a paid maternal and parental leave as in the case of third child in the family.

Unpaid parental leave

Either parent has the right to use the unpaid parental leave up to the completed third year of the child's life (in cases not involving the third and each subsequent child), with pension scheme contributions to be provided from the state budget.

Accelerated pension scheme

For each born child every woman should be granted one year of the retirement age.

Paid status of parents-educators

For every fourth and next child one of the parents should be given the legal status of an educator with remuneration equivalent to that of a kindergarten nurse.

Paid leave

One of the parents with a handicapped child should be entitled to paid leave until the child has completed the eighth year of age and thereafter to shorter working hours.

Using the day off

Either parent to be given the right to use a day off once a week up to the completed 12th year of the youngest child.

In 2003, the left-wing coalition government adopted the document National Family Policy as a broad system of social support for the family. The measures it contained were related to housing, labour market, family services, promotion of parenting, health care for mothers and children, and family allowances. Special attention was paid to gender equality and female employment. But the National Family Policy was not implemented either because the government changed at the end of 2003. The text below presents a brief overview of the measures adopted by the Government, but not published in the Official Gazette.

NATIONAL FAMILY POLICY MEASURES²³

Demographic trends

- Adopt and systematically implement population (demographic) policy
- Conduct systematic demographic research, family and family policy research
- The introduction of demographic registers
- Measures related to housing loans for families with children
- In the system of tax deductions include expenses of family housing loans

The labour market

- The affirmation of women's employment through measures of vocational guidance, education, women entrepreneurship, training for jobs in professions and programs for groups of women who are disadvantaged
- Taking measures to combat the gray economy
- Legal regulation of work at home
- Flexibility of work
- Encourage the development of family business

Services aimed at families

- Preschool institutions make available to all children
- Establishment of centres for family
- Development of non-institutional forms of childcare for infants and young preschool children
- Development of programs for children with special needs
- Supporting programs aimed at the welfare of the disabled and elderly family members

Affirmation of successful parenting

- Informing and educating parents

²³ Puljiz, Vlado; Bouillet, Dejana (eds.) (2003) *National family policy*, National Institute for the Protection of Family, Maternity and Youth, Zagreb (in Croatian)

- Encourage the development of organizations, which support families (work with children, home help, support nursing homes, etc.)
- In the curricula at all levels of education include education about family, partnership, parenthood, sexuality, etc.
- Affirmation of partnerships and the development of democratic culture

Health protection of mothers, infants and young children

- Take all possible measures in order to achieve the higher levels of hospitalization of children, especially during their stay in the maternity hospitals
- Conduct systematic measures to protect women's health
- Systematically implement preventive actions in order to maintain and improve the health of female children
- Develop and implement a training program for doctors, midwives, health visitors and nurses for better involvement in family planning

Family benefits

- Existing rights in the system of family benefits (assistance for a layette, maternity leave, maternity benefits, and child allowances) should be saved from further reduction and gradually, in line with the capacity, increase
- Existing institute of parental leave significantly expand and flexibilize
- Recognize the institute of paternity leave
- Provide basic pension and health insurance on the basis of all forms of employment during maternity, parental and paternity leave
- To balance the rights of women and men considering the time spent on various family leaves
- Adjustment of family benefits

Family law protection of families and children

- Transfer of competencies from social welfare centres to courts when it comes to human rights and the improvement of judicial protection of family members, especially children's' rights. This implies the establishment of the family department at regular courts or the adoption of the new Family Law
- Adoption of the legislative provisions relating to the protection of domestic violence and create conditions for therapeutic work with the perpetrator and the victims - family members
- Improvement Protocol on interdepartmental cooperation of all entities that apply domestic law (courts, social welfare centres, police force, educational and medical institutions)
- Establishing a fund for the maintenance
- Legal regulation of reproductive rights

National Population Policy was adopted in Croatian parliament in 2006 and had defined different measures in the field of sustainable economic growth, basic and development conditions, family allowances and tax deductions, reconciliation of family and work life, childcare system and health protection of mother and child. Main emphasize was on demographic effects. Again, majority of important measures, as in the previous two documents were not implemented.

NATIONAL POPULATION POLICY - MEASURES²⁴

A. Sustainable economic growth, basic and developmental conditions

1. To encourage the development of potential central settlements and to direct internal migration trends
2. To ensure access to education for everyone
3. To encourage and subsidize establishment of production and service oriented companies, family enterprises and other forms of employment of the working and fertile population on the territories affected by emigration and accelerated aging, and poorly populated areas of the Republic of Croatia.
4. To direct future migration trends to underdeveloped and depopulated areas
5. To provide quality transportation connections between potential central settlements, between urban and suburban areas, of islands with the mainland and with the highlands.
6. To provide franchise on state –owned agricultural land for family farming purposes
7. To stimulate employment of unemployed young parents, single parents and parents of children with special needs
8. To stimulate and co-finance lifelong education and employment of long-term unemployed citizens, especially with aggravated employability factors, single parents of under-age children and unemployed parents with many children
9. To ensure the removal of discriminatory conditions related to the employment of young people, especially young women
10. To ensure the compliance with the principles of gender equality within the accessibility to the goods and services market, in the framework of significant aspects of social and economic life
11. To provide a housing policy strategy on the national, local and regional levels, especially for young people entering the labour market and establishing families
12. To provide lower interest rates on loans to young couples and families with children in the areas of special state interest, rural and depopulated areas

B. System of family benefits

1. To institutionalize the system of family benefits through special regulation/law
2. To provide the payment of one-time cash grant for newborn baby layette in the amount of 70% of the budgetary base rate
3. To provide child's allowance in accordance with family income
4. To provide the payment of pro-natal bonus for the third and fourth child in the family
5. To stimulate local and regional self-administration units to provide payment of child bonus

²⁴ National Population Policy, Kosor, Jadranka (Editor in Chief), Government of the Republic of Croatia, Ministry of Family, Veterans' Affairs and Intergenerational Solidarity, Zagreb, 2006

6. To link maternity allowance for employed mothers during the compulsory maternity leave period to the budgetary base rate
7. To link the allowance granted to employed parents for the period in which they use additional maternity leave, i.e. paternal leave, with the budgetary base rate
8. To grant the right to maternity allowances for all mothers who do not qualify for it as employed mothers during compulsory maternity leave in the amount of at least 50% of the budgetary base rate
9. To provide retirement insurance contributions in the amount of the gross income of employed mothers and parents, during the use of compulsory maternity leave and additional maternity, i.e. parental leave
10. To introduce the possibility of flexible use of additional maternity i.e. parental leave, for employed parents up to the child's eighth birthday
11. To promote a new system of family benefits, emphasizing the increased inclusion of fathers

C. Tax deductions

1. To increase the amount of tax deduction within the income for the first child, and for every child according to amounts defined before last amendments without decreasing basic personal tax deduction
2. To increase the amount of the upper limit for entitlement to tax deductions for maintenance expenses of existing housing, for young married couples and families with children
3. To increase the amount of the upper limit for entitlement to tax deductions for interest paid on approved housing loans granted to young married couples and families supporting children
4. To increase the amount of the upper limit for entitlement to tax deduction for paid housing rents for young married couples and families supporting children
5. To deduct the amount that parents pay for childcare services at home from the income tax base rate
6. To exempt one-time cash grant for newborn baby and the amount of family benefits provided by the employer in the amount of one budgetary base rate, from income tax, and to reduce the employer tax base rate for the same amount
7. To exempt from income tax one-time cash grant for newborn baby and the amount of family benefits provided by local and regional self administration units, in the amount of one budgetary base rate
8. To introduce privileged value added tax (VAT) rates for children's clothes, footwear, layette, food and hygienic products

D. Reconciliation of family and professional life

1. To provide state subsidies for payment of pay-roll taxes for parents working shorter hours i.e. part time for the first and second child up to the child's third birthday, and for the third child and every consequent child or twins up to their eighth birthday
2. To stimulate employers to implement the provisions of the Labour Act and to stimulate adoption of special regulations concerning particular employment arrangements and more flexible working conditions and workplace (part time work, work at home, work via telecommunications, flexible working hours, vacations)
3. To introduce a right for unemployed parents with three or more children to decline employment, according to regulations on mediated employment, outside their place of residence

4. To introduce a right for a single parent caring a child until its 10th birthday, and for one of the parents of a child with serious developmental disorders up to the child's 15th birthday, to decline employment, according to the regulations on mediated employment, outside their place of residence.
5. To increase the amount of income which an unemployed parent of a supported child may realize during unemployment, without losing the right to financial reimbursement, and without removal from the unemployed persons registry, in the amount of the budgetary base rate.
6. To implement targeted inspecting supervision aimed at the prevention of the gray labour market, illegal employment contracting for limited periods of time, overtime work, and working on weekends, as well as inspecting supervision of safety at work
7. To provide payment of prescribed reimbursement amount to employers for the retraining of employees, upon return of parents to work, depending on the length of the maternity leave and professional education degree of the employee

E. Childcare

1. To provide new preschool standards/norms regulating the work of preschool in two shifts
2. To provide free schoolbooks for compulsory education
3. To provide extended stay for children in primary education institutions
4. To provide a program for a controlled system of non-institutional care for infants and preschool children
5. To provide institutional care for all preschool children on territories of local and regional self-administration units
6. To stimulate establishing preschool day-care centres and playrooms in large companies and corporations
7. To create prerequisites for establishing private preschools and playrooms
8. To stimulate establishing family services' centres
9. To provide payment of reimbursement to parents living in the areas where local and regional self-administration units do not provide institutional care for their children, in the amount equal to the subsidy rate for such activities
10. To establish a non-profit foundation „Croatia for children“, the resources of which would contribute to the development of desired pro-natal trends and the strengthening of families with many children

F. Health protection of mother and child

1. To establish a Child Death Review Commission
2. To provide a decrease of the number prematurely born children and low birth-weight infants
3. To conduct preventive measures which would contribute to a decrease of violent deaths and disabilities of children and youth
4. To provide conditions for equalized prenatal care in counties and large cities
5. To provide systematic and complete application of the program „Maternity Wards – Children's Friends“
6. To provide better mother and children healthcare

7. To establish family planning and reproductive health centres in county hospitals, general hospitals and existing clinics
8. To establish counselling centres in clinics aiming at improves communication of experts and parents from rural and less accessible areas (islands and highlands)
9. To provide enhanced cooperation among experts and services active in child healthcare field

G. Sensibilization and information

1. To sensibilize the public for demographic issues
2. To establish the Institute for Demographic Research
3. To stimulate demographic research in existing scientific institutions
4. To run a media campaign for the promotion of the National Population Policy and family values
5. To define and initiate the National Movement for Childcare in Croatia including the demographic aspect and improving the quality of family life

A2.4.3. Specific family policy measures

An overview of the policy measures for combining paid work and family responsibilities in Croatia in the period 1945-1969²⁵

1945

Playrooms (kindergartens) and daycares (intended for children aged 3-7 years): **playrooms** are free educational institutions, **daycares** are social institutions with goal to facilitate working mothers and they are payable (maximum 35% of family income per member); mandatory establishment of **kindergartens** for cities and industrial areas (kindergartens are free); unified **child benefit** (independent of family income and number of children)

1946

Paid maternity leave lasting 12 weeks (6 weeks before and 6 weeks after the birth); compensation amounts between 80 and 88% of previous salary

1948

Nursery is being legalized as health-social institutions for children up to three years of age (nursery is in the jurisdiction of so-called Commissariat for national health and social care, kindergartens in the jurisdiction of Commissariat for national public education committee), parents had to participate in funding nursery (maximum 30% of family income per member); establishment of **kindergartens** becomes obligatory for companies with more than 200 employees.

1949

Paid maternity leave lasting 90 days (mandatory begins 21 days before the birth) – compensation in the salary amount before the beginning of the leave; **shorter working hours** are introduced: mother that nurses the child until 6th (exceptionally up to 8th) months of age, if there is nobody in the family that can take care of the child while the mother is at work; work protection for pregnant women and mothers with little children is introduced (exp. prohibition of night shifts and overtime work, prohibition of distribution of workers for a specified tasks);

²⁵ The text in this section is taken from Dobrotić. I. (2012), *Determinants of work-family policies in postcommunist countries*, PhD thesis, University of Ljubljana (in Slovenian)

amount for parents to pay for kindergartens and nursery is prescribed (dependable of the family income); progressive principle is introduced in the **child benefits** system

1951

Child benefits are being dependable of family income for the employed, the ones with bigger land, fields or smaller possessions with enough income to support children or the ones who are besides regular work relationship are conducting individual business; child benefit becomes the right of spouses (before that is was primarily the right of the husband)

1952

Child benefit becomes dependable of family income for all who are employed

1953

Regressive principle is introduced in the **child benefits** system (the amount declines with the number of children – from 8% per child in the case of two children to 33% per child in the case of 5 children)

1956

Kindergartens are defined as part of the educational system, with their functions coincides the task of preparing children for further education

1957

Paid maternity leave is extended and lasts 105 days, additional protection of pregnant women and female workers with little children is introduced

1959

Transit of the **preschool institutions** for public funding to self funding

1965

Paid maternity leave is extended and lasts 133 days, self-management agreements are introduced; 42-hour working week is introduced

1967

Paid maternity leave is shortened and lasts 105 days; child benefit: continues with the actual regression principle, child benefit decreases slower with the number of children

An overview of the policy measures for combining paid work and family responsibilities in Croatia in the period 1970-1969

1970

Unified **child benefit** is introduced

1971

Higher **child benefit** is introduced for children with health problems

1973

Paid maternity leave is extended to 180 days (100% compensation; 105 days mandatory), it may be used to work part-time until the child is 8 months old (if the child's medical condition demands so, this period may last until the child's first birthday); additional maternity leave is introduced until the child's first birthday (100%

compensation, but depending on the income status of the family; minimum compensation equals minimum wage)

1974

Operation of **nurseries and kindergartens** is governed by a single regulation (until then nurseries were under the jurisdiction of social protection); self-governing communities of interest for nurture and education are introduced

1976

Preschool education becomes mandatory, at least 150 hours in a year prior to primary school enrolment (costless)

1977

Daily social care for children of other families is legitimised (it is essentially envisioned for children of nursery age, in case of insufficient institutional capacity); higher **child benefit** for children in single parent families

1978

Mandatory maternity leave amounts to 180 days (100% compensation), enables part time work or additional maternity leave until the child's first birthday (as in 1973); part time work may last until the child's third birthday if the child's medical condition so requires; both mandatory and additional maternity leave may be used by the child's father, if the mother dies or leaves the child (additional maternity leave may be used also if it is so agreed upon with the mother and if the mother works full time)

1979

Additional maternity leave compensation is reduced to 70% of the previous salary (100% compensation is only available to single parents, to parents of children with health issues, to families with one partner unemployed and in the case of multiple births or to parents with three or more children)

1981

Compensation during **additional** maternity leave may amount to 50 – 90% of the previous salary, depending on the financial status (100% compensation is available only to those as in 1979); new regulation regarding **preschool childcare** are aimed at overseeing care service standards (space, personnel...)

1982

the **father** gains rights to take basic and additional maternity/parental leave, if the mother, for health reasons, cannot take care of the child, he may also take additional maternity/parental leave regardless of the mother's employment status, if it so agreed upon

1984

Unified parental participation in preschool programme financing is introduced which can amount up to 80% of the programme price and has to depend on the type of the programme, its duration and family income

1989

Compensation during additional maternity/parental leave also amounts to 100% of the previous salary (regardless of the financial status of the family)

1990

Lower bound of **preschool participation** is introduced – as of child's first birthday, compulsory preschool education lasts for 250 hours; systemic changes in financing and governing preschool facilities; the father may

use only additional parental leave except if the mother dies, abandons the child or cannot take care of the child for reasons related to health, or if both parents agree to do so and if the mother works full time; mother may freeze her employment status until the child's third birthday

1993

Upper bound of maternity leave compensation is introduced – must not exceed five times the minimum compensation determined by the Health Insurance Institute.

1995

National demographic development program is introduced (ambitious scheme for child benefits is predicted, beneficial housing loans for newlyweds, child tax benefits, free kindergarten and nursery for families with three or more children, three years long maternity leave for mothers with three or more children, paid status of parent-educator/sustainer for family with more than four children...)

1996

Paid three years long **maternity/parental leave** in case of multiple births or birth of third and every next child is introduced (in other examples unpaid leave may be used); it may be used to work part-time; so-called **mother-educator/sustainer** institute is introduced; rights on paid maternity leave is given to all the mothers **regardless the employment status** but only in case of multiple births or third and every next child (unified compensation if they are not employed); father may use the parental leave after the 42nd day after the birth if the mother agrees and she has a full time job; **additional protection** of pregnant women and mothers with little children is prescribed at the Labour market.

1997

Lower boundary for entering the **preschool programs** is at 6th month of child's age, greater pluralism of providers is introduced; **compensation** during additional maternity/parental leave (or working shorter hours) is defined as lump-sum compensation (only compensation for mandatory maternity leave is still 100% of previous salary with upper boundary)

2000

Progressive system of **child benefits** is legalized (child benefit can be between 4-16% of average net salary per child, depending on family's income and number of children in the family) it's never implemented and the same year is introduced child benefit dependable of income status of the family, which grows only for 3rd child and every next child (5-9% of average salary for first and second child, grows by 4-5% for 3rd and every next child, eligible are families with income per member of household smaller than 50% of average net salary)

2001

Three years long maternity/parental leave is terminated and two years long parental leave is introduced in case of multiple births (there is no ability for using it in form of shorter working hours) the right of **6 months paid maternity leave** is introduced for all mothers regardless employment status, **amount of lump-sum compensation is lowered** when additional parental leave is used; so-called mother-educator/sustainer institute can be implemented by fathers also

2002

The right on **child benefit** is tied on the budgetary basis and not on the average salary anymore; unified child benefit is introduced, dependable on the family's income (2 classes), eligible are families with income per member of household smaller than 40% of basis for calculations (the right for higher class only have single parents, children without parents and with health problems and children of veterans)

2003

National Family Policy is presented. **Upper boundary for compensation** in time of maternity leave cannot be higher than budgetary basis, raised by 28%; additional maternity/parental leave is **prolonged for 2 months**, if father enforces paternal leave lasting at least 3 months.

2004

The right on **3 year long maternity/parental leave** is reintroduced in case of multiple births and 3rd and every next child, this right have all the mothers regardless on employment status.

2006

Strategic document *National Population Policy* is introduced

2007

Upper income boundary for right on the **child benefit** is increased (for 40% on to 50% of base for calculations) and 3 classes are introduced; pro-natality bonus is introduces for 3rd and 4th child; the upper boundary for birth compensation is terminated but only in case of mandatory maternity/parental leave (compensation for additional maternity/parental leave is still lump-sum, implementation until the year 2008)

2009

Sex neutral terminology (difference between maternity/parental leave), obligatory maternity leave is shortened (till 42nd day after the birth), parental leave is becoming the right for both parents (volume is the same: 6 to 30 months in the case of “large” families), leave can be used more flexible (like working shorter hours until 8th year of child’s age).

	1990-1995	1996-2000	2001-2003	2004-2010
Maternity/parental leave				
- duration	180 days (obligatory)	180 days (obligatory)	180 days (obligatory)	Until 6 th month age of the child (obligatory 28 days before the birth and 42 days after the birth)
- compensation	100% (max. 5 times of the minimal compensation)	100% (max. 5 times of the minimal compensation)	100% (max. budgetary basis increased by 28%)	100% (of previous salary but only from 1.1.2008.)
- father's rights	If the mother dies, abandons the child or cannot take care of the child for reasons related to health	If the mother dies, abandons the child or cannot take care of the child for reasons related to health	If the mother dies, abandons the child or cannot take care of the child for reasons related to health	Mothers can transfer the rights after the 42 nd day to father // in case of death or other reasonable cause is the right of the father
- possibility for flexible usage	-	-	-	After the 42 nd day possibility of working part time (until child's 9 th month age)
Additional parental leave				
- duration	Until child's 1 st year age	Until child's 1 st year age; until 3 rd year age in case of multiple births or three and more children	Until child's 1 st year age, until 2 nd year age in case of multiple births	Until child's 6 th month age (30 in case of multiple births/birth of third and next child)
- compensation	100% (max. 5 times of the minimal compensation)	lump-sum compensation	lump-sum compensation	lump-sum compensation
- father's rights	If the mother dies, abandons the child or cannot take care of the child for reasons related to health; if the parents agree so and the mother has a full time job	If the mother dies, abandons the child or cannot take care of the child for reasons related to health; if the parents agree so and the mother has a full time job	If the mother dies, abandons the child or cannot take care of the child for reasons related to health; if the parents agree so and the mother has a full time job	In the same extent, but transferable
- possibility for flexible usage	In the form of working part time	In the form of working part time	In the form of working part time; 2 months longer if the father uses minimal of 3 months leave	In the form of working part time (duration is proportionally divided); until 8 th year of child's age at the same time / rotation; 2 months longer if the father uses minimal of 3 months leave
Father's leave	The law does not recognize it	The law does not recognize it	The law does not recognize it	The law does not recognize it
The Labour market				
- protection on the labour market	Protection of pregnant women; reinstatement on the same job position after the parental leave; provision of other appropriate work; prohibition of dismissal of a pregnant woman/parent on a parental leave/parent with 3+ juvenile children/single parent until 7 th year child's age; prohibition of over-time work and night shifts for pregnant women/female worker with children until 2 nd year age, for single parent is allowed with his approval until 7 th year of child's age	Protection of pregnant women; provision of other appropriate work; prohibition of dismissal of a pregnant woman/parent on a parental leave in 15 days after the leave; prohibition of over-time work for pregnant women/mother with children until 2 nd year age, for single parent is allowed with his approval until 6 th year of child's age; prohibition of night shifts for pregnant women/female worker with children until 2 nd year age, for single parent is allowed with his approval until 3 th year of child's age;	Protection of pregnant women; provision of other appropriate work; prohibition of dismissal of a pregnant woman/parent on a parental leave in 15 days after the leave; prohibition of over-time work for pregnant women/mother with children until 2 nd year age, for single parent is allowed with his approval until 6 th year of child's age; prohibition of night shifts for pregnant women/female worker with children until 2 nd year age, for single parent is allowed with his approval until 3 th year of child's age;	Protection of pregnant women; provision of other appropriate work; prohibition of dismissal of a pregnant woman/parent on a parental leave in 15 days after the leave; prohibition of over-time work for pregnant women/mother with children until 3 rd year age, for single parent is allowed with his approval until 6 th year of child's age; night shifts for the pregnant women only with their approval; breaks for nursing; prohibition of asking information about pregnancy in employment

<ul style="list-style-type: none"> - shorter working hours - flexible working arrangements 	<p>Shorter working hours until 3rd year of child's age if the child has health problems</p> <p>-</p>	<p>breaks for nursing; prohibition of asking information about pregnancy in employment Shorter working hours until 3rd year of child's age if the child has health problems</p> <p>-</p>	<p>breaks for nursing; prohibition of asking information about pregnancy in employment Shorter working hours until 3rd year of child's age if the child has health problems</p> <p>-</p>	<p>Shorter working hours until 3rd year of child's age if the child has health problems; right and obligations in work relationship as in full time working hours</p> <p>-</p>
<p>Parents outside the labour market</p>	<p>-</p>	<p>Maternity/parental leave only in case of multiple birth/3rd or next child (lump-sum compensation)</p>	<p>Six month maternity leave (lump-sum compensation)</p>	<p>Same as employed parents; absolution from work until 1st or 3rd year of child's age, depending on the number of children (lump-sum compensation)</p>
<p>Preschool care</p> <ul style="list-style-type: none"> - forms and responsibilities - co-financing from parents - quality factor (predicted group size) - quality factor (child/educator) - widespread of network - support of alternative care types 	<p>Mainly institutional and public (from 1st year until entering the elementary school), ministry responsible for school system</p> <p>Provided, but without rules adopted at the national level</p> <p>12-16 until 3rd year age/ 20-30 after 3rd year age</p> <p>14,5</p> <p>23,7% (10,2% until 3rd year age//32,6% after 3rd year age)</p> <p>The law does not recognize it</p>	<p>Mainly institutional and public (from 6th month until entering the elementary school), ministry responsible for school system</p> <p>Provided, but without rules adopted at the national level</p> <p>12-16 until 3rd year age/ 20-30 after 3rd year age</p> <p>13,5</p> <p>26,1% (10,6% until 3rd year age//37,2% after 3rd year age)</p> <p>The law does not recognize it</p>	<p>Mainly institutional and public (from 1st year until entering the elementary school), ministry responsible for school system</p> <p>Provided, but without rules adopted at the national level</p> <p>12-16 until 3rd year age/ 20-30 after 3rd year age</p> <p>12,3</p> <p>36,4% (13,9% until 3rd year age//43,6% after 3rd year age)</p> <p>The law does not recognize it</p>	<p>Mainly institutional and public (from 1st year until entering the elementary school), ministry responsible for school system</p> <p>Provided, but without rules adopted at the national level</p> <p>5-12 until 3rd year age/ 14-23 after 3rd year age</p> <p>12,9 (2008)</p> <p>42,1% (17,5% until 3rd year age//54,4% after 3rd year age)</p> <p>The law does not recognize it</p>

Money benefits for families - child benefit - addition for large families - tax benefits	Unified, depends on the family income - Individually, progressive system, for dependent family members and children	Progressive, depends on the family income (boundary is 50% of average income) - Individually, progressive system, for dependent family members and children	Unified, depends on the family income (2 classes, boundary is 40% of the base for calculation) - Individually, progressive system, for dependent family members and children	Unified, depends on the family income (3 classes, boundary is 50% of the base for calculation) For 3 rd and 4 th child Individually, progressive system, for dependent family members and children
--	---	---	--	--

A2.4.5. Summary and conclusions

A2.5. CZECH REPUBLIC

A2.5.1. Societal conditions affecting fertility

Politics and economy

Gender, family and work

Although female labour participation is high and had been almost universal during the state socialist era of the 1970s-1980s, the new policy system established in the 1990s favours long withdrawal of mothers from the labour market and supports to a large extent traditional gender division of roles between parents of smaller children, with fathers acting as male breadwinners. A majority of women withdraw from the labor market and stay on parental leave for a prolonged period of time, typically for 3-4 years after childbirth. In addition, very few fathers take parental leave. The number is rising gradually, but fathers made up only 1.8% of parents on paid parental leave in 2013.²⁶

There are rather limited options for parents to reduce work hours and work part-time. Most companies do not support or even allow this option. Also wages for part-time work are often too low to allow parents having a decent income. Only 3.9% of employees worked part-time in 2008, lowest number in OECD countries after several other post-socialist countries (Hungary, Slovenia, Slovakia); far below neighbouring Austria (18.5%) or Germany (21.9%).²⁷ This creates a paradoxical dichotomy of most women experiencing a complete withdrawal from the labour market for 3 years after the childbirth followed by a return to full-time labour participation thereafter. This cycle is typically repeated again when another child is born and leads to the loss of skills and income among working mothers.

Until recently, preferential treatment of single mothers created an incentive to a) give birth outside marriage, b) not to report/register the father at the childbirth, c) not to report living with the partner (father of the child). For the mothers of kids born before Jan. 2009, single mothers were entitled to extended maternity allowance (37 instead 28 weeks), until 2010 they were entitled to higher social benefit (+600 CZK/month); low income households were also entitled to an additional social allowance (*sociální příplatek*) until 2012.²⁸

A2.5.2. Family policy strategy

After the end of the state-socialist system, the previous pro-natalist function of family policy was abandoned and policies affecting families became mostly based on broader social welfare policies aimed at reducing income inequality, providing a minimum level of social security, and preventing poverty. More emphasis was placed on parental leave policies, and, in general, the government showed little interest in formulating explicit population policies.²⁹ The period 1990-98 was characterised by generally high levels of redistribution, and relatively low levels of poverty and social exclusion. While there was little emphasis on female employment, there was some strengthening of the male breadwinner model and the “push” for women to perform childrearing at home: collapse of early childcare (below age 3) in the 1990s, as expensive-to-operate crèches, owned by municipalities, faced declining demand and became a rising financial burden. This went hand in hand with another expansion of parental leave period until the child’s 4th birthday in 1995 (but leave allowance paid only up to the child reached the age of 3 – so there was a mismatch between leave availability with workplace reservation and the period for which the allowance was paid). Since then Czech Republic has one of the longest leave periods among developed countries. Paid parental leave for parents of first-borns was introduced in 1990, while fathers also became eligible to receive parental allowances. In terms of reproductive health, there was a huge expansion of availability of contraception – especially of The Pill – and a sharp decline in abortions occurred after charging was introduced in 1992.

²⁶ (Ministry of Labour and Social Affairs, press news 12 March 2014, http://www.mpsv.cz/files/clanky/17476/tz_120314a.pdf)

²⁷ (OECD 2011, *Doing Better for Families*, Table 4.2)

²⁸ (Martina Štípková 2013, Master Thesis)

²⁹ Sobotka et al. 2008, Dem Research: 441

While there was no massive reorientation of family policies during the period 1998-2008, some shifts were visible in each new government. After 2005, more concern about low birth rates and about pro-family policies is visible, related both to the agenda of Social Democratic government and the entry of the Czech Republic to the EU, which exposed the policy-makers to EU agenda promoting family policies and gender equality. During this period a number of important legislative actions regarding family policy occurred, with the 1998 coalition of Czech Social Democratic Party (CSSD) and Christian Democratic Party (KDU) placing a stronger emphasis on supporting families. From 2004, unlimited additional part-time income allowed for parents on parental leave was introduced, while in 2005 the “*National Concept of Family Policy*” (MLSA 2005) was introduced, the first of its kind since the end of state socialism. This declares both general and specific aims of family policies, as well as general rules, within which these aims are to be achieved. The stated aims of the *Concept* are not explicitly pro-natalist and are mostly drafted in rather general and declaratory terms so as not to antagonise any particular interest group. They focus on the creation of a “family-friendly environment”, which “will enable individuals to achieve their life strategies in fulfilling their partnership and family plans” and at the same time “to respect diverse interests and needs of various family types” (MLSA 2005: 9, authors’ translation).³⁰

From 2005-2008, therefore, the family policy framework in the Czech Republic was significantly expanded. In December 2005 (shortly before new elections due in June 2006) the Chamber of Deputies voted to double the value of parental leave allowance, effective from 2007. Earlier the Chamber of Deputies agreed on an increase in the birth allowance from 8,750 to 17,500 CZK per child, i.e. effective as of April 1, 2006. In addition, plans to double the value of child allowance, which ranks among the lowest in Europe, were discussed. In January 2008, a ‘Flexibilisation of Parental Leave’ was introduced with “multispeed” leave options created with three basic periods and different levels of payments. This included an increased rate of CZK 11400 per month up to 24 month of child’s age (lower-income and non-employed parents are not eligible); a basic rate of CZK 7600 per month up to 36 month of child’s age, and a reduced rate CZK 3800 per month up to 48 month of child’s age. Finally, since 1997 each infertile woman aged under 40 can undergo three treatment cycles of assisted reproduction paid from the public health insurance (Kocourková 2012)

The period 2008-13 was, politically, a rather unstable period broadly characterised by centre-right coalition governments overseeing reforms & cuts in public budget, partly necessitated by the looming economic recession. Some benefits became means-tested. In 2008, the birth grant was reduced to 13,000 CZK per child; lower income limit for receiving monthly child allowance (decreased to 2.4 Living Minimum, Child Allowances have been set at fixed amounts). In 2009 a lower replacement rate of maternity leave was set, and in January 2011 restrictions of birth grants provision were introduced limiting eligibility only to parents below certain income level & for first-born children. In 2012 further flexibilisation of parental leave provision was adopted. Parents can decide about its duration & leave payment period (19-48 months), when a total sum of CZK 220,000 is distributed in monthly installments.

In January 2014, a new centre-left coalition government was formed by Czech Social Democratic Party (CSSD) and ANO movement. The new secretary of the Ministry of Labour and Social Affairs aims to push for the establishment of “children groups” (see next section), expanded public childcare, re-establishment of birth grants for second and later children and better employment opportunities for women with young children, especially through expanding opportunities to work part-time. She also plans to discuss an introduction of an extra month or two of parental leave reserved for fathers only.³¹

A2.5.3. Specific family policy measures

Leave and support system currently in place³²

Parental allowances and leave

A means-test birth grant of CZK 13,000³³ is currently paid to low-income families on the birth of their first child.

³⁰ Sobotka et al. 2008, 441

³¹ (based on different interviews with the minister M. Marksová and news items about her plans and ideas)

³² Note: Exchange rate Czech koruna / Crown (CZK): 27.5 per EUR in April 2014; in 2012-October 2013, the exchange rate was between 25 and 26 CZK per EUR. Exchange rate CZK / US \$: 19.9 in April 2014)

Women are eligible for 28 weeks of paid maternity leave usually starting c. 6 weeks prior to giving birth. In order to be eligible, women have to work for 270 days during the previous two years; and are entitled to a proportion of their wage, which is income dependent. Women with a lower income (daily gross salary up to 863 CZK in 2013) are entitled to a net maternity leave allowance amounting to 70% of their gross salary. Unemployed and non-employed can receive parental leave allowance. Overall, women obtain on average 68.9% of full-time equivalent wage when on maternity leave (data for 2011/12 from OECD database). Maternity leave can also be taken by fathers seven weeks after the childbirth.³⁴ No specific entitlement for fathers is possible at present though possible changes are being debated.

Primarily owing the low availability of childcare, a very long entitlement of parental leave is available – up to the child reaching his/her fourth birthday. During this period parents can be economically active. A parent is entitled to a parental allowance (*Rodičovský příspěvek*) when s/he personally provides full-time and proper care for the youngest child in the family. Both parents can take up the leave, but unlike in Austria or Germany no additional leave entitlement (bonus weeks or months) exist for men. Parental allowance is paid with a flat monthly payment depending on the selected leave duration. Since 2012 parents can flexibly decide for any duration of receiving the leave from 19 up to 48 months and can adjust total leave period every three months. The total amount of parental leave allowance in 2014 is 220,000 CZK per leave; maximum payment 11,500 CZK/month for 19 months (only for parents above a certain salary level prior to the leave), minimum payment: CZK 7600 for the first 9 months & CZK 3.800 in months 10-48.³⁵ Overall parents obtain on average 25.3% of full-time equivalent wage when on parental leave (data for 2011/12 from OECD database).³⁶

Finally, there is a very small child allowance of CZK 500-700/child/month, basic benefit per dependent child up to the age of 26 years who lives in a family with an established income of less than 2.4 times the subsistence minimum.³⁷

Public childcare provision

A sharp divide exists between the provision of childcare in *crèches* for children below age 3, which is almost non-existent in many places and the provision of childcare for children aged 3-6, where a large majority of children are enrolled, especially at ages 4-6. After-school care and activities for younger primary school pupils is usually available as well, 18% of kids aged 6-14 were enrolled in out-of-school-hours care in 2008 (OECD 2011, *Doing Better for Families*, Figure 4.6)

The previous system of *crèches* essentially collapsed between 1990 and 2005 when 94% of facilities were closed. In 2007, only 49 public *crèches* operated in the whole country (*Council of Europe Family Policy Database* 2009); they are operated by municipalities. More recently their number started increasing gradually, especially in cities, due to increasing private provision.

Enrollment, % children aged 0-2 enrolled: 2.6% in 2006, 4.0% in 2010 – the lowest share after Slovakia (3.0%) among 33 OECD countries (*OECD Family Database* 2014, Table PF3.2). In terms of costs – for public

³³ 100CZK = €3.6; so 13000CZK = €473 (xe.com, May 2014)

³⁴ (Source: Ministry of Labour and Social Affairs and <http://www.penize.cz/matrska-dovolena/245770-porodne-a-materska-2013>)

³⁵ Information on social support payments available at <http://socialni-davky-2014.eu/rodicovsky-prispevek-2014/>, accessed 16 April 2014)

³⁶ (Sources: *Council of Europe Family Policy Database* (www.coe.int/familypolicy/database), *OECD Family Database*, Ministry of Labour and Social Affairs and <http://www.penize.cz/rodicovska-dovolena/283678-rodicovsky-prispevek>)

³⁷ (http://www.mpsv.cz/files/clanky/6600/information_family_policy.pdf).

facilities, 1,500 CZK/month for registered residents in a given district; ca. 5,000 CZK/month for other children; in private facilities: 7,000-18,000 CZK/month.

Kindergartens are currently managed by municipalities and are generally available for preschool children aged 3-6; younger kids may be accepted for 4 hours/day if the capacity allows. There is generally wide coverage, but since about 2010 increasing problems with provision & capacity due to the baby boom around 2008, especially in cities and expanding suburban settlements. In case of capacity problems, children resident in the district and older children get priority and the kids aged 3-4 remain relying on other options. The government is aware of the shortage of available places and supports capacity expansion. Enrollment, % children aged 3-6 enrolled: Slightly declining over time, in contrast to most other developed countries. 84.5% in 2005, 78.9% in 2010 – almost identical OECD average of 78.2% (*OECD Family Database* 2014, Table PF3.2). Costs: Usually free provision in public facilities except for the meals. Relatively few private facilities exist as the costs are too high for most parents.

A hybrid childcare option between formal and informal childcare, a “child group”, is supposed to provide cheaper, less regulated and more readily available childcare alternative to public childcare for children aged 0-7. It’s similar to a well-established model of “Tagesmutter” (“day mother”) in Germany. The legislation needed to give a legal framework to the child groups has not been yet approved by the Parliament, but the Ministry of Labour and Social Affairs supports it.

Informal childcare, most often provided by the relatives (grandparents) is widely used. In 2008, 35% of children aged 0-5 regularly used informal childcare, which was above the EU average of 24% (EU-SILC survey, data provided in *OECD Family Database*, Table PF3.3.A)

A2.5.4. Fertility trends

From 1960 to 1990 the period total fertility rate (PTFR) in the Czech Republic fluctuated quite widely between 1.9 and 2.4 births per woman (Figure 1). Towards the end of the 1960s the government became concerned about declining and low fertility. A series of elaborate pro-natalist measures were implemented, including generous loans to newly-weds which could be written off when children were born (Frejka, 1980). These measures did generate a mini baby boom during the 1970s, a more than 30 percent increase in the PTFR from 1.86 in 1968 to 2.44 births per woman in 1974. All the government managed to generate was to advance childbearing. Completed cohort fertility rates of women born during the late 1930s, the 1940s and the 1950s remained uniformly slightly above 2.0 births per woman (Figure 1).

Following the demise of state socialism in 1989, major changes occurred in childbearing behavior. The PTFR declined from 1.91 in 1990 to 1.14 in 1999 (Figure 1). To a large extent this was due to a major postponement of childbearing from a young age to a more advanced age from one generation to the next. The quantum of fertility also declined. In the Czech Republic this decline was relatively moderate. Women born in 1957 had a cohort total fertility rate of 2.06 at age 40 which declined to 1.84 for women born in 1971 (Figure 1).

Taking a period perspective, the childbearing postponement during the 1990s can be observed in the sharp decline of fertility among young women aged 15-26 from 1.39 births per woman in 1990 to 0.47 in 2005, a 66 percent decline. Childbearing started to grow among older women aged 27-49 in the late 1990s. It increased from 0.51 births per woman in 1999 to 1.05 in 2005, a 106 percent increase (Figure 1).

Childbearing postponement was also reflected in the trend of the period mean age at first birth (PMAFB). It started to increase rapidly in the mid-1990s, from age 22.6 in 1993 to age 27.9 in 2012 (Figure 2). In the early 2010s the PMAFB had reached the same level as in France and Austria.

Viewed from a cohort perspective, considerable changes took place in the age patterns of childbearing. The peak of childbearing shifted from ages 20-21 in the 1960s birth cohorts to around age 29 in the 1970s birth cohorts

(Figure 4). An effective recuperation in the 1970s birth cohorts was characteristic for the Czech Republic (Figure 5). Taking the 1960 birth cohort as a base, subsequent cohorts regained the loss of childbearing when young as they became older. Not only that, even when comparing cohorts five years apart, there was a tendency, although not very pronounced, to recuperate births (Figure 6).

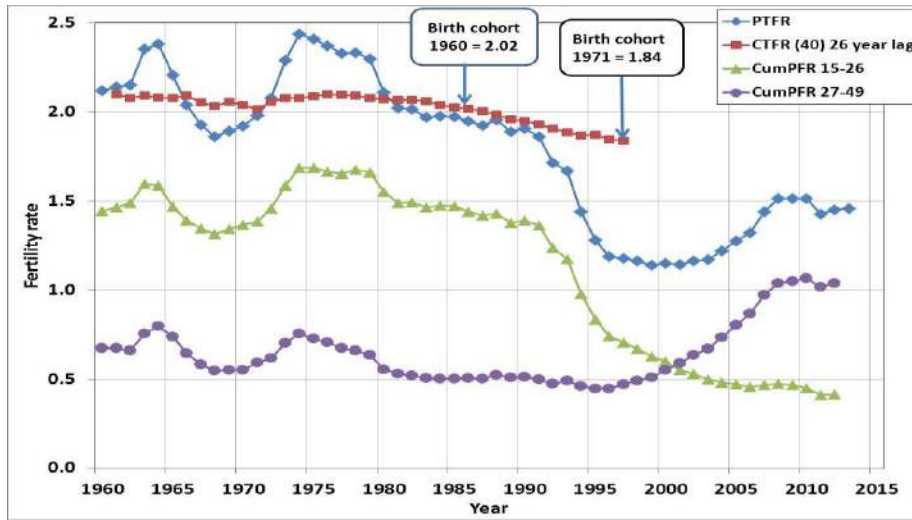
Childbearing postponement was occurring continuously not only when period fertility rates were declining during the 1990s and continued in the mid to late 2000s as PTFRs were increasing. Note the continuing modest fertility decline among young women during the 2000s (Figure 1).

During the 2000s as PTFRs were recuperating, overall changes in the composition of births by birth order were modest (Figure 3, Table 2). The share of first order births remained stable at 49 percent, while the share of second order births increased marginally and the share of third order births declined (Table 2). The period fertility recuperation was actually driven by the increase in numbers of first and second order births among the older women above age 27. This was offset by declines in 1st and 2nd order births among women under age 27 (Table 1).

In sum, PTFRs recuperated from their low levels which they experienced between 1996 and 2003. Between 2004 and 2008 the PTFR increased by about 25 percent, but essentially stalled thereafter.

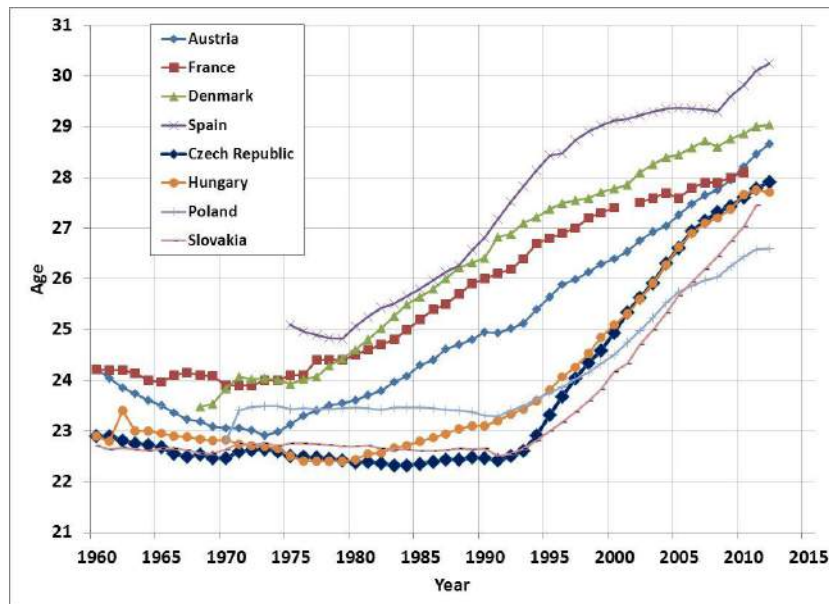
The size of the Czech population fluctuated during the 1990s and 2000s (Figure 7). It suffered some losses between 1994 and 2002, but these were more than regained by 2010. Nonetheless, experts at the State Statistical Office are skeptical about future fertility. The medium variant of the official population projections through 2050 assumes only a very modest increase in the PTFR from 1.45 births per woman in 2013 to 1.56 in 2050. Thus according to this medium variant the total population is projected to decline from 10.5 million to 9.8 million in 2050. According to the high variant the country's population would remain even by 2050 at 10.5 million. The low variant projects a considerable loss of 1.4 million so that by 2050 the total population would number 9.1 million (Figure 7).

FIGURE 1 Cohort total fertility rate at age 40 (lagged by 26 years) and period total fertility rates, women all ages, aged 15-26 and 27-49, Czech Republic, 1960-2013



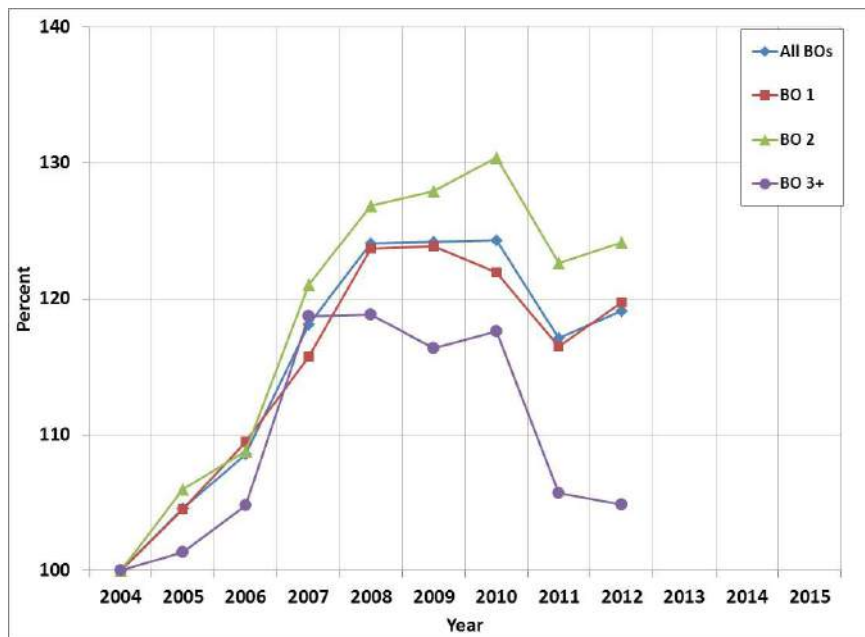
SOURCE: Czech Statistical Office, 2014

FIGURE 2 Period mean age of mother at first birth, Czech Republic, Hungary, Poland, Slovakia, Austria, France, Denmark and Spain, 1960-2012



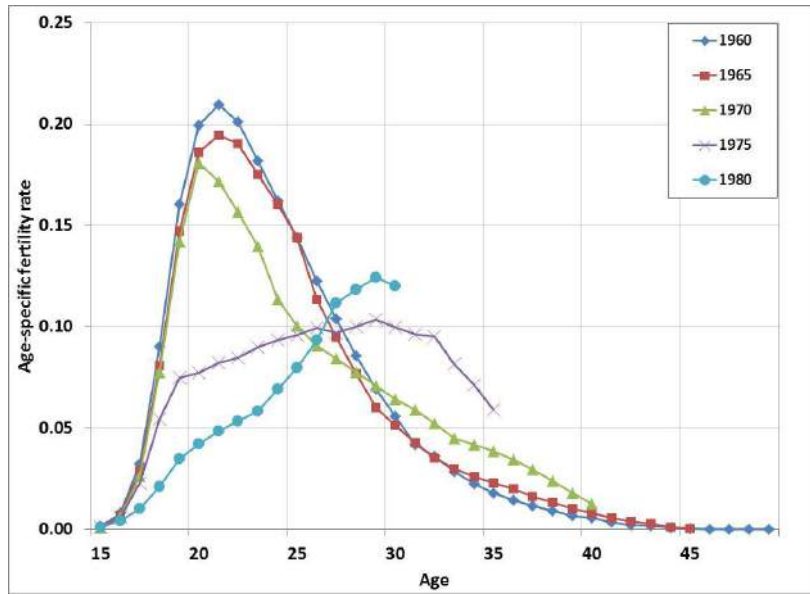
SOURCES: HFD, HFC & Eurostat, 2014

FIGURE 3 Period total fertility rate indexes, all birth orders combined and by birth order, Czech Republic, 2004-2012



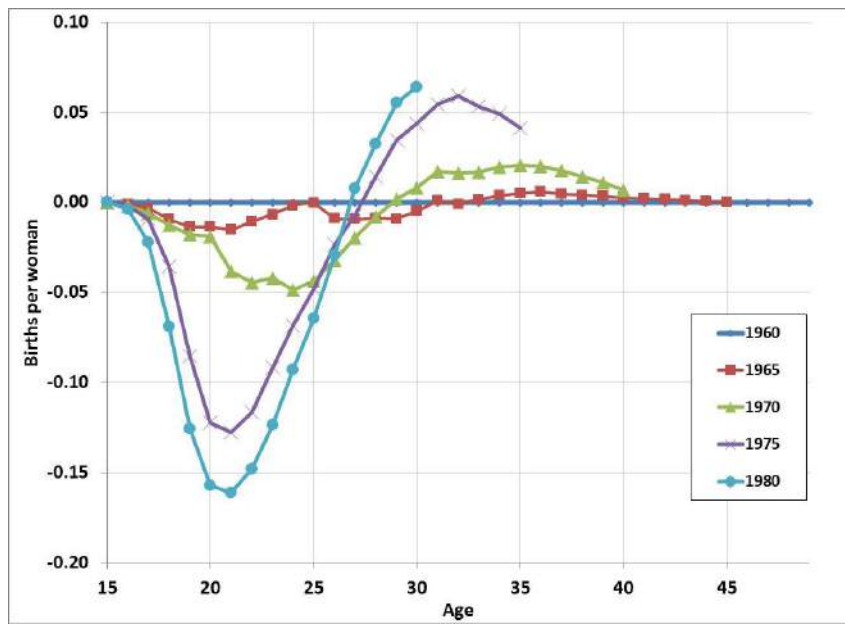
SOURCE: Czech Statistical Office, 2014

FIGURE 4 Cohort age-specific fertility rates, Czech Republic, birth cohorts 1960, 1965, 1970, 1975 and 1980



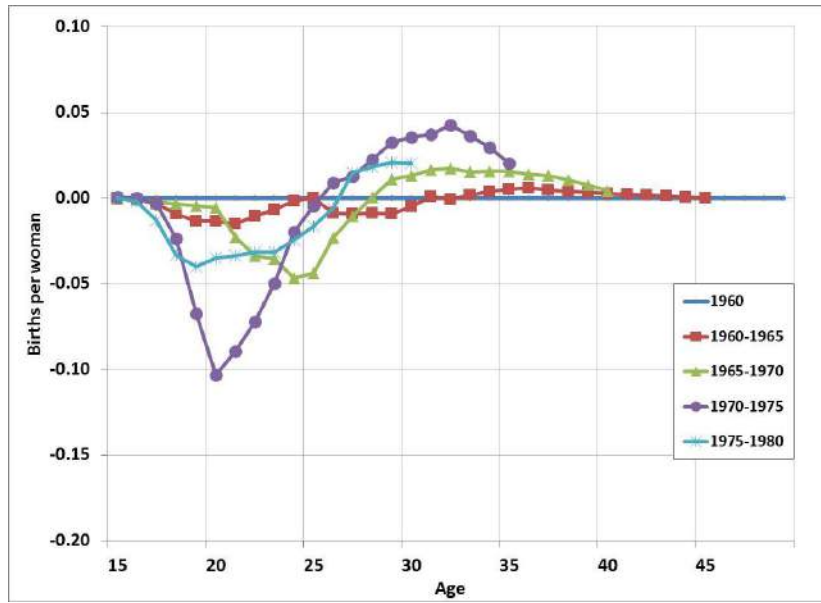
SOURCE: Human fertility Database, 2014

FIGURE 5 Differences in cumulated age-specific cohort fertility rates between base and subsequent cohorts, Czech Republic, birth cohorts 1960 (base) 1965, 1970, 1975 and 1980



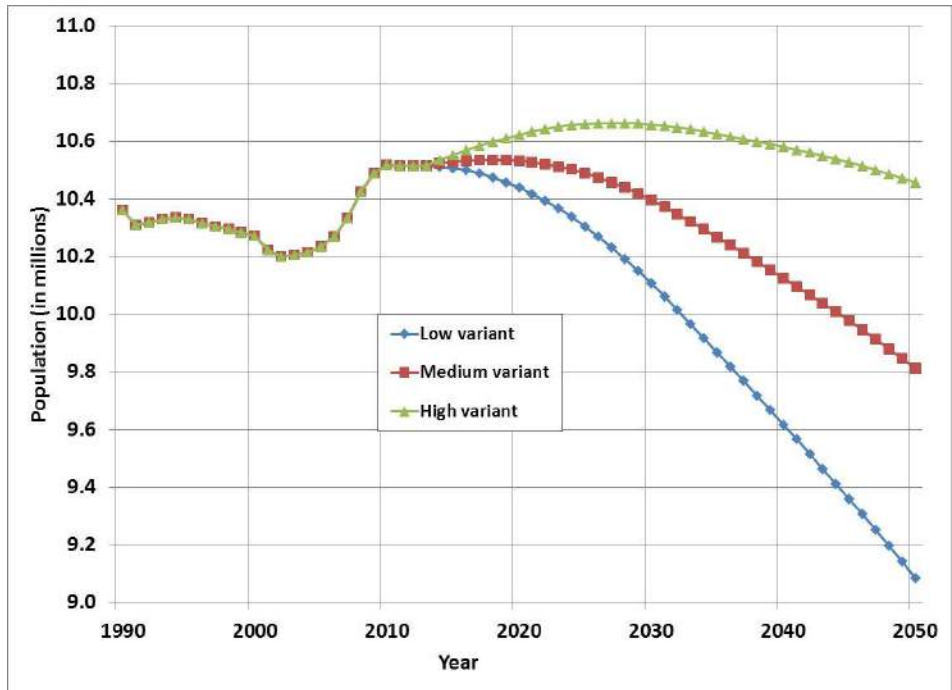
SOURCE: Human fertility Database, 2014

FIGURE 6 Differences in cumulated age-specific cohort fertility rates between moving benchmark cohorts and subsequent cohorts five years apart, Czech Republic, birth cohorts 1960, 1965, 1970, 1975 and 1980



SOURCE: Human fertility Database, 2014

FIGURE 7 Total population (2000-13) and projections (2014-50), low, medium, and high variants, Czech Republic



SOURCE: Czech Statistical Office, 2014

TABLE 1 Period total fertility rates, by birth order and age group, and percent increase between 2004 and 2012, Czech Republic, 2004, 2008 and 2012

Birth order	Total Fertility Rates			Percent increase 2004-12
	2004	2008	2012	
All women				
All	1.22	1.51	1.45	19.1
1	0.60	0.74	0.72	19.8
2	0.44	0.55	0.54	24.2
3+	0.18	0.22	0.19	4.8
Women aged 15-26				
All	0.48	0.47	0.41	-14.4
1	0.34	0.34	0.29	-13.5
2	0.12	0.11	0.10	-20.6
3+	0.02	0.03	0.03	4.6
Women aged 27-49				
All	0.74	1.04	1.04	41.1
1	0.27	0.41	0.43	61.7
2	0.31	0.44	0.44	41.8
3+	0.16	0.19	0.16	4.9

SOURCE: Czech Statistical Office, 2014

TABLE 2 Composition of period total fertility rate by birth order, Czech Republic, 2004, 2008 and 2012

Birth order	Total Fertility Rates		
	2004	2008	2012
All	1.22	1.51	1.45
1	0.60	0.74	0.72
2	0.44	0.55	0.54
3+	0.18	0.22	0.19
Composition by birth order			
All	100	100	100
1	49.3	49.1	49.5
2	35.8	36.6	37.3
3+	14.9	14.3	13.1

SOURCE: Czech Statistical Office, 2014

A2.5.5. Summary and conclusions

A2.6. ESTONIA

A2.6.1 Societal conditions affecting fertility

In the recent past Estonia experienced a relatively stable political atmosphere. The Prime Minister Mr. Andrus Ansip who left office early in 2014 held the PM's post for 10 years.

It is estimated that in 2001 per capita GDP returned to the 1990 level, and in 2007 it exceeded that benchmark by 63 per cent. In 2010 Estonia's GDP per capita in purchasing power parity was fifth among formerly socialist countries at US\$ 20,470 (UNECE Database), significantly above average. Favourable macro-economic trends in the 2000s were paralleled by an increase in employment, a decrease of unemployment, and a general rise in living standards of the population.

Since the beginning of the 1990s, Estonia has witnessed a sharp rise in educational participation at post-secondary and tertiary levels. In a comparative perspective, educational participation somewhat exceeds the EU-27 average. In 2013, 40% men and 38% women aged 15–24 were economically active in Estonia. Youth unemployment rates were 18% and 20% respectively, lower than the EU-28 and EU-15 averages. Age-earnings profiles suggest that young adults are doing reasonably well in the labour market in Estonia.

Estonia features relatively high degree of gender equity. Estonia features the highest female employment among the East European EU countries (2013); female employment rate (70.1%, women aged 20–64) in Estonia is lower than in several North and West European countries but it should be noted approximately 85% of women work full-time in Estonia. Women have long been characterised by relatively higher educational attainment than men. In the 2000s, Estonia has ranked close to the top among the EU countries with more than 60% students being female. However, against that background Estonia features a relatively large gender gap in earnings, which emerged well before the transition to a market economy. When the previous mechanisms ceased to operate, at the beginning of the 1990s, the female disadvantage in wages temporarily diminished. However, it increased again thereafter and has been among the largest in the EU countries in the 2000s. According to the OECD database on gender equality indicators, men in Estonia spent 41% less time doing unpaid work than women. Although, men in Estonia participate in unpaid work to a greater degree than in any other CEE OECD country and in the OECD countries on average, the country still lags behind the Nordic countries with regard to gender equity in the private sphere.

A2.6.2. Family policy strategy

A fundamental document *Smart Parents, Great Children, Strong Society: Strategy of Children and Families 2012-2020* was adopted in 2011. This document demonstrates that the Estonia government has a comprehensive understanding of modern family policies which is embodied in five strategic objectives. The document lists basic demographic challenges – the population is aging, the number of working-age population is decreasing and the number of new births is small. One of the ways to cope with these challenges is to make Estonia a family-friendly country, where people want to have and raise children and grow old respectfully, thereby ensuring that the population of Estonia becomes a growing one. The current child and family policy focuses primarily on alleviating the symptoms of various problems whilst not much attention is paid to dealing with the causes of these problems. This is why the Strategy focuses on prevention and early intervention at all levels, which requires an agreement between all political parties about the common strategy and main principles that guarantee the well-being of children and families.

The main objective of the *Strategy* is to improve the well-being and quality of living of children and families, thereby promoting the birth of children.

The five strategic objectives of the *Strategy* can be characterised as follows:

1. It is knowledge-based and uniform to support the sustainability of society;
2. It supports positive parenting and offers the necessary support to raising children;
3. The rights of children are guaranteed and a functional child protection system is created;
4. Estonia has a system of combined benefits and services that support the adequate economic coping of families; and

5. Men and women have equal opportunities for reconciliation of work, family and private life in order to promote a quality everyday life.

Among other goals the strategy aims to increase the (period) total fertility rate from 1.64 in 2011 to 1.77 births per woman in 2020. It aims to narrow the gap between the desired and actual number of children born.

A2.6.3. Specific family policy measures

Estonia has a universal family benefits system. These include birth allowances, child allowances, maternity leave, paternity leave, parental leave, childcare allowances, a variety of targeted family benefits, a tax allowance, and childcare facilities. Of course, the system is not perfect. The amounts of benefits are not indexed regularly. In recent years, there has been an increasing recognition that the universal measures should be supplemented with stronger package of means-test measures to reduce child poverty. The fact that poverty among children remains high also should not be ignored.

In the extant system of policy measures some stand out as being particularly helpful and influential, namely the following.

Child care facilities

After reaching their lowest point in 1993, childcare enrolment rates started to recover and, before the end of the 20th century, exceeded the levels attained in the late 1980s. The gradual increase continued during most of the 2000s; in 2012, 20% of 1-year-olds (the group is covered by parental leave), 70% of 2-year-olds, 90% of 3–4-olds and more than 90% of 5–6-year-olds attended public childcare (Statistics Estonia database). In Estonia, children typically attend childcare institutions on a full-time basis (35–40 hours per week). With regard to childcare enrolment of children under the age of 3 – the age group in which the variation of enrolment rates is largest – Estonia ranks at the top (first or second to Slovenia, depending on year) among the former state socialist countries (UNECE database).

Parental leave

New provisions include benefits equalling 100 per cent of income earned during the calendar year preceding childbirth; the maximum amount is three times the average salary. For mothers, the eligibility starts from the first day after the end of maternity leave or from the birth of the child (in case mother did not take pregnancy and maternity leave). In 2004, the duration of benefit payment was set at 11 months following childbirth. In 2006, it was extended to 14 months following childbirth, and in 2008 up to 18 months. As of 2008, the parents of more than one child can retain their level of benefits without returning to the labour market between births if the inter-birth interval does not exceed 30 months. The Estonian parental leave scheme is currently among the most generous of the OECD countries.

Labour market flexibility.

Scientific back-up

Knowledge about population issues has a historical tradition since its independence in 1918 which was however interrupted by the Soviet takeover in 1940. Eventually and particularly during the 1980s population studies were revived at universities. In 1986, scientists involved in demographic research as well as bordering disciplines could join in the academic organisation under the aegis of Estonian Demographic Association (EDA). On the basis of cooperation between researchers participating in joint research projects the Estonian Interuniversity Population Research Centre (EKDK) was established at the Demographic Association. In 1998 the EKDK was

transformed into the Estonian Institute for Population Studies at Tallinn University. An impressive array of population projects analyzing relevant issues have been and are being generated by this Institute.

Media pays regular attention to demographic trends including fertility. When Statistical Office or Eurostat publish some fresh statistics or projects, there is usually coverage in main newspapers and electronic media. Statistics compiled by the PR-unit of Tallinn University shows that in 2013 media appearances of researchers from Institute of Population Studies totalled more than 60. Over a past few years there has been a strong interest in migration issues and hence fertility receives somewhat less attention compared to situation in the early 2000s.

A2.6.4. Fertility trends

Following the demise of communism fertility declined considerably during the 1990s and subsequently recovered somewhat during the 2000s.

The period total fertility rate [PTFR] declined considerably from a high of 2.3 births per woman in 1988 to a low ten years later in 1998 of 1.3 births per woman (Figure 1). This decline was a combination of childbearing postponement and a quantum fertility decline. The 2.04 completed cohort fertility rate at age 40 of the 1960 birth cohort dropped to 1.85 in the 1964 birth cohort and essentially stabilized reaching 1.82 births per woman in the 1970 birth cohort (Figure 1). This decline of the CTFR was shorter than in other CEE countries and the stabilization of this rate among the cohorts of the late 1960s was quite unique compared to other CEE countries. There a CTFR decline was common and characteristic throughout the cohorts of the 1960s. Apparently the period fertility decline in Estonia during the 1990s was predominantly due to childbearing postponement.

The PTFR started to increase in the mid-2000s (Figure 1). This increase was entirely among older women above age 27 (Figure 1) and contained many births earlier postponed. What is not known is whether it included any quantum fertility increase.

The childbearing postponement is reflected in the trend of the period mean age of first birth [PMAFB] (Figure 2). The PMAFB increased from 22.8 in 1998 to 26.5 years in 2012 at a similar rate as in the other Baltic States, however considerably faster than, for instance, in the Nordic countries.

The overlapping quantum fertility decline combined with childbearing postponement can be observed in the changing age patterns of childbearing from one birth cohort to the next depicted in Figure 3. Fertility was considerably lower among young women in their early twenties, mainly in the 1975 birth cohort compared to the 1965 cohort. It continued to decline among these women in the cohorts born in the late 1970s and early 1980s. At the same time, childbearing was increasing among women in their thirties and late twenties in subsequent birth cohorts.

The shift of childbearing from the younger women below age 27 to older women age 27 and above continued in the mid to late 2000s (Figure 1 and Table 1). The cumulative period fertility rate of women aged 27-49 [CumPFR 27-49] bottomed out in 1994 at 0.47 births per woman and more than doubled by 2010 when it reached 1.05 births per woman, an increase of 125 percent.

Another notable characteristic of the mid to late 2000s was an increase in women bearing a second and third child (Table 1). The fertility rate for second order births increased from 0.45 births per woman in 2003 to 0.61 by 2010, a 35 percent increase. For third order births this rate increased from 0.25 to 0.34, a 34 percent increase. It was predominantly older women bearing second, third and higher order children. This is an indication that a certain amount of quantum fertility increase might have been taking place during this period. The share of 2nd and 3rd+ order births in 2010 was relatively high compared to other CEE countries.

Despite the relatively favourable societal and demographic trends in Estonia, its population is projected to decline over the next 30 years (Figure 5). According to the medium variant Estonia's population in 2040 would be 1.24 million compared to 1.33 million in 2010, a seven percent decline, a relatively modest descent.

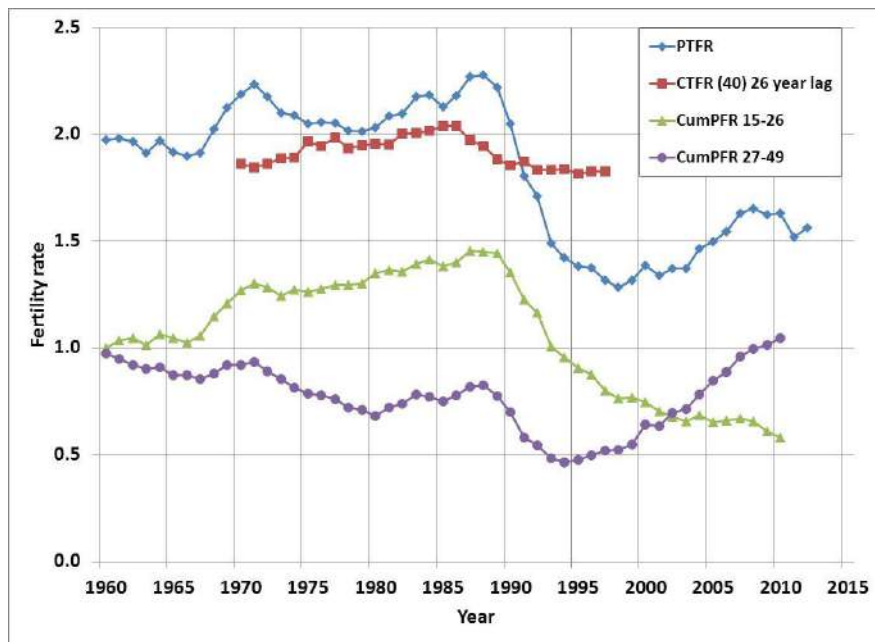
A2.6.5. Summary and conclusions

The combination of favourable political and economic societal conditions together with a developing family and population policy that appears to be supported by the main political parties, the generation of knowledge and scientific analysis of population issues, a reasonable coverage of population developments in the media, as well as a universal family benefits and services system, might have had a reasonably beneficial effect on fertility levels and trends. All combine to have comparatively beneficial effect on fertility levels and trends.

The 1990s witnessed a considerable decline of period TFRs. These recuperated to some extent during the 2000s. The period TFR around 2010 was about 1.6 births per woman. This relatively low rate compared to the trend in cohort TFRs is apparently due to the on-going postponement of childbearing. Birth cohorts born in the early 1960s also experienced a decline, but in distinction to almost all other CEE countries completed cohort fertility at age 40 stabilized among the generation born during the late 1960s and in 1970. The Cohort TFR for 1970 is apparently going to be about 1.85 births per woman, possibly the highest in CEE and comparable to a number of countries in Northern and Western Europe.

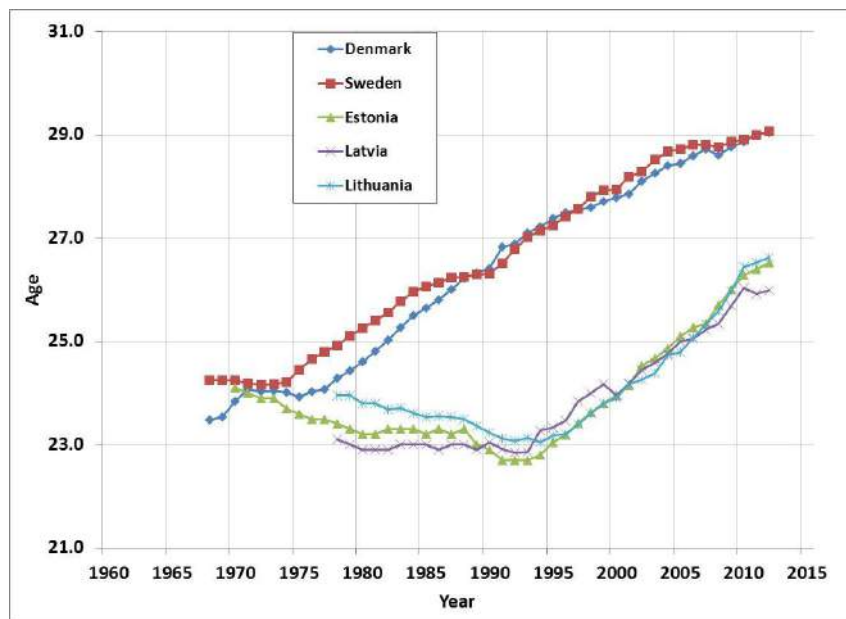
Also the level of second and third and higher order births is relatively high. Their frequency has been increasing during the late 2000s.

FIGURE 1 Cohort total fertility rate at age 40 (legged by 26 years) and period total fertility rate, Estonia 1960-2012



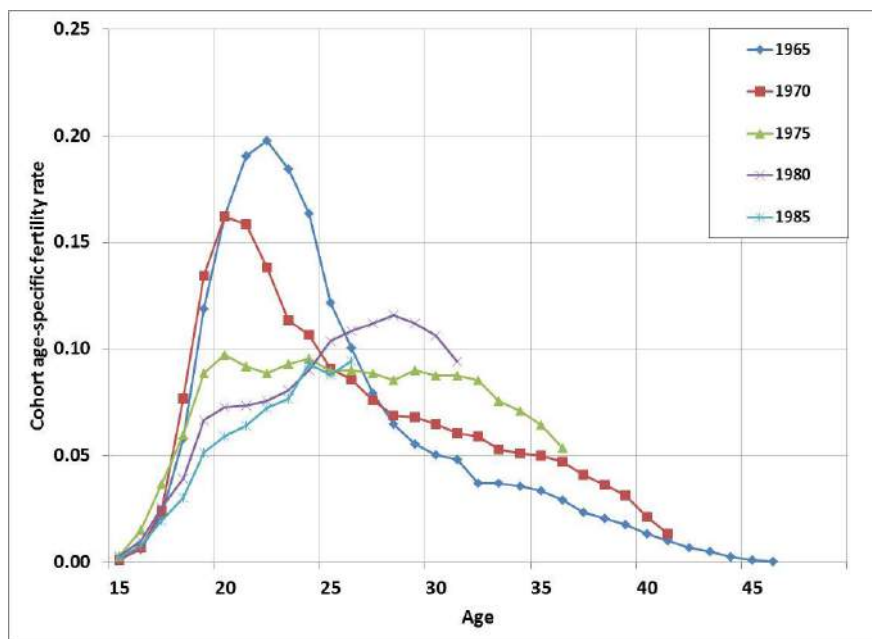
SOURCE: Human Fertility Database 2014

FIGURE 2 Period mean age of mother at first birth, Estonia, Denmark, Sweden, Latvia and Lithuania, 1960-2012



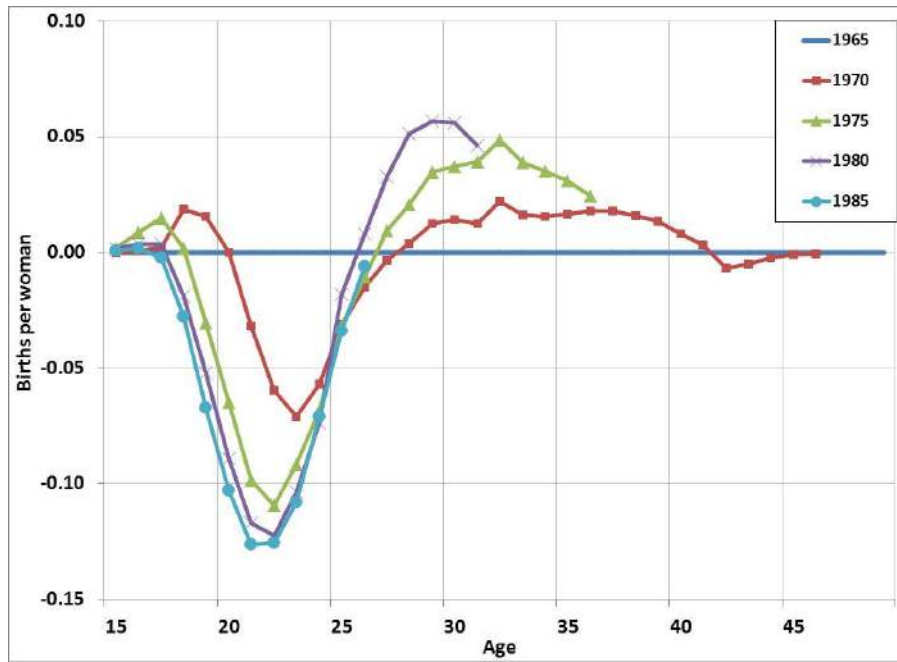
SOURCE: Human Fertility Database 2014

FIGURE 3 Cohort age-specific fertility rates, Estonia, birth cohorts 1965, 1970, 1975, 1980 and 1985



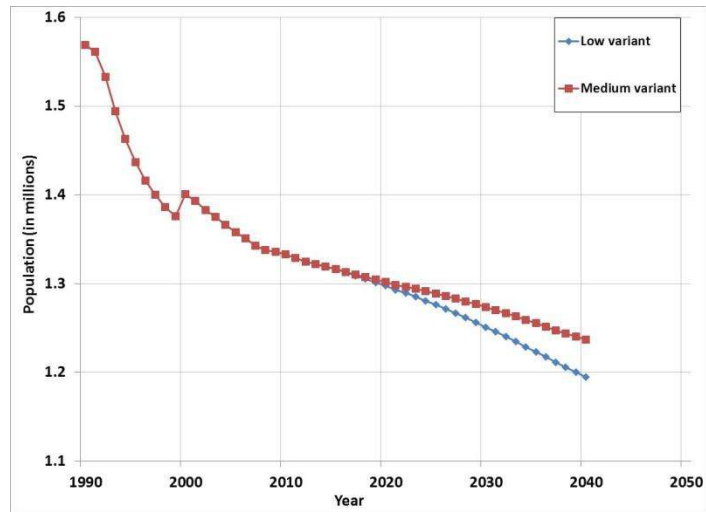
SOURCE: Human Fertility Database 2014

FIGURE 4 Differences in cumulated age-specific cohort fertility rates between base and subsequent cohorts, Estonia, birth cohorts 1965 (base), 1970, 1975, 1980 and 1985



SOURCE: Human Fertility Database 2014

FIGURE 5 Total population (1990-13) and projections (2014-50), low, medium, and high variants, Estonia



SOURCE: Human Fertility Database 2014

TABLE 1 Period total fertility rate, by birth order and age group, and percent increase between 2003 and 2010, Estonia, 2003 and 2010

Birth order	2003	2010	Percent increase 2003-2010
All women			
All	1.37	1.63	18.8
1	0.66	0.68	1.9
2	0.45	0.61	35.0
3+	0.25	0.34	34.4
Women aged 15-26			
All	0.66	0.58	-11.4
1	0.47	0.40	-16.2
2	0.15	0.16	3.8
3+	0.03	0.03	-12.9
Women aged 27-49			
All	0.71	1.05	46.7
1	0.19	0.28	46.7
2	0.30	0.45	50.7
3+	0.22	0.31	41.2

SOURCE: Human Fertility Database 2014

TABLE 2 Composition of period total fertility rate by birth order, Estonia, 2003 and 2010

Birth order	Total fertility rates	
	2003	2010
All	1.37	1.63
1	0.66	0.68
2	0.45	0.61
3+	0.25	0.34
Composition by birth order		
All	100	100
1	48.5	41.6
2	33.1	37.5
3+	18.4	20.9

SOURCE: Human Fertility Database 2014

A2.6. HUNGARY

A2.7.1. Societal conditions affecting fertility

Economic conditions. A short-lived but dramatic economic recession took place immediately after 1989. The GDP dropped dramatically, by 17% (to the level of the late 1970s), between 1989 and 1993 (HCSO, 2010) after which it started to increase but only reached the 1989 level again in 2000. This recession also meant that real wages, and thus income, declined for most households. This might mean that couples were generally less able to afford having children and starting a family (Aassve et al., 2006). Between 1997 and 2006, a stable increase in the GDP (4% yearly) characterised the Hungarian economy. After 2006, this growth has slowed down as a result of policies which aimed to decrease the government deficit. Between 2008 and 2009, the GDP dropped by 2009 as a result of the economic crisis (HCSO, 2010).

Between 1989 and 2009, gross income has increased 19-fold, while net income only increased 15-fold. The real value of incomes was continuously decreasing until 1996 (hand in hand with an increase in consumer prices). In 1996, the real value of incomes was 26% lower than that in 1989. In the following ten years, the real value of incomes has increased. In 2009, it was 13% higher than that in 1989 (HCSO, 2010).

Trends in the standard of living. The increase in unemployment and the decrease in the real value of income influenced consumption. In the early 1990s, the consumption of all important consumer goods decreased. Between 1990 and 1996, the volume of consumption decreased by 20%. The following ten years brought about a continuous increase (almost 60% in total). However, from 2007, the volume of consumption started to decrease. As a result, consumption levels in 2009 were only 15% higher than in 1989 (HCSO, 2010).

Political stability. Since 1989, Hungarian governments have been relatively stable. There was some turbulence between 2002 and 2010; during two terms of the socialist coalition government, several prime ministers followed each other; Péter Medgyessi³⁸ (2002-2004), Ferenc Gyurcsány³⁹ (2006-2009), and Gordon Bajnai (2009-2010).

Gender relations. According to data from EUROSTAT, the gender pay gap was 19.1% in 2002, 14.4% in 2006, 16.3 in 2007, and 17.5 in 2008 in Hungary. According to survey data from 2007, this gap was the largest among men and women with higher education. Also, the gender pay gap was found to increase with age and with the number of children (up to two children) (Borbély, 2011).

The proportion of women with a mandate in the parliament was 7.3% in 1990, 11.1% in 1994, 8.3% in 1998, 9.1% in 2002 and 10.6% in 2006 (Borbély, 2011).⁴⁰ According to data from the OECD, in 2012, only 10% of ministers was a woman⁴¹.

Partnerships. In the 1970s, cohabitation was primarily a post-marital form of union in Hungary; widows and divorced women were twice as likely as unmarried women to cohabit (Carlson & Klinger, 1987). Cohabitation

³⁸ He stepped down because of arguments with the coalition partner (SZDSZ)

³⁹ He stepped down because of a speech that he held behind closed doors where he stated that they have been steeling and lying in the last few years. This speech was held in 2006, and someone leaked it. This was followed by demonstrations and an uprising but Gyurcsány did not step down until 2009. In 2009, Fidesz requested new elections but the coalition did not agree and thus they appointed Gordon Bajnai as interim prime minister until the next elections.

⁴⁰ Aassve, A., Billari, F. C., & Speder, Zs. 2006. Societal transition, policy changes and family formation: Evidence from Hungary. *European Journal of Population*, 22, 127-152.; Borbély, Sz. 2011 Nők és férfiak béregyenlőtlensége Magyarországon [Gender Pay Gap in Hungary]. In: Nagy, I. & Pongrácz, T. (Eds.) Szerepváltozások. Jelentés a nők és férfiak helyzetéről. [Changing Roles. Report on the situation of men and women]. Budapest: TÁRKI - Nemzeti Erőforrás Minisztérium, pp. 113-131; Carlson, E. & Klinger, A. 1987. Partners in life: Unmarried couples in Hungary. *European Journal of Population*, 3, 85-99.; HCSO, 2010. Magyarország, 1989-2009. A változások tükrében. [Hungary, 1989-2009. In light of changes]. Hungarian Central Statistical Office, Budapest, 2010. EUROSTAT, 2012; Lévai, K. 2009. A nők politikai reprezentáltsága. [Political representation of women] In: Nagy, I. & Pongrácz, T. (Eds): Szerepváltozások. Jelentés a nők és férfiak helyzetéről [Changing Roles. Report on the situation of men and women]. Budapest: TÁRKI - Szociális és Munkaügyi Minisztérium, pp. 15-26.' Spéder, Zs., & Kamarás F. 2008. Hungary: Secular fertility decline with distinct period fluctuations. *Demographic Research*, 19, 599-664.

⁴¹ http://www.oecd.org/gov/GAAG2013_CFS_HUN.pdf

as a “new” type of union (i.e. as pre-marital cohabitation) started among the lower educated and it was already prevalent in the 1980s, well before the transition. The spread of pre-cohabitation accelerated following the transition (Spéder & Kamarás, 2008). Recently, the spread of pre-marital cohabitation has been most dynamic among single women and the more educated (Spéder & Kamarás, 2008). Nonmarital fertility was around 5% in the 1960s and 1970s and it remained under 10% thereafter (Spéder & Kamarás, 2008). However, after the transition, this proportion has increased dramatically and has reached 44.5% by 2012 (EUROSTAT).

Education. Before the transition the proportion of high school graduates who could go on to higher education was determined by the state at a 10% level (Spéder & Kamarás, 2008). Between 1989 and 2008, the number of students in higher education has more than tripled (HCSO, 2010).

Employment and unemployment. Before the transition, the Hungarian labour market was characterised by nearly full employment and a shortage of labour (Aassve et al., 2006; KSH, 2010). After the transition there was an “over-supply” of employees and an “under-demand” of employers which made it more difficult for individuals to find a job (Spéder & Kamarás, 2008). In order to avoid unemployment it was a popular strategy to choose (early) retirement or to go back to school (HCSO, 2010).

In the early 1990s, the employment rate was above 60% and it decreased to 52% in 1996, reaching its minimum (HCSO, 2010). In the following ten years, the employment rate has increased (to 57% in 2006). Then, as a result of the economic crisis in 2008/2009, it has decreased to 55.4% in 2009. The employment rate of young adults (15-24 year-olds) was 18%; half the rate observed ten years earlier. This can be explained by the educational expansion, the low prevalence of working during one’s studies and the high unemployment rate of this generation which has increased drastically, especially since 2004 (HCSO, 2010).

The unemployment rate reached its lowest point in 1993 (12.1%), then it decreased and reached 5.7% in 2001. However, between 2002 and 2009, unemployment rate started to increase gradually, reaching about 8% in 2008 and 10.1% in 2009 (HCSO, 2010).

A2.7.2. Family policy strategy

Most family policies originate from the pre-transition times and have not changed considerably since. There were three major family policies before 1990 that aimed to increase fertility (based on Gábos, 2005):

1) Introduction of a flat rate maternal benefit (*GYES*) in 1967: aimed to increase fertility rates through decreasing the incompatibility between women’s labour force participation and childrearing. Next to providing financial support for mothers, it also guaranteed the possibility of staying at home with their child while formally staying on the labour market.

2) Introduction of a family policy package in 1973: financial support from *GYES* was increased, more benefits were available for families with children on the housing market, and induced abortion was again forbidden (previously it was forbidden between 1953 and 1956).

3) In 1985, an insurance based maternal benefit (*GYED*) was introduced. Additionally, the length of unpaid maternity leave was extended, new benefits were available on the housing market for families with children, and mothers were allowed to be absent from work due to the sickness of the child up to the child’s 10th birthday. Access to induced abortion became easier but it became more difficult to divorce. In 1988 and in 1989, the amount of family allowance has been increased, twice both year, and in 1990 it became universally available until the 20th birthday of the child (in case enrolled in formal education).

After the transition, family policies remained relatively stable and at a notably high level (Szelewa & Polakowski, 2008). Between 1990 and 1994 (first democratic government, conservative) a new extended paid leave (*GYET*) was introduced, but this benefit was only available for stay-home mothers with three or more children. In 1995⁴² there was an economic crisis; consequently an austerity package (the so-called *Bokros Package*⁴³) was introduced in 1996. Due to financial restrictions, the family policies’ new aim was to decrease

⁴² Between 1994 and 1998, Hungary had a socialist government.

⁴³ Named after Lajos Bokros, Minister of Finance in 1995-1996.

poverty and to help those at the lower end of the income distribution. Therefore, in 1996, GYED was replaced with a one-off payment; *GYES* and family allowance became insurance based (Gábos, 2005).

Between 1998 and 2002, the government (conservative, first Orbán cabinet) has erased the family policy restrictions introduced in 1996 and made childcare benefits available to a broader group; *GYES* and family allowance became universal again (in 1999) and *GYED* was reintroduced (in 2000, although the maximum amount of money one could claim was reduced). Additionally, tax credits for families were introduced (Gábos, 2005; Inglot et al., 2011).

Between 2002 and 2006⁴⁴ the (socialist) government's family policy was to increase living standards of the entire population. Birth grant increased to 225% of the minimum pension (from 150%). Family allowance was increased by 20% and children's school attendance was not a requirement anymore to receiving this allowance. They also introduced the 13th monthly family payment. With the EU accession in 2004 it was established that the problem areas were low levels of childcare provision and women's low labour force participation (the employment rate among mothers in 2008 was 46.3%). Therefore, in 2005, to extend childcare services, the government required all cities above 10,000 inhabitants to run a nursery (out of the 3,200 settlements in Hungary, 164 are above 10,000 inhabitants). However, the proportion of enrolled children remained the same (10-11%) (Inglot et al., 2011).

Between 2006 and 2010⁴⁵ the (socialist) government emphasised the reduction of inequalities and the fight against child poverty but this was more on an ideological basis rather than in terms of actual policies. The eligibility criteria for *GYES* now allowed women to work full-time while receiving the benefit. Although in 2008 a new financial incentive was offered to parents who registered their child in a kindergarten (10,000 HUF twice a year), the government started to implement a more restrictive welfare policy towards the poor. In 2009, the government restricted the indexation of universal and means-tested social transfers which resulted in a 15% loss of real value in family allowances by 2010. Also, family allowance was now restricted from the child's 23rd birthday to the 20th and those whose child failed to register for school were no longer eligible for family allowance. Eligibility of *GYES* was changed to two years. With respect to childcare provision: in settlements below 10,000 inhabitants, nurseries and kindergartens could be merged (Inglot et al., 2011).

Between 2010 and 2014, the second Orbán cabinet's social and family policy remained very similar to the previous regulations (changes will be detailed in the next sections). They implemented a traditional, family-centred discourse. For example, the new Constitution of April 2011 declared the family to be defined exclusively as a marriage of a man and a woman and the foetus from the moment of conception. While this government restored a longer, three year *GYES* and two-year *GYED*, they restricted women's opportunity to work a maximum of 30 hours a week after the first birthday of the child while receiving *GYES*. Additionally, tax benefits favour families with three or more children – this benefits the more well off people at the expense of the poor. Additionally, the previous, non-family based tax allowance for the poor was withdrawn from 2012. The argument behind these policies was that the fertility rates of higher income groups are the lowest in the society and thus they need special attention to benefit the society as a whole. The government also restricted access to family allowances based on the child's school attendance. In terms of childcare provision they encouraged municipalities to fund family day-care centres (Inglot et al., 2011).

In essence, the current government adopted a family-friendly discourse from the beginning of 2010. This discourse has two main elements: an ideological and a more practical element. First, the new constitution states that families are the basis of the nation's survival. Additionally, the new constitution declared the family to be defined exclusively as a marriage of a man and a woman and the foetus from the moment of conception. The government claims that these "measures" have stabilised families and resulted in an increase in the number of marriages⁴⁶. Additionally, they also announced several competitions for the members of the public to popularise the family and family-friendly thinking.

⁴⁴ Between 2002 and 2004, Peter Medgyessi was the prime minister, followed by Ferencs Gyurcsany between 2004 and 2006

⁴⁵ Between 2006 and 2009 Ferenc Gyurcsány was the prime minister, between 2009 and 2010 Gordon Bajnai was interim prime minister.

⁴⁶ This information comes from the "News" page of the Ministry of Human Resources, Under-Secretary of Social and Family Issues <http://www.kormany.hu/hu/emberi-eroforrasok-miniszteriuma/szocialis-csaladi-es-ifjusagugyvert-felelos-allamtitkarsag/hirek>

Second, the government's aim was to help childrearing and encourage childbearing. The following family policy measures were introduced recently (see next section for further details)⁴⁷:

- Extension of insurance based maternal allowance [*GYED* extra']
- Family tax allowance
- Increased the maximum amount of *GYED* with 40%
- Child home care allowance [*GYES*] can be claimed for 3 years
- Tax benefits to employers who employ mothers with 3 or more children
- The government established 6000 new nursery places (a 20% increase) and refurbished 5000 already existing places costing 28 billion HUF (€9.2m).
- Competition for family-friendly workplaces: competition of workplaces with a focus on programs that help reconcile work and family responsibilities (companies can win up to 2m HUF (€6540), with separate competitions for smaller and bigger companies and enterprises).

A2.7.3. Specific family policy measures

The broad outline of historical changes in Hungarian family policy is presented in the previous section. Here we elucidate the current policies in place (2014):⁴⁸

Universal benefits

"Baby bond": babies born after 31 Dec 2005 are entitled to this one-off payment of 42,500 HUF (€168) into a bank account overseen by the Hungarian State Treasury where the money will be kept until the 18th birthday of the child.

GYES (Child home care allowance): independent of whether insured or not, mothers (or fathers) who have at least one child are entitled to *GYES*. This benefit amounts to 28,500 HUF (€93) per child per month, and it can be claimed until the third birthday of the child since 2014. Mothers receiving this benefit are not allowed to work until the child turns one; after which the mother's labour market activities are not restricted (i.e. they can work full-time from 2014).

GYET (Child raising support): extended paid leave that can be claimed by mothers (or fathers) who raise three or more children under the age of 18, until the youngest child is between three and eight years old. Parents who receive *GYET* can work a maximum of 30 hours per week (or unlimited if they work from home) and they are allowed to make use of public child care. The amount of this benefit is the actual amount of the minimum old-age pension per month (28,500 HUF = €93). This allowance is not insurance based.

Birth grant ("anyasági támogatás"): Mothers who have attended pre-natal medical care at least 4 times during pregnancy are entitled to this allowance after the birth of the child. It is a one-off payment and amounts to 225% of the actual minimum old-age pension (64,125 HUF = €209).

Family allowance ("családi pótlék"): Families with at least one child are entitled to a monthly family allowance until the child's school education finishes (but not later than the child's 20th birthday). This monthly benefit amounts to 12,200 HUF (40 EUR) (13,700 HUF (45 EUR) if it is a one-parent family) in case there is one child

⁴⁷ Based on "Tájékoztató a gyermekek után járó ellátásokról". Emberi Erőforrások Minisztériuma Központi Ügyfélszolgálati Iroda. 2014. [Information on childcare benefits. Ministry of Human Resources, Central Customer Service. 2014]. Available at: <http://emmiugyfelszolgalat.gov.hu/szocialis/gyermekek-utan-jaro> (last accessed: 31/03/2014)

⁴⁸ Based on "Tájékoztató a gyermekek után járó ellátásokról". Emberi Erőforrások Minisztériuma Központi Ügyfélszolgálati Iroda. 2014. [Information on childcare benefits. Ministry of Human Resources, Central Customer Service. 2014]. Available at: <http://emmiugyfelszolgalat.gov.hu/szocialis/gyermekek-utan-jaro> (last accessed: 31/03/2014)

in the family; 13,300 HUF (43 EUR) (14,800 HUF (48 EUR) if it is a one-parent family) per child for families with two children; and 16,000 HUF (52 EUR) (17,000 HUF (55 EUR) if it is a one-parent family) per child for families with three or more children.

Public childcare: Several institutions are responsible for taking care of children during day time. These child care facilities are organised and maintained locally by municipalities. For children under the age of 3, nursery is available (although coverage barely exceeds 10% and facilities tend to be overcrowded (Blaskó & Gábos, 2012⁴⁹)). Family day care, where a maximum of five children can be taken care of, is for children between 20 weeks and 14 years old. Children between the age of 3 and 6 can attend kindergarten; where participation is compulsory for children who turned age 5 (will be compulsory from age 3 from 2015). Children go to school at the age of 6. Primary schools are responsible for taking care of children after the lessons. In the first four grades of the primary school (aged 6/7 to 10/11), after-school care is available for 4.5 hours; from the 5th to the 8th grade (aged 11/12 to 14/15), this time is reduced to three hours. After-school care takes place in the school. Childcare and afternoon day care are free; parents only pay for meals and additional services provided (Szelewa & Haskova, 2012).

Insurance based benefits

Maternity benefit (TGYÁS) can be claimed during the 24 weeks of maternity leave if the mother was employed (insured) for 365 days before the delivery. If the mother receives income, she is not entitled to this benefit. It amounts to 70% of the average income of the woman in the last year before the delivery.

Parental benefit (GYED): one of the parents who was insured for at least 365 days in the last two years before the birth of the child is entitled to this insurance based benefit. This cash benefit amounts to 70% of the average salary of the mother over the last one year before the birth (but cannot exceed 70% of twice the minimum wage, 142,100 HUF (462 EUR)) per month. (Earlier it was forbidden to work or to make use of public child care while receiving GYED.)

GYED Extra: From 1 Jan 2014, mothers can go back to work and make use of public child care after the first birthday of the child and still be eligible for *GYED*. Also, those enrolled in higher education for at least two semesters are eligible for *GYED* for a year, after which they can benefit from *GYES*. From 2014, *GYED* and *GYES* can be claimed at the same time if a new child is born.

Extra holiday: one parent is eligible for extra holidays each year from birth until the child turns 16; it is 2 days for one child, 4 days for two children and 7 days for more than two children.

Fathers' holidays: father are entitled to five days after the birth of their child.

Family tax allowance: it is subtracted from the tax base; in case of one or two children it amounts to a reduction of 10,000 HUF (€33) per child in tax payment, in case of 3+ children, it is a reduction of 33,000 HUF (€107) per child.

A2.7.4. Fertility trends

A2.7.5. Summary and conclusions

A2.8. KOSOVO

A2.8.1. Societal conditions affecting fertility

⁴⁹ During the socialist times, day care services for children under the age of three have been relatively well developed, 15% of children between age 0 and 2 were enrolled during the early 1980s. Coverage declined after 1983 and dropped dramatically after 1990 when the provision of day care services were allocated to local governments who do not have the financial means or chose not to prioritise day care provision. Lately there has been a slow improvement, 6% in 2000 and 10% in 2011 (Blaskó & Gábos, 2012).

A2.8.2. Family policy strategy

A2.8.3. Specific family policy measures

A2.8.4. Fertility trends

A2.8.5. Summary and conclusions

A2.9. LATVIA

A2.9.1. Societal conditions affecting fertility

A2.9.2. Family policy strategy

The Latvian government set up the aim to increase the fertility during 2011–2017, the period when State Family Policy Guidelines are driving. It should be emphasized that since Latvia regained independence, the total fertility rate reached the lowest point in 1998 — 1.11. In 2004, when Latvia joined the European Union, it was 1.29 and increased to 1.59 in 2008. In 2011, this indicator fell down to 1.34 and then slightly increased again in 2012–2013.

In Latvia as well as in many EU countries the last fertility decline in 2009–2011 was affected by economic crisis when many fiscal consolidation measures have targeted child and family allowances and previously introduced benefits. In Latvia, on a temporary basis, family state benefit was reduced for families with three and more children, some of the cuts and tightened eligibility conditions affected parental leave policies, as well as temporary postponements or reductions in payments. In the same way the crisis had negative effects on employment and households' income.

Data of the European system of integrated social protection statistics (ESSPROS) indicates that expenditures for children and family support in Latvia in 2011 constituted 1.1% of GDP (in 2000 it was 1.5%, in 2008 and 2009 — 1.4%, in 2010 — 1.5% of GDP).

A2.9.3. Specific family policy measures

Latvia has a universal family benefits system where more support is provided to families with young children.

Family state benefit is € 11.38 monthly (01.07.2009. - 31.12.2014.) granted for each child from one to 15 years of age or older than 15, attending the general educational establishment or vocational school and has not entered into the marriage. In such case benefit is granted for period when child attends educational establishment but not longer than until the day when he or she reaches 19 years of age or enters into the marriage. In 2015 Parliament intends to double family state benefit for the second child and triple for subsequent.

In 2013 state social benefits for families with children have been increased. Social benefits for childcare differ depending on whether the person who intends to receive benefit had made social insurance payments or not.

Supplement to the family state benefit provided for a disabled child counts for 106.72 euro per month.

Parents who have disabled children can apply also for disabled child care benefit 213.43 euro monthly and state support to the children suffering from celiac disease without formally stated disability 106.72 euro monthly.

Child birth benefit can be received from the eighth day of child's life or from the day when the guardianship is established. The amount of child birth benefit is 421.17 euro per each newborn.

Child care benefit is granted by the state to the parents taking care of the child up to 2 years of age. Child care benefit can be received by one of child's parents - mother or father. Nevertheless the benefit is not granted for a child for whose birth or care a maternity benefit or parental benefit is granted for the same period. The amount of child care benefit for one child up to 1.5 year of age amounts to 171 euro per month. The amount of child care benefit for one child from 1.5 to 2 years of age is 42.69 euro per month.

The supplement has been provided for twins or several children born in one pregnancy up to 1 and half year of age – 171 euro for each children, and 1.5 – 2 year of age – 42.69 euro for each children per month.

Parental benefit is granted and paid to insured person who is taking care for a child younger than 1 or 1.5 year (one of parents, custodian or other person who is actually taking a care of and bringing up the child according to

the decision by orphans court), provided this person is employed on the day the benefit is approved and is on the leave for child care or due to care for child does not earn any income as self-employed person.

Parental benefit is not granted for a child if maternity benefit or child care benefit is granted for the same period, so it starts after 56 (70) days after child has born.

Parents are able to choose between two different payment schemes of parents' benefit. According to that parental benefit is granted in the amount of 60% or 43.75% from the social insurance contributions wage of mother or father. It depends on duration of the benefit (one year or one and half) which is declared in the application at the moment of submission.

From 1 October 2014 it will be possible for parent to receive support for child care and parents' benefit at the same time.

Paternity benefit since November 3, 2010 to December 31, 2014 is allocated in the amount of 80 percent from beneficiary's average contribution wage and paid in the following sequence:

- 1) if the amount of allocated benefit per one calendar day does not exceed 32.75 euro - the allocated amount is granted;
- 2) If the amount of allocated benefit per one calendar day exceeds before mentioned sum – 50 percent from the exceeding amount are granted per one calendar day additionally. The same amount of ceilings also are applied for maternity and parent's benefit until December 31, 2014.

In 2013 the ceilings of the payment of paternity, parent's benefit as well as maternity benefit has been doubled.

Additional information of social protection is available on home page of Ministry of Welfare <http://www.lm.gov.lv/text/875>

At the same time government has approved positive changes in the labor tax and personal income tax and raised the minimum wage from 284.57 euro in 2013 to 320 euro in 2014. In addition allowance for dependents has been significantly increased from 113.83 euro to 165 euro and the basic tax allowance (per month) has been increased from 64.03 euro to 75 euro in 2014; in 2013 property tax relief for large families has been introduced and in 2012 tax relief for a large family's private vehicle has been introduced.

Since 2010 state financed free school meals for the 1st grade, but from 1 September 2014 it will be provided also for the 1st, 2nd and 3rd grade and the state earmarked subsidy will be increased. Government intentions are to gradually increase the range of beneficiaries.

Since 2004 lone parents are able to apply to State's Maintenance Guarantee Fond to receive state guaranteed maintenance payment for a child (<http://www.ugf.gov.lv/eng>). Maximum of payment for a child from birth until 7 years of age is 71,14 euro, for child from 7 to 18 years of age – 78,26 euro. Applicant must comply with the provisions of Maintenance Guarantee Fund Law.

Institutions of child-care:

Latvia is still facing the problem of insufficient number of child-care services. Although the situation is improving year by year, the number of those children who still wait for the service remains high — in 2009/2010 – 37 518 children, 2010/2011 – 34 727 children, 2011/2012 – 32 553 children, 2012/2013 — 30 256 children⁵⁰.

It should be admitted that in Latvia, childcare historically is integrated within the education system. It is provided within preschool educational institutions or kindergartens mostly by local municipalities starting from 1.5 year of age, but mostly children are starting to attend at 3 years of age.

The progress towards achieving the Barcelona targets so far has been limited, especially for children below 3 years old. In 2011, only 15% of children below 3 years of age were enrolled in formal childcare, which was mainly covered by local municipalities. The coverage rate for children aged 3 years to compulsory school age went over the 70% threshold in 2011. However, this is still below the target.

Public preschool education is offered free of charge. Preschool education is guaranteed for children of mandatory preschool age (i.e. 5-6 years old). Younger children are ensured equal access via co-financing private childcare facilities in case public facilities are not available (since September 2013).⁵¹

In 2013, the State commenced the support programme for those parents whose children did not get the place in municipal kindergartens. The programme includes also financial support for employment of babysitter and partly covers expenses of non-state kindergarten. Also, the programme aims to improve the possibility to combine work and

⁵⁰ *Bērni Latvijā 2013*, p.45.

⁵¹ [http://www.europarl.europa.eu/RegData/etudes/workshop/join/2013/493037/IPOL-FEMM_AT\(2013\)493037_EN.pdf](http://www.europarl.europa.eu/RegData/etudes/workshop/join/2013/493037/IPOL-FEMM_AT(2013)493037_EN.pdf)

family life by changing the providers' and users' behaviour and demanding this service legally. The baby-sitting services, by large, were illegally provided and at the same time have had high social acceptance. This was not only connected to a loss in taxes and social welfare contributions, but also was impeding the professionalization of the market. The amount of financial support for the child is *142 euro* per month. After the new programme was introduced, about 700 new child-care providers were registered, 90% of those as individual care providers (baby-sitters). Accordingly it will reduce the waiting list and enhance the availability of this service.

A2.9.4. Fertility trends

A2.9.5. Summary and conclusions

A2.10. LITHUANIA

A2.10.1. Societal conditions affecting fertility

Macro-economic structure

Again in common with other settings across CEE, Lithuania was hit with a high degree of economic and political turmoil in the 1990s. During this period GDP per capita growth was generally meagre. By the late 1990s/early 2000s unemployment was rising towards 20%. As we discuss below, during this period more progressive family policies relating to reconciling work and family (especially for women) were sidelined in favour of ensuring basic social protection.

The period 2000-2008, however, was marked by rapid economic growth and a quadrupling of GDP per capita. Unemployment tumbled from a high of 18% in 2000 to a low of just 4% in 2007-2008. Upon entry of the EU in 2004, however, very high levels of emigration to Western Europe began – particularly among young, single and well-educated men and women.⁵² It transpires that much of this growth was driven by cheap credit being made available by Scandinavian banks allowing for growing trade deficits and an over-heated housing market.

By 2009, however, the economic crash meant that GDP growth sank to -15%; GDP per capita declined by 25% and unemployment peaked at 18% by early 2010. Emigration almost quadrupled between 2008 and 2010.⁵³ Since then unemployment has steadily declined and a return to rising GDP growth rates and per capita increases has been seen. However, this period has been marked by severe austerity budgets and cuts to welfare, pensions and public sector wages.

Gender roles and the family

In common with other FSCE, the two worker family model sustained its dominant role throughout the last century in Lithuania. The rapid structural modernization after WWII resulted in the shift from the agrarian household production family model with both working spouses to the family model with two professionally employed spouses. The prevailing model of female employment was and continues to be full time employment. The female employment rate in 1998-2013 fluctuated very insignificantly around 60% and was very close to the men employment rate. Female labour force participation in the period of 1980-2008 also did not experienced very sharp changes and remains close to 70%.

A further inheritance of the Soviet era is that the educational level of women in Lithuania exceeds that of men. There are more women with higher and post-secondary tertiary education compared to men.

Time budget and opinion surveys show that in Lithuanian families, women spend significantly more time on household tasks and childcare. Women take primary responsibility in the tasks associated with the biomedical and social care for the children, routine household tasks while men take responsibility for the occasional repairs (Stankūnienė et al. 2003; Purvanckienė, Purvaneckas 2001; Maslauskaitė 2004; Tereškinas 2008; Kraniauskas 2009; Reingardė 2009).

Gender culture in Lithuania remains shaped by the deep patriarchal sentiments despite some changes in the cultural gender climate during the last two decades. Although younger birth cohorts share more egalitarian views compare to the older ones, there is significant gender divide in the attitudes towards the role of women in family and society within the young generation. Comparative studies prove that Lithuania is close to the other European countries with the traditional gender role ideology (Matysiak 2011) and shifts in gender culture towards the more egalitarian gender attitudes are very moderate (Maslauskaite 2008)

⁵² http://www.iom.lt/documents/Migration_profile_EN.pdf

⁵³ http://www.iom.lt/documents/Migration_profile_EN.pdf

Childcare services is a significant agent in women's opportunity structure and could help to balance the professional and childcare roles. The shift towards the de-familisation of the childcare took place in Lithuania during the Soviet period. In 1960 the share of children under age six in the kindergartens was minor and comprised less than 10 per cent. After almost two and a half decades in 1987 about half of the children aged one to three and around 70 per cent aged three to six attended accordingly crèches and kindergartens (Figure 4). Significant changes occurred after the 1990s with the economic downturn, massive job losses for men and women, ideological re-traditionalisation of the gender roles (see next section) and massive deterioration of the formal childcare system especially in the rural areas. Since the middle of the 1990s the childcare services have been expanded again (Stankuniene, Jasilioniene 2008). In 2012 the share of children from 3 to 6 attending the kindergarten even exceeded the highest level of the soviet period. Nevertheless the pattern of the public childcare has several significant features. First, it is mostly used for the children older than three years. Second, there are major urban rural division in the attendance of the public childcare institutions.

Fertility preferences

The findings of the surveys conducted around the last fifteen years (1994-2010) show that not only fertility has decreased in Lithuania but fertility intentions have been shifting towards decline, too. During the fifteen years since the mid-1990s the mean desired number of children among the 18-49 year-olds (both men and women) who already have and/or desire to have children has fallen from 2.09 (in 1994-1995) to 1.99 (in 2010), while among the total population of this age the change is from 1.84 to 1.81.

The number of children intended to have which at the turn of this century was still close to the replacement level, has fallen, within the decade, far below two children: among the 18-49 year-olds the mean number of children intended to have fallen from 1.91 in 2001 to 1.75 in 2010.

Differences between fertility intentions of men and women are rather considerable. Although the development trend of fertility intentions of men and women is similar, the rates and the change trajectory are considerably different: intended fertility rates of men which had been higher in 2001, were falling consistently and to a larger extent in over the period of 2001-2010 (2001, 2006, 2009 and 2010 survey data), whereas among women they were slowly moving, with slight fluctuations, towards decline and according to the data of the last survey (2010) are higher than those of men: for 18-49 years men the mean intended number of children has declined from 1.96 to 1.68, and for women – from 1.87 to 1.81

A2.10.2. Family policy strategy

1988-2008

The roots of modern Lithuanian family policy can be found in the national programme "*Lithuanian Population, 1991 – 2005*" published in 1989 – 1990. This set out a generally progressive systems based upon assistance to families to reconcile work and parenthood through flexible working times and childcare supplemented by financial support – all within a broadly pro-natalist framework. However, in the early 1990s, the onset of Conservative rule – as well as a tacit rejection of the Soviet past meant that these progressive policies were put on hold. Indeed, during this period the traditional patriarchal values of family were exalted, the attitudes on homecoming of women as "custodians of family hearth", on refusal to send children to pre-school institutions, on ban of abortions, etc., were expressed. Modern ideas which made prerequisites for positive results were actually lost from sight and the path of financial support was followed which offered small benefits in order to solve family wellbeing. This was in part driven by the rapid economic decline seen in the early 1990s (see above) which saw families with small children especially hard hit. In this paradigm, minimum social guarantees were the priority and these were delivered through cash payments and other allowances. In the early 1990s, therefore, families were only offered "piecemeal" social support and this proved cost-ineffective for the state. Indeed, during this era key family policy directions such as development and quality improvement of childcare services prioritised in the initial stage of Lithuanian family policy change (i.e. institutions and strategies to provide opportunities for parents to reconcile household concerns, parenting and employment) were shrinking. A number of pre-school childcare institutions were closed down, mostly in rural areas significantly decreasing the possibilities to send the children to nurseries and kindergartens. Patriarchal attitudes were strengthening which were urging women to go back home and "kindle the family hearth" while men's role would be to work and head the family. The multiple measures addressed to family support did not even hint on providing more favourable and flexible employment conditions for parents with young children. Although at that time fertility started declining rapidly, multiple actions applied failed to reveal pro-natalist ideas. In force of

objective economic and societal transformation and development conditions as well as amateurish actions of family policymakers, a back step towards demodernisation of the policy was taken in Lithuania.

From the mid-1990s, family policy took a more rational direction with large-scale reform of the previous benefits system – not least due to the poor economic conditions. In 1996 the Government approved the *Conception of Family Policy* with explicit goals for both family wellbeing and increasing fertility through reconciliation of work and family (flexible employment, improvement of childcare and upbringing conditions, etc.), financial support, provision of housing. In the *Conception*, the provisions on Government's commitment to create a family-friendly environment were presented as the main goals of the family policy in the broadest sense. The goals of *Conception* articulated support of pro-family and pro-natalist strivings and oriented to support pro-egalitarian relationship. However the provisions established in the *Conception* failed to be implemented through a further shift in the political landscape of the country. Consequently, family policy again refocused on the system of financial support to family, while other packages of non-financial support were neglected.

The years 2000-2008 were characterised by further vicissitudes in family policy formulation with more progressive policies concerning work-family reconciliation introduced, not comprehensively implemented, then essentially repealed upon a changing political cycle. The *Strategy for the National Population Policy* started and was approved by the Government in 2004 where a pro-natalist goal was explicitly articulated, and arrangement of the family-friendly working conditions was emphasised as one of the main aims of the governmental support to families, notably families with children. The *Strategy* also consolidated the aims of the improvement and increased accessibility of childcare services, plans were made on further increase of parental allowances. However, insufficient attention was paid to the issues of gender equality. No specific actions were provided for the development of flexible forms of employment and increasing employers' interest to create a family-friendly environment.

As such, while on a *conceptual* level the *Strategy* made, once again, a turn towards the framework of modern family policy and its priorities able to increase support to family and have a positive effect on fertility. Subsequent actions however, were in fact a continuation of the course of family policy embarked on a decade before: it was restricted to an increase of financial payments and development of the childcare leave system – extension of duration of parental leave, introduction of paternal leave.

In general, this ten-year-long period of formation and introduction of family policy was characterised by what has been termed 'irresoluteness' (Tereškina, Purvaneckienė, 2012) or 'lost purposefulness' (Jasilionienė, 2005): family policy was stagnant; the goals were obscure; the measures were mostly oriented towards increase of payments; the pre-school children care services were practically at a standstill and there was no improvement in the development of flexible employment forms. On the conceptual level there were several renaissance attempts, but these merely echoed the cycles of political life and stopped short of turning into real actions.

From 2008 to the present

The year 2008 was an exceptional year which led Lithuania to experimental history of family policy development and sent a message to the effect that for family policymakers the essence and mission of family policy is still rather obscure. Against the background of intensive discussions and permanent demonstration in the public space of the attitudes by the policymakers, the payments were enlarged and the system of leave related to childcare was modified. The culmination of this was a resolution adopted in 2008 which provided a very generous payment during parental leave of 100 percent salary until the child is one year old and 85 percent salary then child is from one to two years old – one of the most generous in the world (see next section). In parallel, Parliament adopted a *National Family Policy Conception*, the goal of which was to consolidate the provisions of family policy on the legislative level. But the main idea of the document, which was amateurishly prepared and even in conflict with the Constitution was to establish at the legislative level the priority to the traditional family (only married family).

The recent phase of family policy strategy is, however, marked by retrenchment and a lack of overall strategic clarity. Economic decline which started at the end of 2008 compelled to lower the financial payments of family policy. In 2010 and 2011 the parental leave system was adjusted. Since the mid of 2011: one of the parents opted for a year-long parental leave, she/he is entitled to a payment of a 100 percent compensation for salary, and where a two-year leave is preferred, during the first year 70 percent compensation and during the second – 40 percent compensation is paid. Although this retreat which lowered the payments for parental leave caused heated public discussions, with the context of other countries in mind it could be maintained that

Lithuanian family policy has preserved its generous character. Furthermore, in making these changes some positive elements were revealed: some preconditions for choice of alternative opportunities were created for families with young children – the families, taking into account their preferred lifestyle could choose a more suitable childcare leave version until the age of two. However it should be noted that from 2008 while exceptional attention was paid to reorganization of the leave system which was effected under the declared goal of increasing support to family and facilitating higher fertility, another more important but still backward sphere of family policy, notably development of childcare services, was left undeveloped.

A2.10.3. Specific family policy measures

Maternity/paternity leave

After the post-natal period, parental (maternity/paternity) benefit is paid to one of the insured parents (foster parents) or guardians who take care of the child during the parental (maternity/paternity) leave.

Period	% of compensatory wage of beneficiary
1994 – Feb 2004 ⁵⁴	60% until child = one year old
Mar 2004 – Dec 2006	70% until child = one year old
Jan 2007 – Jun 2007	85% until child = one year old
Jul 2007 – Dec 2007 ⁵⁵	100% for 1 st six months; 85% for 2 nd six months
Jan 2008 – Jun 2010 ⁵⁶	100% until child = one year old; 75% until child = two years old
Jul 2010 – Jun 2011 ⁵⁷	90% until child = one year old; 75% until child = two years old
Jul 2011 – present ⁵⁸	Choose between a one- and a two-year benefit payment period. If a one-year benefit payment period is chosen, a benefit in the amount of 100 per cent of the compensatory wage is paid; if a two-year period is chosen, a benefit in the amount of 70% of the compensatory wage is paid during the first year, and in the amount of 40% during the second year

Furthermore, from July 1st 2006 paternity benefit is paid for father during the paternity leave from the day of birth of the child until the child is one month old. The amount of the benefit is 100% of the compensatory wage.

The maternity (before delivery + after delivery) allowance is paid for 126 calendar days. In cases of complicated childbirth and if more than one child was born, the allowance is paid for additional 14 calendar days. The amount of a maternity benefit during a maternity leave period - 100 per cent of salary.

Birth grant

Since 2009, a lump sum birth grant is paid to a mother (father) or guardian for every child born alive. This currently amounts to 11 times the 'basic social benefit' [BSB] (8xBSB before 2009).⁵⁹ Currently, the BSB is around €38⁶⁰, so the birth grant would be around €418.

A2.10.4. Fertility trends

⁵⁴ Changes of the *Social Law on Illness and Maternity of the Republic of Lithuania*, 1994

⁵⁵ Changes of the Law on Sickness and Maternity Social Insurance *of the Republic of Lithuania*, 2006

⁵⁶ Changes of the Law on Sickness and Maternity Social Insurance *of the Republic of Lithuania*, 2007

⁵⁷ Changes of the Law on Sickness and Maternity Social Insurance *of the Republic of Lithuania*, 2010

⁵⁸ Changes of the Law on Sickness and Maternity Social Insurance *of the Republic of Lithuania*, 2011

⁵⁹ The BSB (*before 1 August 2008, minimum standard of living (MSL)*) is an indicator used in defining and calculating the rates of social protection benefits, the value of which is approved by the Government of the Republic of Lithuania

⁶⁰http://ec.europa.eu/employment_social/empl_portal/SSRinEU/Your%20social%20security%20rights%20in%20Lithuania_en.pdf

A2.10.5. Summary and conclusions

A2.11. MONTENEGRO

A2.11.1. Societal conditions affecting fertility

A2.11.2. Family policy strategy

A2.11.3. Specific family policy measures

A2.11.4. Fertility trends

A2.11.5. Summary and conclusions

A2.12. POLAND

A2.12.1. Societal conditions affecting fertility

In 2015 the parliamentary election will take place. The Civil Platform (PO) which constitutes the current government in the coalition with the Farmers' Party (PSL), will compete primarily with the Law and Justice (PiS).

In the 1990s, changes in the family policy were strictly related to the political affiliation of the government. It influenced instability of measures due to the changing policy orientation. The next decade brought both more stability in measures already implemented (the major reform of family benefits of 2003 is still in force) as well as new solutions implemented since 2007 (reforms of the leave system and formal child care). The recent years showed the government efforts to generate a more family friendly climate and to enable both parents to combine work and childcare. In case the PO will not be in power to establish a new government some revisions of recent policy instruments would be possible. However, there is an increasing common understanding that there is a need to counteract low fertility in Poland. Hence, a main issue would be not in giving-up policy interventions but which policy interventions would be preferred.

A concise evaluation of the economic state of affairs in the country

Poland economy slowed during the years 2008-2012, keeping however the GDP growth (annual rates of growth were between 5,1 % in 2008 and 1,6% in 2009 and 2013). Employment oscillated between 13,8 and 14,2 million contrary to registered unemployment being on steady increase (from 1,47 to 2,14 million people). According to LFS statistics the unemployment rate increased to 10,1% in 2012. Persons aged 15-24 are confronted with much higher unemployment risk – the unemployment rate reached 27.3%.

Annual changes in personal income and salaries are presented below. They illustrate the impact of economic slowdown on income of different population groups.

Table 1 Annual changes in disposable income of selected population groups, 2008-2012.

Income by population groups	2008	2009	2010	2011	2012
Gross real household disposable income	104,2	103,5	102,0	101,3	100,1
Gross real disposable income of employees	107,0	103,2	101,9	101,4	99,4
Gross real disposable income of pensioners and receivers of disability pension	102,4	103,7	102,4	99,3	100,3
Gross average monthly salaries (real terms)	105,9	102,0	101,4	101,4	100,1

Source: macroeconomic indicators, National Statistical Office.

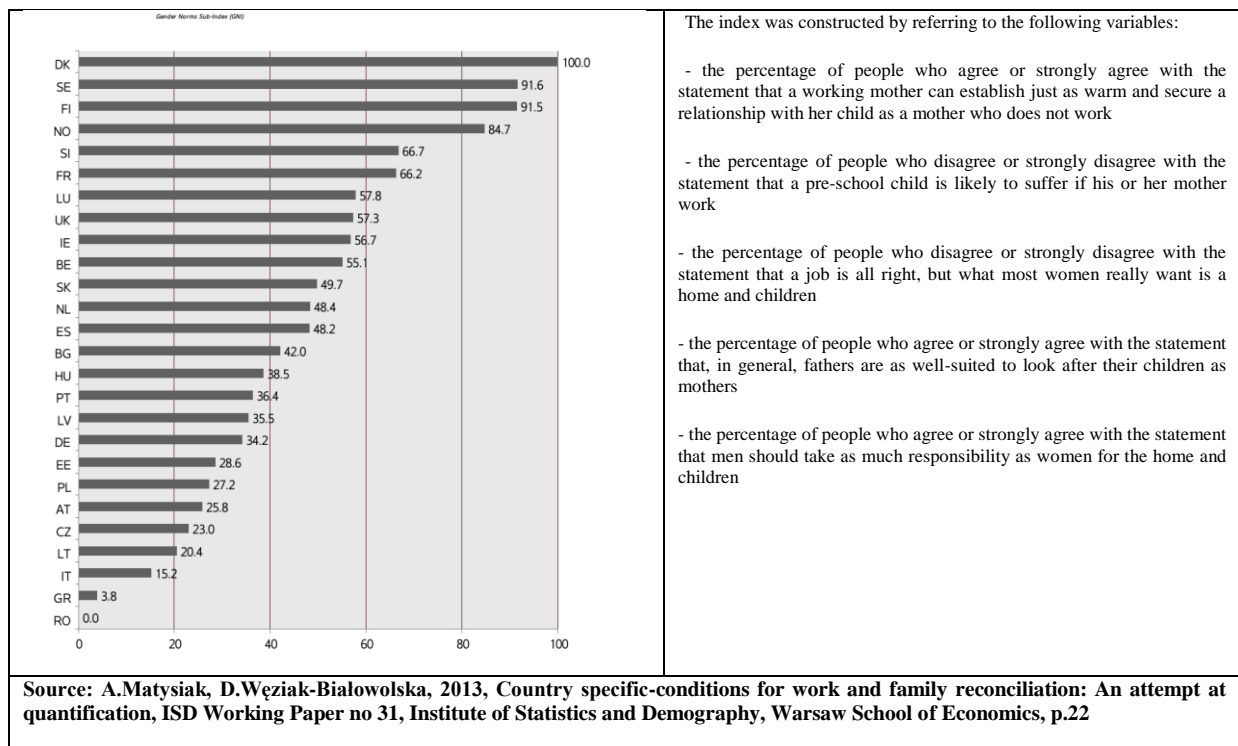
Some signs of the economic recovery started to be observed in 2013. Also gross average monthly salaries increased by 2,5% as compared to 2012.

An overview of changes (or lack thereof) in gender relations in family and beyond; gender policies⁶¹

⁶¹ Baranowska A., 2009, *Women's decisions at the transition to adulthood – investments in labour market career or family career? The role of human capital and institutional settings,*

The synthetic evaluation of gender relations in family and beyond in Poland could be given by referring to an index which quantifies attitudes towards social norms regarding parents' involvement in childcare (including social norms regarding women's participation in paid employment, women's participation in childcare, and men's participation in childcare) by Matysiak & Węziak-Białowolska (2013). Data came from the European Value Survey of 2008. The figure below shows the gender norm index based on normalized values i.e. the lower are scores of the index, the worse is an evaluation regarding attitudes on sharing work and care responsibilities between women and men. Poland reveals still a rather traditional approach to gender roles despite a remarkable progress in law regulations regarding gender equality at work as well as in the family. Law regulations guarantee equality of men and women in the work place. However, practical arrangements look differently. Similarly, leave regulations make it possible to share care responsibilities between mothers and fathers. But leaves are predominantly taken up by mothers.

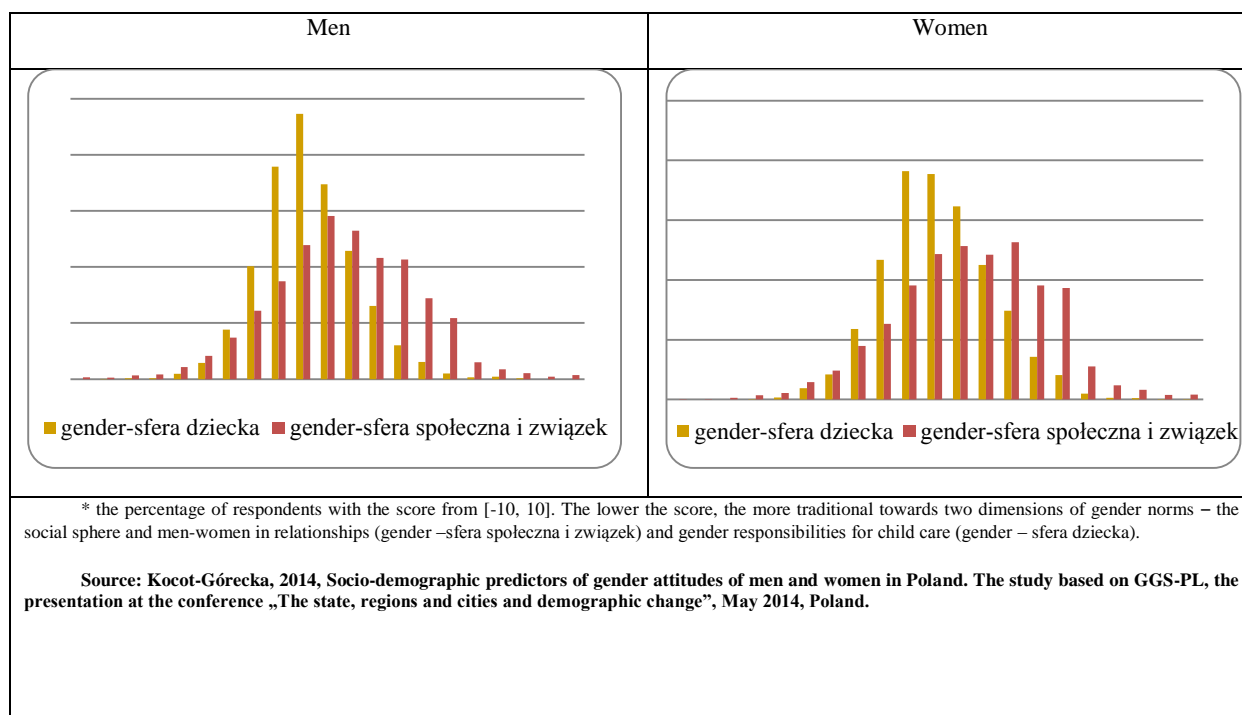
Figure 2 The gender norm index based on normalized values, EVS 2008.



The study on gender-related values based on data coming from the GGS in Poland indicates that one should make a distinction between views on gender roles in the social sphere and men-women in relationships and gender responsibilities for child care (Kocot-Górecka, 2014).

in: Kotowska I.E. (ed.), 2009, Structural and cultural determinants of women's labour market participation in Poland (in Polish), Wydawnictwo Naukowe SCHOLAR, 175-196; Matysiak A., 2009, Women's employment in Poland: an obstacle or a precondition for motherhood? in: Kotowska I.E. (red.), 2009, Structural and cultural determinants of women's labour market participation in Poland (in Polish), Wydawnictwo Naukowe SCHOLAR, 197-232; Matysiak, A., Mynarska, M., 2013, Women's self-employment in Poland: A strategy for combining work and childcare? ISD Working Paper, Szkoła Główna Handlowa, no.2; Matysiak A., D.Węziak-Białowolska, 2013, Country specific-conditions for work and family reconciliation: An attempt at quantification, ISD Working Paper no 31, Institute of Statistics and Demography, Warsaw School of Economics; K.Kocot-Górecka, 2014, Socio-demographic predictors of gender attitudes of men and women in Poland. The study based on GGS-PL, the presentation at the conference „The state, regions and cities and demographic change”, May 2014, Poland.

Figure 3 The gender norm scores by sex, GGS-PL 2011*



There is more approval for gender equality in the social domain and in relationships among both men and women while less acceptance is given to sharing child care responsibilities, especially by men.

A brief description of social and economic conditions of young people⁶²

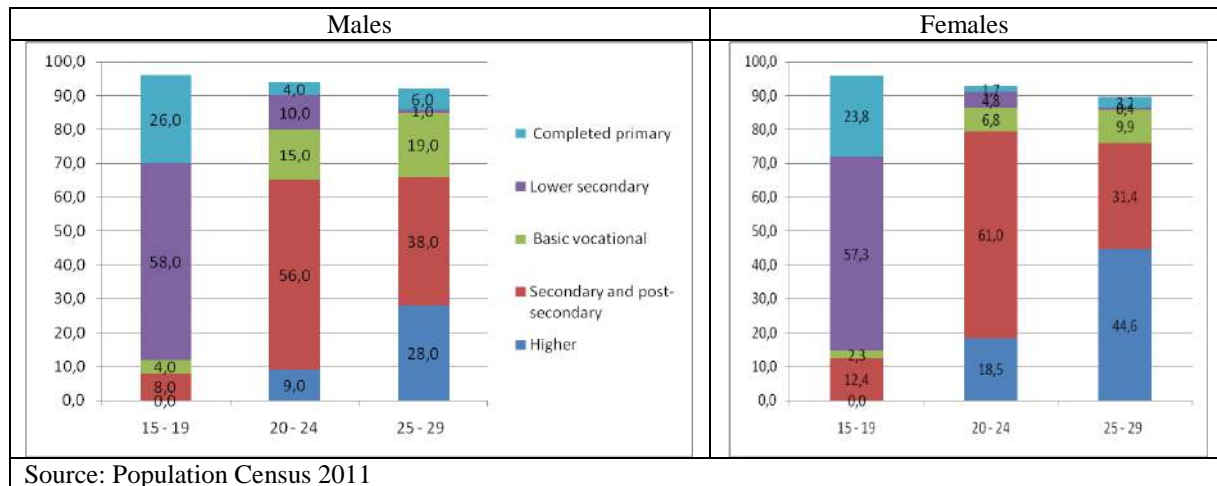
The transformation changed values attributed to education. The labour market prospects of better educated persons differed visibly from those with lower skills. Returns to education were extremely high in the 1990s. They dropped in the last decade, but still young people can benefit from higher levels of education. The number of university students expanded from 0,4 million in 1990 to 1,6 million in 2012.

⁶² Baranowska-Rataj A., 2013, *What Would Your Parents Say? The Impact of Cohabitation Among Young People on Their Relationships with Their Parents*, „Journal of Happiness Studies”; Baranowska A., 2011, *Changing patterns of entry into employment and motherhood in Poland: a cross cohort comparison*, in: Blossfeld H.-P., Bertolini S., Hofäcker D., (eds), *Youth on globalised labour markets: rising uncertainty and its effects on early employment and family lives in Europe*, Barbara Budrich Publishers, Leverkusen 201; I.E. Kotowska, A. Matysiak, A. Pailhé, A. Solaz, M. Styrz and D. Vignoli, 2010, *Second European Quality of Life Survey: Family life and work (Luxembourg: European Foundation for the Improvement of Living and Working Conditions, Office for Official Publications of the European Communities)*; Strzelecki P., Kotowska I.E., 2014, *The labour market*, in: I.E. Kotowska (ed), *Social Diagnosis 2013: Living conditions and the quality of life of Poles. - The labour market and social exclusion in the perception of Poles (in Polish)*, Ministerstwo Pracy i Polityki Społecznej -Centrum Rozwoju Zasobów Ludzkich, Warszawa. C. Saraceno, M. Olagnero, P. Torrioni, 2005, *First European Quality of Life Survey: Families, Work and Social Networks (Luxembourg: European Foundation for the Improvement of Living and Working Conditions, Office for Official Publications of the European Communities)*

Women are more inclined to continue education at the university. Their investment in education might be considered as a strategy to meet the labour market demands and to overcome gender inequalities in the labour market. It has also consequences for their life aspirations and choices, including work and family careers.

These developments brought remarkable shifts in the population composition by education. The Population Census 2011 data reveal remarkable differences between man and women. Almost every second women aged 25-29 is a university graduate contrary to 28% of men at that age. That discrepancy matters for the marriage market and expectations towards a partner.

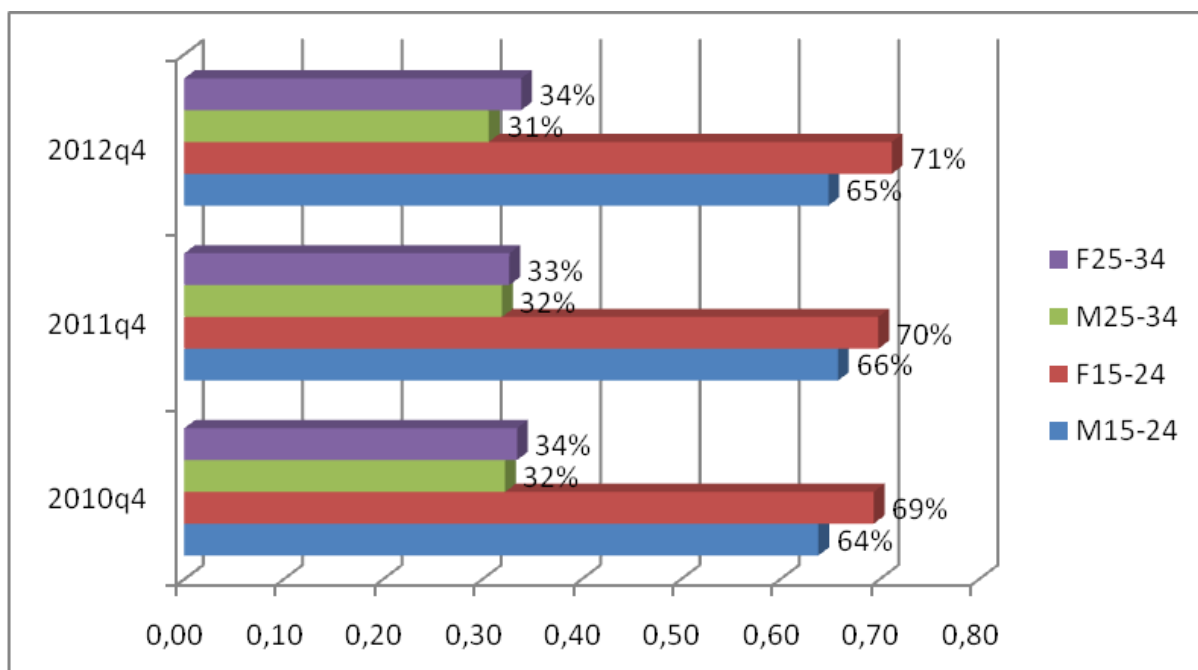
Figure 2 The young people by education and sex, Population Census 2011



Difficulties young people face when entering the labour market manifest not only by the unemployment risks, visibly higher than for other population groups. They are also disproportionately exposed to work instability due to job contracts offered to them. The labour market in Poland is distinctive because of a high share of fixed term contracts. These contracts mostly refer to young persons. Data from the LFS show that more than 60% job contracts for persons aged 15-24 years are fixed term contracts (Figure 3). That percentage goes down for persons aged 25-34 but still one third of them work on the fix-term basis. This surely contributes to income uncertainty and concerns about the household welfare. Women aged 15-24 seem to be more exposed to that type of job uncertainty. Consequently, they attribute more value to get a job before becoming a mother.

But it should be added that young persons on fixed-term contracts had a higher probability to get a stable job than persons without such job experience but these chances went down in 2011-2013 as compared to 2009-2011 (Strzelecki, Kotowska, 2014).

Figure 3 Fixed term contracts as a share of the total number contracts of young persons by age and sex, 2010-2012



Source: LFS data, fourth quarter

The difficulties experienced by young persons in getting stable job and income determine also their capabilities to form an independent household while employment of young adults contributes positively to their independent living (Kotowska et al, 2010). When looking at patterns of leaving the parental home young people in Poland reveal the pattern labeled ‘partnering in a parental household’ (Saraceno et al, 2005). It means that young people enter a union before leaving the parental home. It is manifested by the relatively late exits from the parental home and relatively early first marriages despite a clear tendency to postpone marriage.

A2.12.2. Family policy strategy

A2.12.3. Specific family policy measures

A. Child and birth allowances:

Family allowance

Family allowance (*zasiłek rodzinny*) was established in 1947 paid to an employed worker for his unemployed spouse and children under the age of 16 (or 24 if in education and not earning more than 50% of the minimum wage). With some changes of eligibility criteria and its amount, the family allowance was present in Polish law ever since.

At first, the amount of the allowance was related to the number of children - the more children you have the higher the allowance:

- one child: 1650PLN total,
- two children – 3600PLN total
- three children – 3600 + 2250
- four children – 3600 + 2250 + 2250, etc.

First change was made in 1974 when an income criterion defining the amount of the allowance was introduced. The system was still the same but families with income per capita not exceeding 1400 PLN received higher rates. E.g.:

Table 2 Amounts of family allowances from 1949.

	Income per capita >1400	Income per capita <=1400
One child	70	160

Two children	175	410
Three children	310	750
Four children	310 + 155	750+360

Source: An Act of Minister of Labour and Social Care of February 23, 1949 (No.18, Item 124).

Additionally, family was granted 500PLN for each disabled child. **From 1980** instead of two, three rates were introduced – for families with income per capita less than 1600PLN, for families with income per capita between 1600PLN and 2000PLN and for families with income per capita higher than 2000PLN.

From 1989, the amount of family allowance was no longer related to the number of children **but** was defined as a single monthly amount (initially 5300PLN) for each child in a worker's family – i.e. a worker received 5300PLN for each child under 16 (or under 25 years old if in education and not earning more than the minimum wage), regardless of income per capita.

In 1991, the criteria were tightened – a worker could receive family allowance for each child under 16 (**or** under 20 if in education) and not earning more than 25% of the minimum wage.

In addition, the amount of the family allowance was again changed – it was not a flat-rate any more. The amount of allowance was equal to:

- 4% of the average wage in the economy if the worker had 1 child,
- 12% of the average wage in the economy if the worker had 2 children,
- 12+12% of the average wage in the economy if the worker had 3 or more children.

The allowance was granted regardless of income per capita.

From 1995, the family benefit was again a flat-rate amount (not related to the percentage of average wage in economy). But the entitlement was again income-related (before it was paid to all employed and insured workers) – now it was again only granted if the income per capita in worker's family in the last two quarters preceding the benefit period was not higher than 50% of average wage in economy. Change in coverage groups: benefit was granted to a worker's children regardless of the children's pay/scholarship amount (before the child could not earn more than a defined amount).

From 1997, the amount of family benefit changed one more time – the flat-rate was increased for third and every subsequent child (e.g. 29.1PLN for the first, 29.1PLN for the second, 36PLN for the third and 45PLN for every next child). For instance a family with 3 children received 29+29+36PLN. The income-related entitlement was kept.

In 2001, another means of setting income criteria for family benefit were introduced. Between June 1, 2002 and May 31, 2003, the family benefit was paid to individuals only if their family's average per capita income in 2001 did not exceed a certain amount (548 PLN). The system of different rates for each parity child remained unchanged.

In 2003, a major reform of family policy and family benefits was introduced. The Law on Family Benefits of 2003, being in force since May 2004, supported only low income families with children. Amendments to that law, implemented in subsequent years did not change the main concept of family support: a basic means-tested family allowance is supplemented by financial additions (supplements), granted under special circumstances related to child care and rearing. Family benefits include also nursing benefits and birth grants.

It is necessary to point out another dimension of the 2003 family assistance reform which relates to institutions involved in the payment procedure. As of September 2006 the family benefit system started to function at the local level i.e. family allowances and related additions as well as birth grants and nursing allowances were paid by local governments from resources granted by the state. In the transitory period i.e. between May 2004 and August 2006 various institutions were involved in providing different types of benefits (employers, social insurance agencies, local governments, etc.).

Under the reform of 2003 the following changes were introduced :

1. The family benefit was also paid to foreigners who were EU nationals.

2. The family benefit was means-tested as before but the income limit was changed. The general threshold was established at the level of 504 PLN per capita (circa 128 euro, net income) and for families with disabled children up to 25 years 583 PLN (176 euro)⁶³. That criterion refers to households with main income from non-agriculture sources.

The separate payment granted before to single parents was cancelled from 2004 on.

For the period 1 May 2004 – 31 August 2006 the basic family allowance **was dependent on the number of children** (the monthly amount equals 43 PLN (13 euro) for the first and the second child, 53 PLN (16 euro) for the third child and 66 PLN (20 euro) for the fourth and subsequent children). Both the income limit and the amount of the allowance were to be verified every three years.

Since 1 September 2006 the basic family allowance became **dependent on the age** of the child and its level increased: to a monthly amount of 48 PLN (15 euro) for a child up to 5 years, 64 PLN (19 euro) for a child aged 6-18 and 68 PLN (20 euro) for a child aged 19-24. Families with three or more children received 80 PLN (24 euro) additionally for third and subsequent children (if the income criterion holds).

The family allowance was paid for children up to 18 years of age. It might be extended to age of 21 years upon a condition of continuing education. Disabled children who stayed in education received the family allowance until 24 years of age.

3. The basic family allowance was supplemented by financial additions, granted under special circumstances related to the care and child-rearing (the financial supplements concern: lone mothers, lone mothers who lost their entitlement to unemployment benefit, persons on the parental leave, parents of disabled children). There were also educational supplements: for children attending schools outside the place of residence and lump sums paid once a year at the beginning of the school year for children⁶⁴. **Since they were income-tested i.e. they were strictly related to the basic family allowance they supported mainly the low-income families.**

These supplements included:

- (1) Childbirth grant (500 PLN paid once to biological or adoptive parents, and only until the child was one year old; an eligibility was based on family income per capita, and was no longer universal- this one replaced the employment related childbirth grant
- (2) Childcare during parental leave (400 PLN was paid monthly over a period of 24 months, with an extension to 36 months if more than two children were born, or to 72 months if a child was born disabled);
- (3) Single parenthood, whether biological or adoptive (monthly payments of 170 PLN or 250 PLN, if the child was disabled) - this one replaced the “increased amount of family benefit” granted for single parents before;
- (4) The education and rehabilitation of a disabled child, if under age 24 (50 PLN was paid monthly to parents caring for children under age five, and 70 PLN was paid monthly to parents caring for children ages 5-24);
- (5) The start of a new school year (90 PLN was paid once a year in September); and
- (6) Attending school outside the local area (80 PLN was paid monthly during the school year)

In 2005, amendments were made to the law which remarkably reduced the access to financial supplements for lone parents (mothers)⁶⁵ and introduced an additional financial support for families with three and more children. **In April 2005** a new supplement to the basic family allowance was introduced: families receive the additional amount of 50 PLN for the third and subsequent child. That payment was increased to 80 PLN **in 2006**.

Since **January 2006** the birth grant of 500 PLN (151 euro), granted for those families which are entitled to the basic family allowance, was doubled. Moreover, the new grant of 1000 PLN for a newborn baby was introduced, irrespective of the family income (see below).

It should be pointed that local governments could implement their own additional birth grants, financed from their resources. Entitlement criteria and the amount of payment were upon their own decisions.

4. Two types of nursing benefits are covered by the family benefit system, they are not dependent on income:

⁶³ The exchange rate is 3.31 PLN for 1 euro.

⁶⁴ In 2006 that additional payment was extended to 6 year children who start their pre-school preparation.

⁶⁵ According to the 2002 Population Census lone mothers account for 89 per cent of one-parent families.

- nursing allowance – *zasilek pielęgnacyjny* (153 PLN monthly i.e. 46 euro), paid irrespectively of a household income. It is assigned to disabled household members and persons aged 75 and more. For the former it is paid during the certified period of disability;
- nursing benefit – *świadczenie pielęgnacyjne* (420 PLN monthly i.e. 127 euro) – assigned to a parent of a disabled child, who withdraws from employment to care after a child. The benefit is income-testing – the household income per person cannot exceed 583 PLN (176 euro).

The subsequent years brought many amendments to the law of 2003. The main changes referred to:

- increases in the level of benefits,
- increases in the threshold income,
- continuous changes in the eligibility criteria for the birth grant.

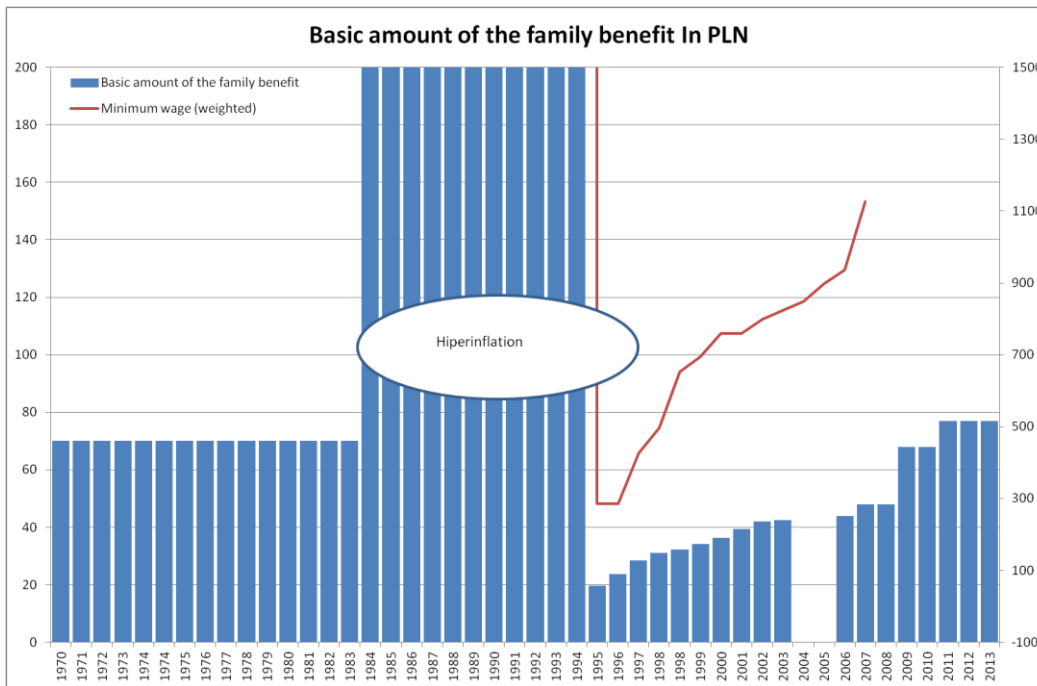
Since November 2009, family allowances increased to 68 PLN for a child up to five years, 91 PLN for a child aged 5-18, and 98 PLN for a child aged 18 -24. The rule was that the amount of family benefit, set for the period of 3 years, could not be lower than 40% of the so called consumption basket (i.e., equal to the price of monthly food consumption that assures normal development of a child)

Three years later (**November 2012**) they went up as well to 77 PLN for a child up to five years, 106 PLN for a child aged 5-18, and 115 PLN for a child aged 18 -24.

Since November 2012 the income limit was increased to 539 PLN per person and to 623 PLN for families with disabled children. Moreover, the government proposed a next revision of the income limit to 574 PLN and 664 PLN, respectively, being in force since November 2014.

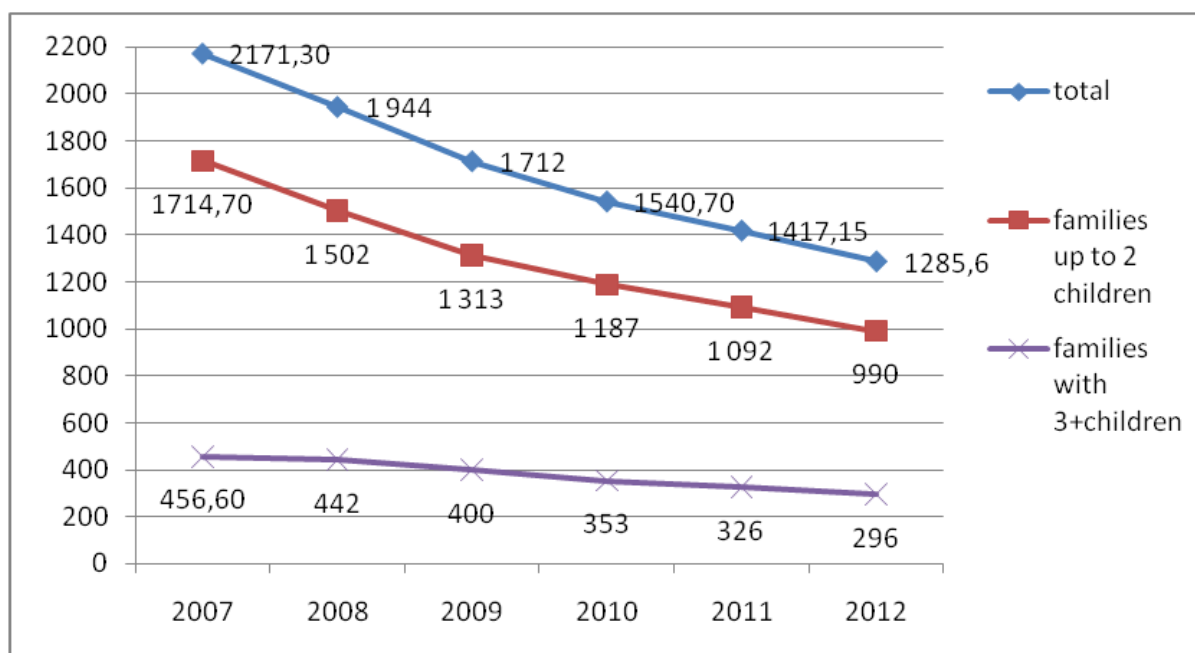
Below you can find a graph representing the net amount of the family benefit and the minimum wage to get a feeling about the value financial support (i.e., its marginal value).

Figure 4 Basic amount of family benefit in PLN (left scale) in comparison to the minimum wage (right scale).



Source: Prepared by the authors on the base of documentation published by the Ministry of Labour and the Director of Social Insurance Office.

Figure 5 Families receiving means-tested benefits by the number of children (in thous.), 2007-2012.



Source: data come from annual reports of the Ministry of Labour and Social Policy.

Additional birth-related allowances:

- Employment-related birth grant

In 1974, employed women who gave birth to or adopted a child were granted an employment-related birth grant equal to three times the family benefit, but not less than 500 PLN per child (in the case of multiple births). Only women who were employed or who were married to an employed person were eligible to receive the grant. In 1983, the amount of the employment-related birth grant was changed. Under the new law, the grant was twice the amount of the monthly family benefit paid per child. In 1991 the amount of this grant was tied with the average wage in the economy – first as 12% (1991), then as 15% (1995) and then as 20% (1999) of the average wage in the economy in the last quarter. In 2000 it was transformed into a lump sum of 371,26 PLN. In 2001, it was suspended – it was only granted for children that were born before January 14, 2002.

- One-time grant related to childbirth

In 1978 an one-time grant related to childbirth was introduced. This grant was paid to all parents, regardless of whether they were employed, provided they had a newborn child of Polish nationality (at least one of the parents had to be Polish). The amount of the grant was fixed at 2,000 PLN. Since 1983, women who received employment related childbirth grant were not eligible to this grant.

- One-time family benefit

In 2000, an one-time family benefit was granted to parents with three and more children, regardless of their income. All Polish citizens and foreigners with permanent residency or with refugee status were eligible to receive the benefit, provided the child met the requirements for the regular monthly allowance; i.e., was (a) under age 16, or, if still in education, was under age 20; and/or (b) was eligible to receive a care allowance. If the child was in an institution for the disabled, he/she was also eligible to receive the benefit, but only if the family covered the child's living costs. Only one allowance was paid per child. This allowance was paid in 2000 only, and amounted to 145 PLN

- Baby bonus

In 2006, a baby bonus (separate from the granted between 1974 and 1988, and the family grant supplement related to childbirth available since 2003) was established. All insured mothers, fathers, or foster parents were eligible, regardless of income. The bonus equal to 1000 PLN had to be requested within three months of the birth of the child. An income criteria was introduced from 2013.

Summary:

The system of family allowance can be described as very instable as regulations were changing often however the changes were moving in one direction – limited access to financial support granted only to low income households.

The major changes in the family benefits implemented before 2003 could be characterised as follows:

1. some benefits linked previously to employment were transferred to the state budget or the local governments,
2. new type of social assistance was introduced to address rising poverty,
3. support for multi-children families was expanded,
4. universal benefits were converted into income testing,
5. wage indexing was replaced by price indexing,
6. more restrictive eligibility conditions were introduced.

The reform of family benefits system of 2003 constitutes the institutional setting until today despite many amendments introduced subsequently. However, the general frameworks is still valid: the basic allowance is income dependent and supplemented by various additions, available only for those receiving the allowance. Another important dimension of the reform refers to the fact that since September 2006 family assistance payment started to be paid by local governments from the state budget. However, many amendments to the basic 2003 law made the system difficult to manage and monitor. Also potential receivers are not fully aware on the current status of regulations.

Revisions implemented after 2003 strengthened support for multi -children families (three and more children) and for families with low income levels. The level of benefits increased in 2009 and 2012, however the basic amount paid to parents is still low. There is a regulation about indexing the income limits and level of payment every three years. That condition was not hold for the income threshold which remained unchanged from 2004 till 2012. Consequently, the number of families-receivers of income dependent family benefits decreased steadily. Upgrading the income limit in November 2012 did not stopped the downward trend. **The family benefits system in Poland can be viewed as a tool preventing poverty rather than a system supporting families in their child-related spending.**

Additional remarks:

- Self-employed in agriculture:

Since 1977 there are two separate insurance systems in Poland: one for employees and self-employed outside the agriculture and one for people self-employed in agriculture (i.e. people who own more than 0,5ha (till 1996) or more than 1ha (after 1996) of land and make their living of it). For a long time, the majority of measures aiding families was linked to being employed (e.g., family allowances are granted to employed workers, maternity leave regulations are a part of Labour Code, therefore those self-employed in agriculture were not eligible to receive these measures). From 1977, self-employed in agriculture received a birth grant of 500PLN per each child but no family allowance, they were also granted the universal birth grant. From 1982, there was a family allowance for self-employed in agriculture introduced and birth grant was increased to 2500PLN. However, these benefits could have the same names as benefits for employed workers but they were paid by another insurance institution. From June 1991 family benefit was no longer granted to self-employed in agriculture but the 2003 reform covered also self-employed in agriculture. The calculation of farmers' incomes is based on the basic rate per 1 ha adjusted accordingly to price changes. For instance, for the period September 2005-August 2006 the basic rate was set at the level of 194 PLN (59 euro) while from September 2006 onwards at the level of 135.50 PLN (41 euro).

- Lone parents:

To our knowledge, lone parents received the same amount of family allowance until 1998 when they were granted a 200% of the allowance per child if they were also eligible to receive a care allowance. After 2004 the supplement for lone parents was only granted to lone parents who fulfilled the low income criterion and in 2006 it was withdrawn. The only other preferential treatment for lone parents was granting them priority to enroll their children to preschools since 1999 (see childcare section).

- Family allowance for the spouse:

Before 2003, family allowance was also granted for an unemployed spouse under certain condition (mainly the spouse could not be employed or could not earn more than the minimum basic income). However, here we only focused on the family allowance for the child. Family allowance for the spouse was cancelled in the reform of 2003.

B. CHILD CARE RELATED LEAVE

Maternity leave (urlop macierzyński) and job protection:

In 1924 pregnant female workers were given a legal right to a leave starting not earlier than six weeks prior to delivery. The due date must have been formally confirmed in writing by a doctor. Women were also allowed paid time off work during pregnancy, up to six days per month. Breastfeeding mothers were allowed to have two 30 minutes breaks to feed their children. This time counted as time of work. The work contract could not be terminated during the entire period of pregnancy and the leave. The maternity pay was introduced shortly after in 1933 – office workers were eligible to receive 100% of their average weekly earnings for 12 weeks of leave (paid by the employer; when the leave should be taken was not specified). Manual workers (insured) were provided a “childbirth allowance” paid by social insurance for eight weeks (with at least six weeks taken after childbirth), and equal to 50% of the employee’s average weekly salary (from the past 13 weeks before the childbirth). The regulations for office and manual workers became then equal in the 1940’s (100% of average weekly earnings for 12 weeks, at least 8 weeks before the birth). Starting from 1950’s and with extensions in 1970’s pregnant workers could not be given burdensome tasks, work overnight shifts and their contracts could not be terminated for the entire period of pregnancy and the leave. From 1948 there was a suggestion that at least 2 weeks of the leave should be taken prior to delivery.

In 1972, the period of leave linked to childbirth was for the first time called “maternity leave”.

Maternity leave duration was extended, female workers were given:

- 16 weeks of maternity leave in case of the first childbirth
- 18 weeks of maternity leave for next childbirth or for the first childbirth if it was a multiple pregnancy.

Childbirth allowance was granted for the entire period of maternity leave. Its amount did not change.

In 1974 the length of the maternity leave changed:

Lengths of maternity leave were as follows:

- 16 weeks after the birth of a first child (with at least two weeks taken before the birth, and at least 14 weeks taken after);
- 18 weeks after the birth of a second child and of all subsequent children (with at least two weeks taken before the birth, and at least 14 weeks afterwards);
- 26 weeks in the case of a multiple birth (with at least two weeks taken before the birth, and at least 22 weeks taken after);
- 14 weeks for female workers who had started the legal process of **adopting a child**, but only until the child reached the age of four months;
- 18 weeks for a female worker who had previously adopted a child, even if she was giving birth for the first time; and
- eight weeks in the case of a stillbirth.

In 1975 the name ‘childbirth allowance’ was changed into ‘maternity benefit’.

From 1998, fathers could also take maternity leave under certain conditions:

1. a female worker was allowed to finish her maternity leave earlier, but not before the 14th weeks after the childbirth. In this case, the remainder of the leave had to be used by a father, who had to ask his employer for permission to take leave (an employer had to agree) - for the first time male workers could apply for maternity leave
2. If the mother had died in childbirth, the working father was entitled to the whole period of maternity leave, decreased by the number of weeks already used by the mother.
3. Female and male workers who had started the legal process of adopting a child were allowed additional two weeks of maternity leave (16 weeks in total). The leave could last until the child reached the age of 12 months (before this was only available for female workers).

Both female and male workers who had a child under the age of 4 could not be working overnight, overtime or could not be delegated to other units without their consent (before only female workers had this option) – but if there are both parents – only one of them can benefit from this law.

From 2000:

The length of maternity leave was extended to :

- 26 weeks after the birth of a first child and of all subsequent children (with the suggestion that at least four weeks should be taken prior to delivery);
- 39 weeks following a multiple birth (the same suggestion about four weeks prior to delivery);
- 10 weeks if the child was stillborn or died within six weeks of birth.

From 2001:

The duration of maternity leave was once again changed; this time, the length of leave was reduced:

- 16 weeks after the birth of a first child,
- 18 weeks after the birth of a second child and of all subsequent children, and
- 26 weeks after a multiple birth.

At least two weeks of leave could be used prior to the expected date of the delivery (this was optional – before it was suggested to take some leave before the delivery, now the law only mentioned a possibility of this option). Additionally, if a male worker's employment contract was terminated while taking a portion of his partner's maternity leave (for reasons unrelated to the employee), **he was to be protected by the same regulations as those that apply to female workers**, and he had to be remunerated for the whole period of leave.

From 2003:

The following changes in the duration of maternity leave were introduced:

1. Maternity leave was extended two weeks beyond the leave permitted under the Act of December 21, 2001. Thus, under the reform, mothers were entitled to the following amounts of leave:

- 18 weeks after the birth of a first child;
- 20 weeks after the birth of a second child and any subsequent children;
- 28 weeks after a multiple birth;
- 20 weeks after the birth of a first child for female workers who had been already been caring for an adopted or foster child; and
- 18 weeks for workers (both women and men) who had started the legal process of adopting a child or who had started the legal process to take in a foster child; however, the leave could not be extended beyond the child's seventh birthday (or the 10th birthday, if the child's schooling was postponed) – before it was until the age of one year.

From 2009:

The following changes have been introduced with regard to maternity leave

1. Maternity leave duration was dependent on the number of children born during delivery, and a female worker was therefore entitled to:
 - 20 weeks if one child was born,
 - 31 weeks if two children were born,
 - 33 weeks if three children were born,
 - 35 weeks if four children were born, and
 - 37 weeks if five or more children were born.

A voluntary maternity leave of 6 additional weeks was introduced (with full maternity leave benefit granted). It could be taken up after the obligatory maternity leave, by the father or by the mother. Workers were also entitled to combine additional maternity leave with part-time employment (provided it did not exceed half-time). If a worker decided to combine maternity leave with part-time employment, the maternity allowance was reduced proportionally to the number of working hours.

From 2013: The scheme of work leaves related to childbirth was changes. The system of leave was renamed into a system of family leaves (urlopy rodzicielskie) that had separate parts:

- Maternity leave of the length and rules of use as stated before (urlop macierzyński)
- Paternity leave of the length and rules of use as stated before (urlop ojcowski)
- Voluntary additional maternity leave of the length and rules of sue as stated before (dodatkowy urlop macierzyński)
- Family leave – a new leave in the amount of 26 more weeks to be used after the maternity leave – both mothers and fathers could use the leave on the same terms (urlop rodzicielski). The leave could be also taken by the mother and the father at the same time but the total length could not exceed 26 weeks (so at most the mothers and the father could spend 13 weeks taking care of the child together).

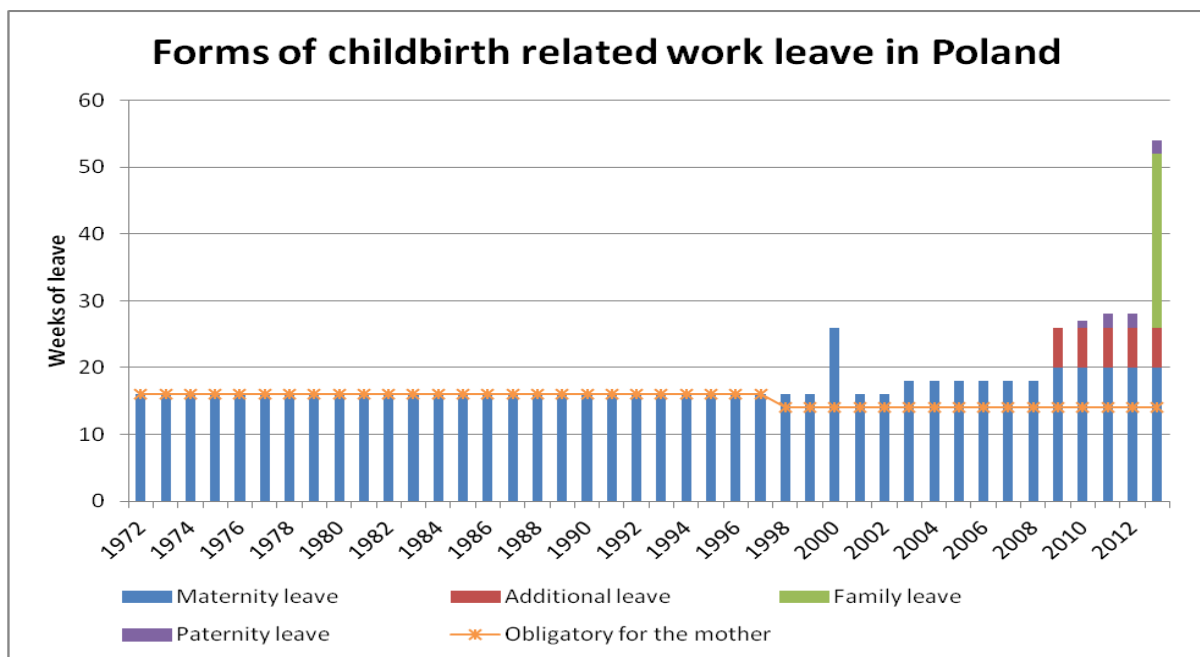
Under these regulations, parents could take up to a year of work leave and could almost equally share the leave period between both of them (mother had to still take at least 14 weeks of the maternity leave right after the delivery).

However, the scheme of maternity/family leave benefits was changed. During the first 26 weeks, the parent on leave is granted a monthly maternity leave benefit of 100% of his or her monthly wage paid prior to childbirth. After 26 weeks, benefit is lowered to 60% of the monthly wage paid prior to childbirth. There is an additional option available only to mothers – if the mother claims, prior to the delivery, that she wants to take full 52 weeks of leave, she will be granted the monthly maternity benefit equal to 80% of her monthly wage for the entire period of leave. She can later delegate a part of leave to the father and he will be also granted 80% of his salary however it is the mother who has to decide prior to delivery to take 52 weeks to secure the maternity benefit of 80% of the wage. The authors are aware how complicated this scheme is but this is indeed how it is described in the legal acts.

Paternity leave (urlop ojcowski)

It was introduced in 2009. Fathers were entitled to a fully remunerated paternity leave of two weeks, but only until the child was one year old. Paternity leave could be taken while the mother was on maternity leave, additional maternity leave, or parental leave; or after the mother’s return to work. Although the above reform was enacted in January 2009, this particular regulation regarding paternity first went into effect on January 1, 2010, with a duration of one week in 2010 and 2011. From 2012, the paternity leave was extended to two weeks.

Figure 6 Total length of work leaves related to childbirth available to employees.



Source: Prepared by the authors based on Amendments to Labour Code published by the Ministry of Labour.

Parental leaves:

Unpaid parental leave was introduced **in 1968** (only for female workers, maximum 12 months, in one part and should be used before the child reached the age of two). During the whole period of parental leave, the worker and her family were eligible to all the benefits linked to her status of employed person (e.g. health insurance or family allowance). Employee on parental leave was could not be terminated and was guaranteed her position when she got back to work. **In 1972** the leave was extended to 3 years to be used until the child reached the age of four. The rules were relaxed over time – the leave could have been taken in parts, in parallel with part-time employment or fathers could use it if the mother was sick or refused to (1981). Starting **from 1989** parents of disabled children could then use the leave until the child was older (7 years from 1981, 10 years starting from 1982 or 18 years).

In 1996 fathers were allowed to take the parental leave at the same basis as the mothers – they no longer needed any justification such as mother’s illness however parents could not take the leave simultaneously.

In 1996 a major amendment was introduced for workers employed under a fixed term contract, trial period or under a contract for a specific task – they were granted the leave only for a period of work included in their contract (previously they were allowed to use the total amount of the leave)

From 2001 both parents could take the leave together for the period of max. 3 months

In 1981 parental allowance was introduced - it was paid by Social Insurance Institution, and was available for all workers on the parental leave for a period of:

- 18 months **starting after maternity leave**; or
- 36 months (a) following a multiple birth, (b) if a child was disabled, or (c) if the worker was a single mother.

The amount of parental benefit was derived from the minimum wage in the economy that was regulated by other periodical acts of Ministry of Labour. To qualify for the allowance, a worker had to meet income criteria - the income per capita should not exceed 3600 PLN. Subsequent changes included the extension of the period of parental benefit payment until 24 months after the maternity leave and the increase of the amount for single mothers. From 1987 on, the level of the parental benefit was changing often. **In 1987** the amount of the benefit decreased as it became a flat-rate benefit - there were three constant amounts of parental benefit granted on the family income basis (income-related) i.e. the lower the family income per capita, the higher the amount of parental benefit. **In 1989** the amount of the parental leave was again decreased to the 25% of the average wage in the economy. **In 1992** a flat-rate was again introduced while **in 2001** the amount was additionally linked to the number of children. **In 2003** parental benefit became a part of a new family allowances scheme – it was a supplement to the basic family allowance defined as a flat-rate benefit of 400 PLN. **From 2013**, parental leave and parental benefits are granted also to unemployed, self-employed, self-employed in agriculture and students. In addition, one month of the parental leave must be taken by the other parent (in the case of 36 months, 35 can be taken by the mother but 1 month has to be taken by the father or the leave will be shorter. The situation can be reversed – the father takes 35 months but the mother has to take one month – this hold only for the full duration of the leave).

In short – the lengths of the parental leave did not change over past 20 years however the eligibility for parental leave has changed – with time only families with lower and lower income could be granted the parental benefit and the amount of the parental benefit decreased from initial 100% of the monthly wages to 400 PLN (about 1/3 of the minimum pay)

Additional child-care leave related regulations:

- 1974 – two days of child-care related paid leave were granted to each female worker and to male workers who were single fathers. In 1996 both fathers and mothers could apply for the 2 days of paid leave (so the family had now 4 days – 2 for the mother and 2 for the father).
- 1974 – child-care leave and childcare allowance were introduced. A parent could use an unpaid “care leave” (**not** parental leave) if
 - 1) a child was under 8 and the childcare facility was unexpectedly closed or
 - 2) a child was under 8 and the family member who usually took care of the child cannot care of the child due to sickness or childbirth or
 - 3) a child was under 14 and sick.

During first 60 days of the care leave the parent was paid a child-care allowance equal to 100% of his/her monthly salary. If both parents were employed only mother was entitled for the leave - The father was permitted to take the leave only if the mother was not able to care for the child because of sickness. In 1995th allowance was decreased to be equal 80% of the monthly salary of the parent who was taking the leave.

Self-employed in agriculture: were not granted maternity leave nor maternity leave benefit until 1982. From 1982 mothers self-employed in agriculture or wives of men self-employed in agriculture were granted a maternity benefit paid for 16 weeks if one child was born and for 24 weeks in case of a multiple birth. Initially, the amount of the benefit was equal to twice the amount of basic old-age pension for self-employed in agriculture. In 1990 the duration of the payment was shortened to 8 weeks and the amount of the benefit was equal to the sick leave benefit for self-employed in agriculture. Then from 2003 the amount was equal to three and a half of basic old-age pension for self-employed increased to four and a half of basic old-age pension for self-employed in 2009.

Summary: Maternity leave and parental leave regulations remained stable in time with more egalitarian aspects introduced in 1990’s and 2000’s. However, the amount of support for mothers on parental leave was and is

marginal – at the beginning of the 80’s it was equal to 2670 PLN then increased to even 6244 in 1987 and after inflation, the average annual amount was much smaller – see table:

Table 5 Average monthly amount of parental leave benefit (zasilek wychowawczy) in PLN.

1995	1996	1997	1998	1999	2000	2001	2002	2003	2004
140,95	182,95	233,81	246,61	260,08	-	314,96	377,53	377,53	400

Source: Prepared by the authors on the base of communicates published by the Social Insurance Office.

C. INSTITUTIONS OF CHILD CARE

Pre-schools and nurseries:

1932: Introduction of preschools. Preschools were organized for children aged 3 until they started school.

1961: Including preschools under the supervision of Ministry of Education

1970: Under this resolution, parents were required to pay for childcare services in public preschools if the schools were open for nine hours a day but the family’s monthly per capita income was taken into consideration. If it was below a certain level (600 PLN), the amount the family paid could not exceed 10% of their per capita income; if, however, the family had an income above this amount, the cost was fixed at a certain monthly amount (60 PLN), and 30% of the amount over 600 PLN per capita was added.

1979: New form of childcare for children aged 3-5:

Private individuals were allowed to operate a “preschool location” (*punkt przedszkolny*) in their homes for a maximum of 10 children, ages three to five years.

The conditions for opening a preschool of this kind were that the individual must (1) have reached maturity, (2) have Polish citizenship, and (3) have attained at least a secondary level of education. The play area for children could not be smaller than 2m²/child, and each child had to be provided with a bed and a place to eat. Before the preschool location could be opened, official permission must have been granted by a local administration unit. Parents then signed a contract with a caregiver stating the number of hours of care that would be provided and the amount of payment. The caregiver was obliged to protect him/herself by purchasing liability insurance. The childcare provider had to cover all of the expenses related to the childcare using the money paid by the parents. No government subsidies were provided.

1991: Introduction of subsidy for preschools

1. Both public and non-public preschools (different from “preschool locations,” which were established under the Act of 1979) were given governmental subsidies for their educational and didactic activities from the municipality.
2. The size of subsidies for public preschools was defined in a separate regulation of September 18, 1992 (No. 12, Item 86).
3. Private preschools were awarded subsidies equal to 50% of the “current expenses” of a single child enrolled in a public preschool (these expenses included the cost of goods and services, maintenance, operations, and of realizing the preschool’s objectives).
4. Both private and public preschools were freed from paying taxes.
5. The regulation also defined the conditions that had to be met before a new private preschool would be approved by the Curator of Education. The preschool had to be registered at the local Department of Education, together with a description of the school’s main objectives, the professional experience of its employees, its location, its conditions, its statute, and its commitment to achieving educational program.

Although preschool attendance was not compulsory through age five, **six-year-olds were required to attend a preparatory year in preschool, called “grade zero”.**

1999: The regulation clarified the rules for the enrollment of children in public preschools. Priority was given to six-year-olds, foster children, and children whose parents were disabled or **single**.

2003: The government subsidy for non-public preschools was increased from 50% to 75% of the “current expenses” incurred by a child enrolled in a public preschool. As before, it was paid by the municipality. A higher amount was provided for disabled children.

Under special circumstances, children aged 2,5 could attend preschools.

Children aged 6 were obligated to undergo a year of preschool preparation (before it was a right not an obligation)

2008: New forms of preschool education for children ages 3-5 were established:

- (a) “Preschool groups”, with groups of between three and 25 children, open only on selected days of the week.
- (b) “Preschool locations” , with groups of between three and 25 children, providing childcare during the school year, with holiday breaks defined by the manager.
 1. Both facilities types were created by municipalities, and were operated by private individuals under the supervision of the Curator of Education. Operational details, such as the facility’s daily opening hours and enrollment policies, were determined by each preschool manager. School preparation classes could not be shorter than three hours a day and 12 hours a week, had to be provided by qualified teachers, and, if requested, allow parents to attend together with their children.
 2. Under an earlier Act of September 7, 2007 (No.181, Item 1292), these other forms of preschools were supported by a government subsidy covering at least 50% of the amount of the “current expenses” incurred by a child in a public preschool operated by a municipality (see link below).

2009: Preschool was compulsory for children aged 5.

2012: Children aged 6 could be admitted to schools on parent’s request starting from the school year 2012/2013.

2013: From the school year 2014/2015 all children born before 30.06.2008 must enroll to school. Children born after 30.06.2008 can enter school on parent’s request. From the school year 2015/2016 all children born after 30.06.2008 and before 30.12.2007 must enroll to school. Hence from 2015, school becomes obligatory for 6 year-olds.

Nurseries:

1927: Introduction of nurseries for female workers:

If more than 100 women were employed at a workplace over the previous one-month period, the employer was obliged to provide a nursery near the workplace to enable female workers to breastfeed during regular breaks. The facility was to be maintained and financed by the employer, and had to meet certain medical/hygienic standards (such as employing only professional nurses). The nursery had to provide care for all breastfed children less than 15 months old during the hours their mothers spent at work

1950: Including nurseries under the supervision of Ministry of Health

1979: New form of childcare for small children (till 3 years):

Private individuals were allowed to operate a “nursery location” (in their homes for 2-4 children, aged four months to three years. Before the nursery could open, official permission must have been granted by a local administration unit (there were some specific requirements for the location and the caregiver). Parents signed contracts with the caregiver stating the number of hours of care that would be provided and the amount of payment.

1991:Changes in the law considering nurseries (as a result of political system transformation)

1. Nurseries were classified as Public Healthcare Units instead of as Social Healthcare Units, as under the Act of 1950; and were regulated by the legislation for healthcare institutions.
2. All fees related to the provision of healthcare were waived for the children of insured parents, but parents had to cover additional costs not related to healthcare services, such as building maintenance or food service. The amounts charged varied based on the accounting methods of individual nurseries.
3. Public nurseries were established and supervised by the local government unit.

4. Each nursery had to draw up its own set of statutes, which encompassed the facility's objectives and procedures, its organizational structure, and its rules. The implementation of these statutes was controlled by representatives of the government units.
5. Nurseries could apply for additional subsidies from local governmental units for specific expenses related to, for example, renovations, training, new equipment, or new furnishings.

The nursery could be also run privately, as a Non-Public Healthcare Unit. Despite their private status, these nurseries had to be registered with the local government unit, and were subject to the same regulations and procedures as the Public Healthcare Units. They were also allowed to apply for subsidies from the local government.

2011: New forms of childcare for children under age three were established. All of these forms had to perform caring and educational functions, and were offered children under age three (or four, if other forms of childcare could not be provided).

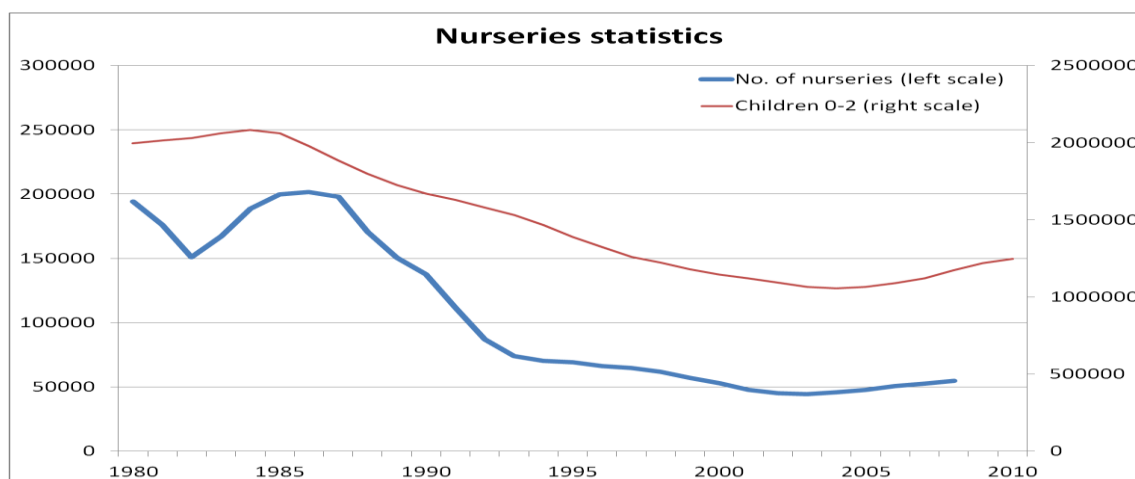
1. Nurseries could be established by private individuals or municipalities, for children between the ages of 20 weeks and three (or four) years. Children received both care and educational guidance. Under a statute that applied specifically to nurseries, these facilities were permitted to operate up to 10 hours a day (with individual time schedules for each child). Nurseries are paid but they provide meals for children
2. Children's clubs were to be subject to the same regulations as a nursery, except that they were (1) only open for five hours a day, (2) and they were only required to have at least one room.
3. Daycare providers were defined as private individuals employed by local governments. They were required to have liability insurance. Most of the regulations for nurseries also applied, except for (1) the number of children, which could not exceed five (including two of the care provider's own children), or three (including one of the provider's own children) if the children were under one year old or disabled; (2) the requirement that the care provider had attended a 160-hour training course, or had medical or pedagogical education and a minimum of six months experience in childcare, combined with attendance at a 40-hour training course; and that (3) the location of the care facility was her/his own apartment or a space rented by the municipality. Meals for children should be paid for additionally.
4. Nannies were defined as individuals employed by parents on a freelance basis (with a contract defining their main responsibilities, number of hours, fees, etc.). Nannies were covered by a Social Insurance and Pension Plan provided by the National Insurance Board.

All of the fees related to food services and other facilities, as well as subsidies from municipalities, were to be set in separate acts at a later date.

Summary: Before political transition of 1989 there were much more preschools and nurseries, including institutions managed by companies for their workers. After 1989 we can observe a decrease in places available in preschools and nurseries up to a point where childcare for children under the age of 2 is almost non-existent. In 2012, only 4% of children aged 0-2 are in formal childcare institutions. The situation is better in regards to preschools – the number of children enrolled is steadily increasing since 2005 (however most changes take place in rural regions) and in 2012 60 to 70% of children aged 3-5 were in preschools depending on the region. A concerning fact is that the cost of childcare increased over time – on average by 22% between 2005 and 2012 (computations done by the Institute of Structural Research for the President's Office).

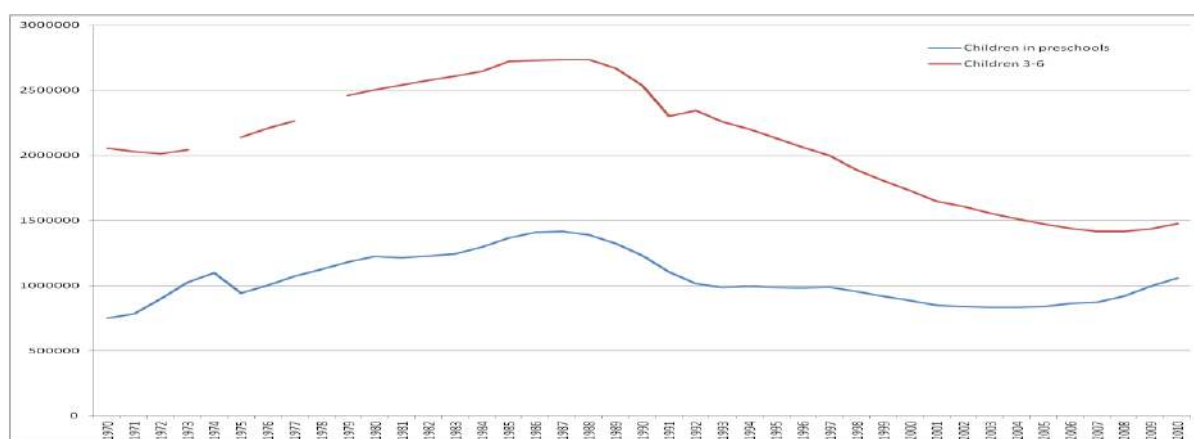
Child care institutions statistics:

Figure 7 Nurseries and children aged 0-2



Source: National Statistical Office.

Figure 8 Children enrolled in preschools and children aged 3-6.



Source: National Statistical Office.

Children of school age:

From 7 to 12 children attend primary school, then from 13 to 15 they attend secondary school called “gimnazjum”. From the age of 16 they can

- either enter general high school (16-19, finished with a baccalaureate exams)
- or vocational secondary schools (vocational training but one can finish with baccalaureate exams)
- or vocational school (16-19, does not finish with baccalaureate exams)

Children must remain in education until the age of 18, further education is voluntary. Tertiary education begins at the age of 19.

Since 2013 children aged 6 might enter primary education if their parents want to. Children turning 6 in the first 6 months of 2014 have to enter primary school in September 2014 but children born from July to December are offered choice (parents are offered a choice whether to send their children to schools in September 2014 or 2015) – please see the preschool section.

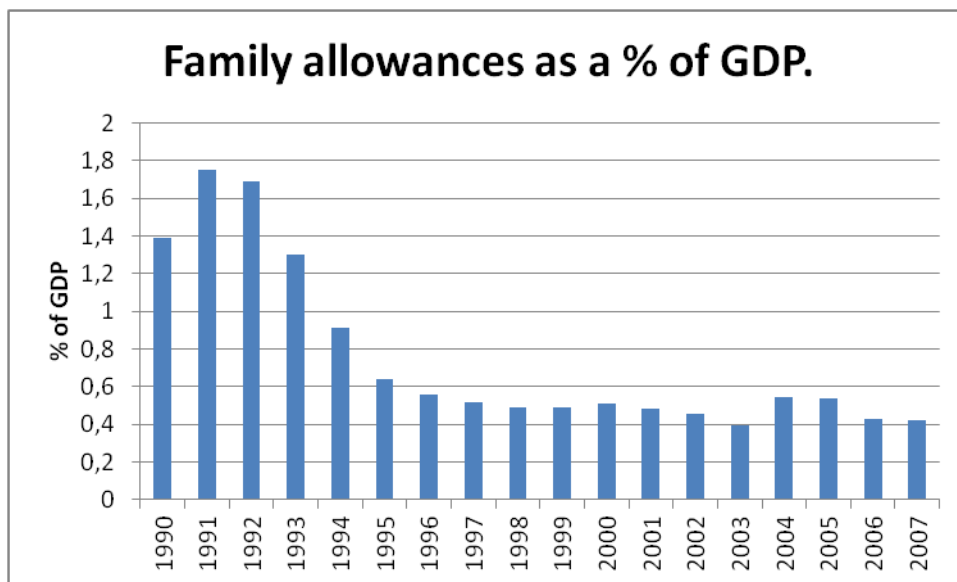
Some schools have a common room (światlica) where children can stay after classes and do homework or play supervised by a teacher. It is a means of providing additional care for children so that parents can pick them up later. Unfortunately, not all schools offer this service – in the school year 2006/2007 only 22% of children in regions and 27% of children in rural regions were using common rooms. However, schools have recently intensified their efforts to organize common rooms - in 2013/2014, already 34% of pupils in urban regions and

36% in rural regions were using common rooms (computations done by the Institute of Structural Research for the President's Office).

D. STATE EXPENDITURERS

State expenditures for these measures. If possible these should be presented within the framework of total state expenditures as well as total welfare expenditures. Provide the amounts in the national currency and in US\$ or in €. Indicate whether the data are comparable in time.

Table 6 Family allowances as a % of GDP.



Source: OECD social expenditure database, March 2011.

Table 7 Social expenditures on family as a % of GDP.

Public expenditures on families					
1990	1995	2000	2005	2006	2007
1,683	1,059	1,435	1,384	1,35	1,297

Source: OECD social expenditure database, March 2011.

Table 8 Family allowances expenditures in PLN from the statistics of Ministry of Labour and Social Policy (May 2014).

	Family allowances (in thousands PLN)	Supplements to family allowances (in thousands PLN)	Baby bonus (in thousands PLN)	Total spending of family benefits (in thousands PLN)
2012	2 651 452	1 662 049	373 125	9 361 958
2011	2 842 896	1 876 392	397 890	7 951 727
2010	3 090 915	2 056 581	412 828	7 938 192
2009	3 314 949	4 665 066	413 942	8 260 992
2008	2 746 200	2 419 500	412 440	7 405 322
2007	3 111 620	2 655 849	380 137	7 915 671

2006	2.806.682	2 626 858	387 414	7 724 000
2005	2 852 579	3 228 984	Didn't exist	8 066 319
2004	2 009 164	2 531 692	Didn't exist	8 075 200
<small>Before 2004 family expenditures were a part of different social policy tools and a total amount of family benefit spending cannot be traced in such detail – information for 2004-2012 are available thanks to the restructurisation of the public policy in 2003 (see policy overview). These data should not be compared with data from OECD as these relate only to the family allowances and other cash transfers to families (it does not include tax exemption, maternity leave costs etc.)</small>				

Source: Statistics published by the Ministry of Labour and Social Policy.

Summary:

After the political and economic transformation of 1989 many of the regulations concerning families were inherited from the socialist regime however further amendments were influenced mostly by the new ideology and less by the actual demographic changes. The philosophy of constructing a new family policy was initially, at the beginning of the 90's, based on the "*parent's rights to raise and educate their children*" which in practice meant making families responsible for their well-being and limiting the responsibilities of official institutions. Furthermore, responsibilities related to social and family policy were delegated to local (regional) governments which did not have sufficient resources to continue funding existent regulations. As a result, financial support for families was decreased, funding for childcare institutions was limited which led to closing preschools and nurseries or increasing payments for childcare. In addition, as a result of economic hardship, market instability and ongoing privatization processes, the role of work institutions was largely limited. Before 1989, plants (*zakłady pracy*) owned preschools, nursing institutions as well as recreational institutions or sport facilities – majority of those was privatized or commercialized. As a consequence, parents could no longer afford such services.

To sum up, the ideology behind family policy regulations shortly after 1989 included:

- delegating responsibility for family's economic well-being to parents
- decentralization of social policy (delegating responsibilities to local governments)
- commercialization of social services

Difficult economic situation in the country, together with raising unemployment, hyperinflation and the crisis of public finances led to the decline of well-being and the quality of life of many families. The family policy system did not respond to family needs and new risks. A first shift in the family policies can be observed after 1994, when the government – concerned with deteriorating situation of families and spreading poverty – begun working on a new family policy program, which was supposed to protect the poorer families. However, new propositions for family policy were strongly rooted in the ideological premises of the political party in power – when a rightwing party was in power, government tended not to intervene in families' lives claiming it is a private sphere very much dependent on individual preferences and choices. When a leftwing party took over the parliament, more focus was on helping the families in performing their basic functions.

The family policy program was announced in 1997 by the leftwing government which loose its political power in 1997. Its focus was on improving living conditions of families. The new government, constituted by a rightwing party, declared its family policy program in 1999. Under this program longer maternity leave was implemented and more financial support was offered to families with three and more children.

In the end, the rationale of family policy between 1995 and 2003 was:

- ensuring family's economic independence on one hand and autonomy in childbearing and childrearing,
- declaring social solidarity and preventing poverty,
- but also: ensuring equal access to family policy measures for males and females.

This situation continued until 2001. Between 2001 and 2002, I Demographic Congress of Poland was organized to discuss demographic changes in Poland at the doorstep of XXI century. The talks resulted in proclaiming a declaration in which the members of the Congress turned to political powers, public and civil institutions as well as to the Catholic Church and other religious organizations asking to actively counteract negative demographic changes. In consequence, the government announced a new scheme of family policy regulations in 2003 (which – surprisingly only limited the access to support for the families, please see the family allowance section). After 2003, new amendments to family policy system aimed at helping families in the work-childcare conflict: increased funding for preschools, new forms of care services for children less than two years old and changes in

the labour code offering parents longer work leaves and introducing paternity leave. The changes after 2003 can be characterized as a **marginal** step towards a more generous financial support and towards helping dual-earner families and promoting more equal distribution of childcare responsibilities among partners. The biggest changes of recent years took place only at the beginning of 2013, when employed parents were together granted 54 weeks of family leave. Hence, we will have to wait some time to see how this change impact families.

A2.12.4. Fertility trends

A2.10.5. Summary and conclusions

Studies on determinants of Poles' fertility behaviours make it possible to indicate main obstacles in achieving their fertility intentions (Kotowska (ed.), 2014, Matysiak (ed.) 2014, Family-friendly climate, 2013):

- difficulties to reconcile work and family duties, especially by parents of children until 12 years. They result from: shortages in early childhood education and care (ECEC) services (for children aged 0-5 lat), high costs of these services, their quality and organisation (non-adjusted to parents demands), organisation of teaching and non-teaching activities in primary schools (for children aged 6-12), non-flexible work patterns, especially in terms of time schedules and leaves.
 - increasing direct costs of children, affected by both quality shifts in parents' aspiration as well as rising costs of education
 - instability in income and its levels determined by unemployment threats and difficulties faced by the youth to get a job on one side and low financial transfers to families
 - difficulties to get independent housing
 - gender gap in sharing household duties between men and women
 - insufficient knowledge about reproductive health and its determinants and an insufficient support for couples facing troubles to become parents by the public health care system.
- Altogether, parents are confronted with high direct and indirect costs of children while the state contribution is assessed as low and instable.

Measures implemented recently by the government and presented already in this report seem to address directly some of these obstacles. For instance, more financial support for ECEC services improved visibly accessibility of services. However, the gap between demand for and supply of services (especially for children aged 3-5) is still large. The new leave regulation (maternity and family leave of 52 week together) responds to both institutional care shortages and difficulties to get flexible work arrangements by mothers of small children. Moreover, still a remarkable number of parents prefer mothers' care after children up to one year.

Similarly, a new measure of housing for the youth does not solve a problem of housing availability for young families. Experts in field argue strongly that instead of supporting ownership of houses the progress in the rented houses should be stimulated.

Financial support for families strongly depends on income levels and the number of children.

However, the family benefits compensate to some extent costs of children for some types of low- income families only. In 2011 the benefits constitute 7-9% of monthly average disposable income for families with three children and lone parents and 20% for families with four and more children. In addition, due to freezing the income limit between 2004 and 2012 less and less families were entitled to financial support. As a result, the monthly average disposable income declines with the growing number of children. In 2011, as compared to families with one child the monthly average disposable income per capita in families with two children was lower by 23% while in families with three children by 45% (Family-friendly climate, 2013).

Moreover, it has been demonstrated that the tax relief due to rearing children does not address adequately families with more children and low-income families. In 2011, the share of families with one child making use of the tax exemption was 76%, 68% for families with two children and 31% for families with three and more children (Family-friendly climate, 2013). Therefore, the system of financial transfers towards families needs revision, especially as regards to the tax release.

What is more, there are some activities by the Ministry of Labour and Social Policy and the Government Plenipotentiary for Equal Treatment to promote flexible work arrangements for men and women, more use of gender neutral policy measures (leaves) and the dual earner – dual carer family model. In general, they aim to increase knowledge about existing regulations and their use by mothers and fathers and eventually to revise some of them.

Summing up, there are some policy changes by the government aimed at supporting families in their responsibilities for children. However, the coherent family policy program with a clear distinction of priorities is still lacking. These changes are mostly reactive instead of being implemented to meet aims of the policy program, which accounts for demographic, structural and cultural determinants of parenthood in Poland.

A2.13. RUSSIA

A2.13.1. Societal conditions affecting fertility

A2.13.2. Family policy strategy

A2.13.3. Specific family policy measures

A2.13.4. Fertility trends

A2.13.5. Summary and conclusions

A2.14. SERBIA

A2.14.1. Societal conditions affecting fertility

After the so-called de-blockage of post-socialistic economic re-structuring in 2000, there was a period of continuous economic growth up to 2008 – albeit with high unemployment throughout the period. After 2008, the Serbian economy has been in permanent recession, with rising inflation, high unemployment and underemployment and low wages in state enterprises. There is no strategic planning of economic growth; state expenditure is constantly greater than production, and the external debts are on constant increase, especially after 2008 (Radonjic, Kokotovic, 2012).

Based on *Survey on Labour Force* (RZS, April, 2012), the Serbian crude unemployment rate is 25.5%. The most recent data from Statistical Office of the Republic of Serbia using *The Survey on Income and Living Conditions* (SILC), (RZS, 2013) demonstrate that the rate of overall poverty of Serbian population is 24.6% - the highest in Europe – with even greater risk of poverty among families with children (27.2%). The greatest impoverishment risk can be found among persons living in households consisting of two adults and supporting three or more children (44.4%), followed by single parents with one or more children to be supported (36.2%). The rate of overall material deprivation is as high as 44.3%. As many as 67.2% of all households cannot provide for a week long holiday out of a place of residence; one out of three is not able to afford meals consisting of meat or fish on a daily basis. One out of five households cannot pay for heating (18.3%).

Despite this economic malaise, it can be assessed that at the moment a high degree of political stability is visible in Serbia. In the March 2014 elections, the *SNS (Serbian Progressive Party)* won almost 50% of Parliamentary votes and thus gained full authority to rule even solely. Therefore the leading party can take a turn to create a solid majority in Parliament as well as to establish a firm Government. It might be said that the political stability is almost as great as in the era of Milosevic and 1990s. However, the greatest challenges to be faced with by *SNS* this year as well as in years to come stem from the socio-economic sphere, because of the great de-development, uncompleted post-socialistic transformation and privatization, tight labour market, lack of jobs, all of which have been intertwined with low economic activity, low wages and high impoverishment, very poor living standards, great social inequalities, depopulation, ageing and high emigration of the youth.

There are great changes under way concerning gender roles, everyday performance, and above all, values on femininity and masculinity, marriage and sexuality, motherhood and parenthood, etc. While transformation in terms of less of patriarchy, especially concerning attitudes toward private sphere is occurring on the other hand, public discourses and practices are however still laden with male predominance, particularly when it comes to (un)unemployment, because young women are massively hindered in their access to the labour market and more often dismissed when companies are at low performance. Women are highly represented in politics and education at higher levels. Recent qualitative and gender barometer surveys suggest a strong pace of moving toward egalitarian practices of marital partners in care work and in household tasks, especially related to the younger, urban and more highly educated strata. It should also be stressed that women's organizations have had a long tradition in the country long before 1990s and they were highly active in pursuit of legal changes. The *National Strategy on Gender Equality* was adopted in 2008, and the *Law on Gender Equality* (2009), *European Charter on Gender Equality* (2009) have also been enacted at the national and local level. Based on the *Strategy*, a gender *Action Plan* (2010-2015), has been launched.

Despite these practices, a highly pernicious practice is currently widely seen in the labour market. Private companies and their managers, very often, require signing of obligation that females won't be entering marriage and/or giving births. This illegal, though unsanctioned behaviour, poses a great obstacle for both employment and family formation because, in Serbia, the two wage family model is deemed necessary for the wellbeing of the family.

Based on a recent comprehensive study in Serbia (Tomanovic et al, 2012) and official statistics, the social position of young people is obviously very poor. Young people are assessed as one of the highly vulnerable social groups. Their transitions into adulthood are standardized and protracted, occurring late in life, namely in their 30s, (31-35) in terms of their separation from family of procreation (completion of education, entering into labour market, family formation, housing separation). No effective policies are put into force either for alleviating their actual life conditions or for their faster social transitions. Their access to employment is very scarce, with a rate of unemployment for those 24-35 is as high as 33.2% in 2012, with inactivity rates of 19.9%. Even among those employed, as few as 50% have stable positions and regular wages to support their families. The access to housing is also highly restricted. Under these circumstances only 4.8% of young married couples utilized credit lines under favourable conditions for purchasing apartments up to 2012. State support for this has now been abandoned.

Young families reside with parents even when they get married and expect a child to come. As such, as many as one out of three family households even in urban settings contain more than one family, i.e. extended and complex family households (Milic et al, 2004, 2010).

Today young people massively rely on parents' and relatives' resources (economic, social capital, housing) in resolving all the major life course tasks and challenges (entering into education system, finding a job and buying a flat, accessing the health system, etc), the practice which is, however, part of the Mediterranean culture and sub-protective welfare regime inherited from previous state socialism. This welfare regime has however come under huge reform and shrinkage ever since 1990s.

A2.14.2. Family policy strategy

Demographers have warned on the consequences of the phenomenon of insufficient childbirths in Serbia for many decades and interceded with the government for the establishment of a strategic approach in the sphere of a population policy toward fertility. For the first time, the Serbian Government adopted such a document under the title *The Pronatalist Strategy* (2002). This was the first step in the response of the government to exceptionally low fertility. The goals of the strategy included: 1) alleviation of economic costs of childrearing, 2) reconciliation of working life and parenting, 3) reduction in the psychological costs of parenting, 4) promotion of reproductive health of adolescents, 5) fight against infertility, 6) towards healthy motherhood, 7) population education, and 8) activation of local self-governments. However, the full implementation of the Strategy was postponed due to the economic crisis.

The Council for Population Policy was established in 2010; however the council has never begun to function.

A2.14.3 Specific family policy measures

Since 2002 Serbia's political response regarding fertility is based on the *Pronatalist Strategy* (see above) and a number of laws. The relevant legislation for family policy in Serbia include the *Law on Financial Support for Families with Children*, *Labour Law*, *Law on Health Care*, *Law on Health Insurance* and *Law on Abortion*.

Parental allowances

Parental leave was introduced in 1946 (84 days), and was continuously raised, (90 days in 1949, 105 days in 1957, 133 days in 1965, 180 days in 1974, 210 days in 1977, 270 days in 1984). From 1992 to 2002 it was 12 months for the 1st and 2nd child, 24 months for the 3rd, and 9 months for the 4th and higher birth order. From 1987 to 2002 parental leave was granted for the father under specific circumstances. Parental leave for unemployed and students was introduced in 1974 and was carrying out to 2002, though from 1992 has been termed maternal allowance, and was 30% of the national average wage.

From 2002, however, full compensation of salary is to the working mother/father during parental leave for a period of one year for the first and second child, and two years for the third and every following child. In addition to this, a parental allowance is paid for the first, second, third and fourth child of the mother. The

amount, paid in 24 monthly instalments (with the exception of the first child), is adjusted with the increase of living expenses and rises with birth order.⁶⁶

Childcare

Pre-school child care financing was introduced in 1945 and was carried out to 2002. From 1992 it was under local administration jurisdiction, and municipalities participated with 80% of full cost, and also from 1974 to 1990, and from 1992 to 2002 pre-school child care for the third child was free (in municipalities with negative natural increase for third and higher birth orders).

Reproductive health and family planning

Abortion is available on request up to ten weeks' gestation, and beyond ten weeks with the approval of a medical commission, for women aged 16 or over, but women are obliged to pay the full price of the procedure and possible complications. Contraceptive counselling is free of charge once per year in state services for health care of women and pregnancy care is free of charge four times per year for normal pregnancies (Rasevic, 2012).

A2.14.4. Fertility trends

A2.14.5. Summary and conclusions

A2.15. SLOVAKIA

A major problem of the system of measures aiding parents is instability, too frequent and plentiful changes that often went back-and-forth, especially in many changes in Parental Leave as well as a plethora of differences allowances and benefits make the system too complicated and difficult. Low levels of stability mean low trust and impossible planning for the future. After many reforms that were stopped after first steps, of never launched, potential parents do not take any announced changes seriously. A system reform and unification of some measures is necessary as well as stability of the system without changes after each change of the power between the social democrats and the Christian democrats. The system also needs a clear direction and more emphasis on work-childcare harmonization. The current system is forcing the parents, and in particular women, to choose between work and childcare (and a long withdrawal from the labour market that is damaging to the women and their families). A reform of the regulation of childcare facilities, introduction of more variety of childcare would greatly benefit parents.

A2.15.1. Societal conditions affecting fertility

A2.15.2. Family policy strategy

A2.15.3. Specific family policy measures

Maternity leave.

Parental leave splits into two different schemes in Slovakia, maternity leave (tested allowance, conditional on social insurance payments and entitled to the mother of the child) and parental leave (flat allowance, paid to mothers who did not pay social insurance such as students; either parent is eligible), a distinction carries out since the 1970s. An attempt to unify both into a single parental leave had been suggested several times during the past 10 years but the reform has never been fully adopted. The last attempt from 2010 has been put on halt by the current government in 2012, with just first revisions implemented and the complete plan to systematically

⁶⁶ In addition to these general payments, an special child allowance is payable to families in need of social protection. Furthermore, there is reimbursement for the cost of stay in preschool establishments in the case of children lacking in parental care, reimbursement for the cost of stay in pre-school establishments for handicapped children, subsidy for the stay of children of underprivileged families in pre-school establishments.

change and unify some of plentiful allowances and benefits parents are entitled to has been abandoned with no alternative suggested by the new government. The original plan at the start of the first modification to maternity leave scheme, that was implemented in 2010, was to prolong maternity leave from 28 to 52 weeks by increasing the duration sequentially over a scope of several years and at the same time increasing the maternity leave allowance from 50% to 75% of mother's taxable income (in 5% steps, so that the allowance would be equal to mother's net income prior to maternity leave).

Effective since 2011, maternity leave was prolonged from 28 to 34 weeks (37 weeks were kept for single mothers and 43 weeks for mothers of at least triplets) and the maternity allowance has been increased from up to 50% to 60% of woman's taxable income. Another prolongation of maternity leave to 40 weeks since 2012 has not taken place due to change in the government after preliminary elections. However, at least the maternity allowance has been increased up to 65% of taxable income. No change in the ceiling to maternity allowance has taken place since 2012 and the reform has halted under new minister of family affairs.

The duration of the maternity leave is among the longest in Europe at the current 34 weeks. It's unclear why the reform did not aim to unify the duration for married and unmarried women (officially, only single mothers, i.e. unpartnered mothers are eligible for the prolonged 37 weeks leave, however, in practice the social offices do not check the actual situation of the woman and typically all un-married women would have a chance to apply for the longer duration). It has been speculated that this distinction may support the increase in non-marital childbearing because of the financial benefit of such behavior, i.e. later switch from means-tested maternity leave to the flat and low parental allowance.

The amount of state expenditures on the maternity leave benefit has increased, in relative terms as % of all welfare expenditures (welfare expenditures exclude pensions paid to the retired persons, and include all parental, child and social allowance and benefits, see the excel table) increased from about 4.5% in 1995-999 to about 6.6% in 2010 (the increase mostly due to the recuperation in the number of births after 2002 and in particular after 2005) and jumped up to 8.8% in 2011 and 10.3% in 2012 due to the reforms. In absolute terms, the amount of maternity benefit payments went up from about 30mil euros in 1995 to 76.7 mil euros in 2010 and up to 128.9mil euros in 2012.

Parental leave and parental allowance.

(For a comprehensive overview of fertility trends in Slovakia see⁶⁷). After 2004 there were changes about every other year. These back-and-forth changes were linked to the changes in government – the democratic parties intended to propose/start changes and social democrats tended to bring everything to the state before. The main issue was whether also the working parents should be eligible for the parental allowance. Around 2005 the working parents were eligible for the PA and could use it to pay for the childcare. Also the idea of three-tire parental leave was introduced at about this time – so the parents would be allowed to decide how long they want to stay home fulltime with the child – the whole 3 years or shorter while the total amount paid for the PA would be equal for all durations; the intention was to copycat the Czech reform. But in 2006 the social democrats came to power and the new minister changed all reforms and stopped any proposals – she abolished working parents eligibility for the parental leave, introduced caps on hours parents taking fulltime care of the kids can work (even part-time) and capped the maximum monthly income at low level. Afterwards, in 2010-2012 the democratic government again made some changes, introduced some measures to make combination of work and childcare more reasonable, but since 2012 the social democratic government froze all planned changes again.

Basically, during 2000-2014 the main battleground is ideology of the childcare for kids within 3 years of age. The social democratic ministers take a rather conservative stand and argue that the allowance should be eligible ONLY for those parents who do not work at all, because they are paid to stay home to care for the child fulltime and the state pays their social and health insurance. To compensate for the parental allowance the working parents lost, the ministry introduced in 2009 a new child-care allowance of up to about 200 euro to compensate part of the expenses on childcare [they argued that working parents, should not use the parental allowance to pay

⁶⁷ <http://www.demographic-research.org/volumes/vol19/25/>

for the childcare – nannies, crèche]. The problem is that even the parents working part-time lost the PA because of working more than the allowed maximum. This does not help to harmonise childcare and work, discourages the parents to stay in touch with their former employers and basically leads to the employers being wary of the potential parents.

Another line of the back-and-forth changes concerned a discussion how much should the parents who worked prior to taking parental/maternity leave get and how much those who did not contribute to the social system. So there were periods when those who were not socially insured before or were students were getting only about 140 euro parental allowance and those who were contributing were getting about 260 euros.

In 2014 there is only one amount of PA for all amounting to 204 euros a month. Typical duration of parental leave is up to 3 years of age of the child. The parent can decide to go back to work earlier but then s/he loses the PA /and can get the childcare allowance, if eligible/. In effect this policy discourages women, who typically uptake the parental leave, from gradually returning to the labour market and encourages them to stay out of the labour market for three years (or more in case they have several kids one after another). Social surveys show high preference for 3 year parental leave and a strong norm of childcare provided by the mother until the child's 3rd birthday.

Childcare allowance

Introduced in 2009, as a compensation for the working parents who were not eligible for the parental allowance anymore due to changes in PA and PL regulations. The idea was that the childcare allowance belongs to the parent or a person taking care of the child (this resulted in the need to officially hire the grandparent if he was taking care of the child, register her/him and prove that he's taking care and gets paid for the childcare). The allowance should partly compensate for the expenses of childcare for kids up to 3 years of age. The parent must prove the actual amount of the expenses and these are fully or partly compensated if the amount exceeds the max of the allowance. This was 230 euro max for a child in crèche/kindergarten in 2013/2014 and max 41 euro if other person was taking care – for example the grandparent or a nanny.

The problems within the Slovak context are: a/ a lack of childcare facilities for kids within 3 years; b/ that parents cannot use the allowance to compensate expenses for the municipal kindergartens/crèche that are partly subsidized, and can use it only if the child is private childcare facility; c/ great regional disparities.

Especially in bigger cities, and particularly in Bratislava, a lack of crèches [most were closed down in the early 1990 when 3-year parental leave was introduced] resulted in a situation that almost all are private and the expenses are around 700-800 euro in Bratislava [average brutto salary exceeded 800 euro only in 800 (at national level); average salaries of women are lower]. The effect is that especially to women, who usually uptake the parental leave, the allowance does compensate only a small share of the expenses for the childcare and they often have to spend the rest of their net salary on childcare. This results in a situation that even the mothers who were considering returning to work earlier stay at home for the whole 3 years because it does not pay off. A qualitative research done by Magda Petrjanosova found, on top of this, that women do not take into account the drawbacks on their future employment when deciding to uptake the full 3 year leave, also because of the very strong norm to stay at home with the kid for 3 years and not to be under pressure from other women and family members and avoid a tag of the bad mother. The women are not usually not aware of the drawbacks and start thinking about the problems related to the return to the labour market only towards the end of the 3 year period. At the same time, other studies found that employers do (and also admit to discriminating towards the mother of small children and also potential to be mothers because of the expected 3 year break, frequent sick-leaves due to kids. Unemployment of the mothers after parental leave is high.

Another stone in the mosaic is the that although the legislation allows to put children aged at least 2.5 years into regular kindergarten under certain conditions [which are not as scarce as crèche], in practice parents seldom get their children accepted, usually because the kindergartens are too full. Also due it's in practice impossible to put a child in for part-time and not full week (fulltime kids have priority in being accepted).

A lack of childcare for kids within 3 years of age was one of the criticisms of the previous attempts to reform parental leave according to the Czech model. Unlike in the Czech republic, there was no system change of the laws and regulation.

Childbirth benefit

A one-off benefit the parents can apply for after birth of the child. Introduced as additional payment to the childbirth benefit in 2009 for the first, second and third biological children (who lived longer than 28 days after childbirth). Later on the childbirth benefit (lower amount) and the additional payment (that was introduced in 2009 for the first child only and later on extended to 2 and 3rd) were unified into a single measure.

The purpose is to compensate parents the costs induced by the new child. The benefit is conditioned on the proof that woman went through all required pregnancy tests and check-ups (either in Slovakia, or abroad) and that the child survived 28 days. It's not paid automatically, but the parents must register and ask for it. The conditions were set this way due the emerging outrage (even in the media) that it would be another benefit paid to not integrated Roma and would encourage them to have many children and live only on social welfare (this element is present in any discussion on social welfare and in my opinion it's one of the reasons that the ministers are wary of touching the existing schemes and increasing the parental allowance; it's also interesting where the threshold for the number of eligible biological children is set.

The amount was initially about 670 euro for the first child and low for the second and third child (none prior to 2009). Since 2014 the amounts were set to 829,86 euro for the first child and 151.4 euro for the second and third child. [and 75.69 euro in case of multiple birth]

Child benefit

Monthly payment of currently 23.5 euro paid for each dependent child (till age 18 or when studying until 25 years); occasionally discussion on whether to keep this general benefit or to start means-testing it arise but always die out.

A2.15.4. Fertility trends

A2.15.5. Summary and conclusions

A2.16. SLOVENIA

A2.16.1. Societal conditions affecting fertility

A2.16.2. Family policy strategy

In the past (but especially in the last 5 years) Slovenian government has not shown any interest for this topic. Furthermore, the measures implemented have always been partial and due to the crisis in the last years they have deteriorated. The current government does not pay attention to these issues.

Strategy to increase fertility rates in Slovenia (2006; not accepted)

Measures intended: lower costs (transport, textbook, day care etc.), not having the state cover for abortion unless it is strictly necessary, the necessity of which would be valued by a medical commission, improved labor market conditions, stimulating employers to employ families.

The government's proposed strategy for increasing fertility has five fundamental aims: 1) improving conditions for young families and families with more than one child, 2) introducing a system for easier work and life balance coordination, 3) achieving a decrease in mortality, which is worrying because of the rate of suicides and accidents, and the number of abortions, 4) increasing preventative measures and the health of children, the young and parents, and 5) reversing society to basic values such as life, family and children. In relation to the third, the Strategy envisions three principles: 1) life is a value, 2) family is our hope and 3) children are our future. Proposed measures range from increasing awareness of demographic changes; creating better conditions for forming a family by supporting the child decision through family policies such as child benefits; day care subsidies; subsidized transport and textbooks; improving labor market conditions of new parents, especially women.⁶⁸

The strategy received negative feedback in public and was not accepted.

Development strategy for Slovenia 2014-2020:

Ameliorate current demographic challenges with appropriate policies as part of a broader social policy, ensure low infant mortality, but increasing low fertility is NOT placed as a key development goal to be addressed, but something to get adjusted to.

The government's proposed development strategy aims to assist in reversing Slovenia's developmental stagnation or even backwardness in the past couple of years. The strategy notes that Slovenia did not achieve key goals stated in the previous Strategy for years 2005-2013, and there have been deteriorations on the labor market, environmental protection development and overall lower welfare, caused or exacerbated by the crisis. Thus, it gives guidelines as to where to focus Slovenia's policy makers attention to in the period 2014-2020, by: setting welfare as the highest developmental goal, pursuing sustainable economic growth, increasing productivity, increasing innovativeness and creativity, stimulating the business environment for social entrepreneurship, removing the state from the economy, increasing the state's efficiency and decreasing the level of gray economy, ensuring employment and employability of the population, ensuring efficiency and fairness in the social security systems, decreasing pressures on the environment, improving urban spaces management, developing sustainable energy, activating comparative advantage of Slovenian regions, changing the institutional framework so it allows developmental changes and promoting Slovenia and its characteristics abroad.

Overall, Slovenia does NOT have a clearly stated intention to increase fertility. Rather, it only states willingness to adjust to demographic changes as best as possible, but not (necessarily) counter them.

A2.16.3. Specific family policy measures

History of measures and acts:

Resolution of Foundations of Family Policy in Slovenia (1993)

This strategic document on family policy envisioned four main areas for policy makers:

- Social transfers policies
- Public services provision
- Labor market policies
- Residential policies

The Family Benefit Act (1993) developed policy interventions related to maternal leave, parental leave, benefits for newborn related material costs and child benefit.

This was revised in 1994 (Revised Family Benefit Act) and led to increased benefit eligibility in general and the price indexation of benefits (introduced January 1st 1995). A further revision in 1995 (**Revised Family Benefit Act (1995)**) increased eligibility for child benefit (for incomes from 50% to 110% of average wage) and

68

http://www.mdds.gov.si/fileadmin/mdds.gov.si/pageuploads/dokumenti_pdf/strategija_rodnost_osnutek_151_106.pdf

was seen to benefit low income households. In addition this revision introduced child care benefit. The **Revised Family Benefit Act (1999)** extended child care benefit up to 18 years of age and stipulated that child benefit was to be calculated not only according to the income of the family but also number of children.

In 2000, the **Revised Family Benefit Act is joined with Act on Working Conditions – new Act is called Parental Protection and Family Benefit Act (2000)**. The policy aim is to replace universality by selectivity, increase eligibility for child benefits; introduce paternal leave (15 days coinciding with maternal leave, valid from January 1st 2003 due to high initial public finance outflows); introduce rights for birth of twins, premature labor or rights tied to number of children already in the household - two or more (up to 8) years of age or child with special needs; separate maternal and parental leave: maternal leave is up to 105 days, paternal leave can not exceed 260 days, 75 days transferable maximum; paid (as if full-time) social security contributions by the state for part-time employment due to parental leave for child care; introduced big family benefit (with gradual increases envisioned through the years) for families with three or more children up to 18 years of age or students enrolled in bachelor studies up to 26 years of age; introduced compensation for lost incomes due to job leaving for child care: in the amount of a minimum wage; introduced child care benefit increase for children who are not enrolled in preschool child care (20%) and for children from single parent households (10%).

The Act on public coverage for infertility treatment (2000) covers up to 6 procedures for the birth of the first child, and up to 4 for every subsequent child.

Under the **Revised Parental Protection and Family Benefit Act (2003)** eligibility is no longer linked to Slovenian citizenship but EU citizenship; meanwhile in the **Revised Parental Protection and Family Benefit Act (2006)** eligibility for part-time working arrangements and Social Security contributions includes also self-employed and field workers while contributions for child care can no longer be paid (dobroimetje) as it showed to decrease parental leave in practice

In 2006, the **Strategy to increase fertility rates in Slovenia was proposed but not accepted**. This proposed decreased day care costs, transport costs and lower text book costs; stimulating employers to introduce day care facilities at the workplace; financial stimulation for employers who employ persons after their parental leave or those with part-time working arrangements.

The Kindergarten Act (22.9.2008) provided free pre-school day care for the second or more children that are not yet of school age

Parental Protection and Family Benefit Act (revised Act valid from 29.4. 2014) at childbirth provided 105 days of maternal leave, 30 days of paternal leave (of which 15 are newly introduced with this Act, but can only be used after one year of child birth, also will be introduced very gradually conditional on a 2.5 % GDP growth rate); 130 days of parental leave for each parent for caring for the child(ren), the father can transfer all days to the mother, mother has to have at least 30 days with the child; breastfeeding benefit, paid one hour per day up to 18 months of child birth; extended period to use the right to a shorter work arrangement in case of two children, from 6 years of age to completed first grade in primary school, non-transferable between parents; extended period to use parental benefits, in case of birth of twins, premature birth, or if parents have at least two other children who have not yet completed primary school first grade; increase in child benefit increase for single-parent households or households where the second parent is unknown or inactive in child rearing (for ex. no alimony) from 10% to 30%; benefits that were tied to 6,8,10 years of age are now uniformly tied to completed primary school first grade; child benefit application must be submitted up to one month from child birth, previously it was three, no benefit received for months prior to the application

In the Public Finance Balance Act (valid from 31.05.2012) maternal leave compensation remains unchanged: 100% for the first three months and does not have a cap (but the Government issued a proposal to institute a cap on it as well; parental leave compensation, for the remaining 9 months, is decreased from 100% to 90%, or stays 100% if the salary is below 763,60 euros, in addition it has a cap and cannot exceed the amount of twice the Slovenian average salary, initial proposal envisioned decrease to 80% for the second half of the parental leave; changes in rights to a large family benefit, introduction of a new condition: monthly income per person should not exceed 64% of the average net salary; those that do have the right do not need to submit an application, the Social Center reviews those eligible in any case.

A2.16.4. Fertility trends

A2.16.5. Summary and conclusions

A2.17. UKRAINE

A2.17.1. Societal conditions affecting fertility

The process of transition in Ukraine from a command economy to an open market system was prolonged and exhausting both for economy and for population. In the context of transition, the first decade of Ukrainian independence was marked by hyperinflation, rising unemployment, falling of living standards and negative economic growth. The GDP per capita expressed in PPS in Ukraine still remains small in comparison with average EU-27.

The economic growth and improvement of situation on labour market in Ukraine did not recover employment of Soviet period. During first decade of independence, Ukraine recorded a growth of unemployment rate because of jobs reduction in formal economy. Since the start of economic growth in 2000, unemployment rates by the ILO-concept have been steadily decreasing and reached 6.5% in 2008, but economic crisis in 2008 affected growth of unemployment rate again. In 2012 unemployment rate was 7.5%. There are high unemployment rate of youth aged 15-24 (in 2012 – 17.3%), and relatively low rates of unemployment for women and pre-retirement age persons (50-59) (in 2012 – 4.1%). It should be noted that state statistics (official) do not reflect the real situation, as it ignores the enforced transfer of workers on part-time of work.

According to results of the survey “Youth of Ukraine” (2010), almost a half of current students of vocational training and higher education institutions are not sure they will be able to find the job for which they are trained. Besides, today a significant proportion of young people participating in the labour force work not according to the specialty obtained from educational institutions, with the most common reasons for this being shortage of respective job opportunities and lack of financial prospects of employment according to specialty.

The problems of wages have become very urgent in Ukraine. Cheap labour does not motivate employers to introduce the new technologies. Low wages result in poverty of employed population and lead to decline in economic and labour activity of the population, making obstacles to full-scale implementation of social insurance system.

The subsistence minimum was established as a basic state social standard to calculate state social guarantees in 2000 (minimum wage, minimum pension, state social assistance). The size of the subsistence minimum is designed for different social-demographic groups every year. It is calculated in accordance with a basket principle and is used as the absolute criterion of poverty.

Since 2000, when macroeconomic situation in Ukraine has been improved after transformation recession, absolute poverty (as a share of population consuming less than the subsistence minimum) dropped and amount 21.7% of expenditures and 11.5% of income now. However, the relative poverty is varying within 25–28% (in 2013 –25.4%). Absolute poverty for international comparisons (daily consumption at \$5 per capita in PPP) is 2.2%, indicating a quite positive situation of Ukraine on the international background.

The key factors of the poverty risk are gender, age (children and elderly), place of residence, size of household, number of children in household, unemployment.

The size of the income per person in households with children is lower than in households without children. Furthermore in last years it is clear observed the tendency to decrease income per person in families with many children. The employment does not protect against poverty for families with children.

Ukrainian population is steadily declining. Population of rural area has been systematically decreasing to 31.0% at the beginning of 2014. Accordingly, urban population was 69.0%. The demographic situation is characterized by ageing of population, low birth rates and enough high mortality rates (especially, men in working age), the high rates of AIDS and tuberculosis. In last years the crude death rate decreased slightly. A reduction of death rates can be expected in the nearest 10 to 15 years, resulting from reforms in public health, a new tradition of healthy way of life (at least, among younger people), full-scale implementation of advanced technologies into production and improvement of working conditions, transport and road safety.

Demographic projections indicate that the population number in Ukraine will decrease fall by some 20% by 2050 to 36.3 million. It can be explained by large losses of demographic potential, caused by widespread standards of small families, short life expectancy and negative unfavourable migration balance exchanges.

The findings of the survey “Family and Family Relations” (2009) show that childbearing plans of respondents for the nearest future to a considerable extent depend on changes in material well-being of their families anticipated by respondents. Respondents who expect their economic situation to improve, are more inclined to have a child in the nearest three years. Despite different expectations the change of material well-being in the

next 3 years expressed by respondents from settlements of different types, the percentages of persons who plan to have a child in the next three years are virtually equal in urban and rural areas.

Societal conditions affecting fertility in Ukraine: evidences of surveys

Obstacles to having children depending on their desired number.

The findings of the surveys “Family and Children, 2008” and “Family and Family relations, 2009” showed that currently in Ukraine the most powerful obstacles to having the desired number of children are *insufficient well-being of the family* and *no appropriate housing conditions*. In 2009 almost 58% of respondents indicated *insufficient well-being of the family* as an obstacle to having the desired number of children. Unavailability of *appropriate housing conditions* was mentioned as a constraint to realization of reproductive intentions by 41% of respondents in the survey “Family and Family Relations, 2009”. A wider incidence of pessimistic assessments of own ability to support and raise children is evidenced by a growth in the percentage of respondents mentioning *inability to provide necessary conditions for children’s future* (to ensure proper education of children etc.) as an obstacle to having the desired number of children (26.7% of those polled in 2009). Some variations were observed in distribution of answers of respondents from settlements of different types (Table 1).

Table 1. Opinions of respondents from settlements of different types as to main obstacles to having the desired number of children, %* (April, 2009)

Obstacles to having the desired number of children	All respondents 2008	All respondents 2009	Respondents residing in		
			oblast centers	urban settlements except for oblast centers	in rural area
Insufficient well-being of the family	53,7	58,3	57,5	62,9	54,7
Aspiration to build a successful career	18,2	17,3	20,3	21,1	10,9
Not enough time for child care and upbringing because of work load and professional activities	13,0	12,9	14,9	14,2	9,2
No appropriate housing conditions	38,6	41,0	43,7	40,3	39,0
Tense relations in the family (including between spouses)	8,5	10,0	10,2	9,5	10,5
Health problems	16,9	18,4	17,2	18,8	20,1
Inability to provide necessary conditions for children’s future (to ensure proper education of children etc.)	23,6	26,7	32,0	23,4	25,3
Marriage partner doesn’t want more children	6,7	5,6	5,9	4,2	6,8
Reduced competitiveness and loss of income as a result of having a child	3,1	3,1	3,7	3,4	2,1
I want to focus on my own interests	6,1	6,6	6,6	7,4	6,1
I need more free time	4,9	4,4	5,3	4,5	3,8
I see no obstacles to having the desired number of children	–	10,3	6,4	9,4	14,4

* respondents could choose from several answer options

Wider opportunities for career development in cities explain why a larger percentage of urban residents as compared with rural dwellers mentioned *aspiration to build a successful career* as an obstacle to have the desired number of children.

Two-thirds of respondents with an experience of parenthood whose intention to have a certain number of children had not been fully realized (who would like to have other children if appropriate conditions existed) declared that for them *insufficient well-being of the family* was the main obstacle to have the desired number of children. It is logical to assume that all of these respondents will mention *intentions to improve their well-being and financial situation* as the reason for delaying the birth of the next child. However, among respondents who would like to have two or more children but at the time of the survey had one or two children and mentioned *insufficient well-being* as the factor impeding realization of their childbearing plans, only 60% mentioned that they intended to improve their well-being and financial situation before planning another child. A mostly objective nature of *insufficient well-being of the family* as an obstacle to having the desired number of children explains its higher frequency in answers of respondents as compared with *the intention to improve well-being and financial situation* as the reason for delaying the birth of the next child – the reason which presupposes a respondent’s active position and his/her readiness to certain actions.

Reasons for delaying the birth of the first/next child depending on the desired number of children.

The results of the analysis of respondents’ answers distribution to the question: *“What can make you delay the birth of the first/next child?”* demonstrate that *intentions to improve well-being and financial situation* is the most common reason for delaying the first as well as the next child for all groups of respondents irrespective of the desired or living number of children. The choice of this factor means a rational decision since each family realizes that birth of a(nother) child will to a certain extent decrease this family’s well-being; the higher a family’s well-being before the birth of a child, the lower this family’s sensibility to financial hardships. According to respondents’ assessment, the significance of this reason grows pro rata the desired number of children. Accordingly, among respondents who would like to have one child if appropriate conditions were available, 46% of respondents expressed an intention to improve own well-being before the birth of a child, as against 54% of respondents with the same intention among those who would like to have four and more children (Table 2). The second place in the ranking of main reasons for delaying the birth of a child/children is held by *intentions to create proper living conditions for the child*. The frequency of choosing this reason was lower among respondents who would like to limit the number of their children to one child even if appropriate conditions were available as compared with other groups of respondents.

An increase in the number of desired children correlates with a reduction in the percentage of respondents mentioning *“I wish to enjoy my life”* as the reason for delaying the birth of a child.

Table 2. Reasons for delaying the birth of the first/next child of respondents with different desired number of children, % of a respective population of respondents *

Obstacles for delaying the first/next child	All respondents 2008	All respondents 2009	Respondents who would like to have (desired number of children) if appropriate conditions were available			
			One children	Two children	Three children	Four and more children
Intention to complete one’s education	19.0	21.8	23.7	23.9	16.8	10.4
Intentions to create appropriate living conditions for the child	37.8	39.1	36.7	39.3	42.7	39.8
Intentions to improve well-being and financial situation	45.9	46.9	46.2	47.5	48.8	53.8
Tense relations in the family	8.7	9.4	9.7	8.6	12.2	9.0
Intention to enjoy one’s life	20.2	19.2	24.7	17.0	14.7	11.3
Plans to improve one’s health	13.6	15.0	13.6	15.6	15.3	22.6
A need to space childbearing (or pregnancies)	6.1	6.4	3.4	6.2	11.6	14.3
Intention to wait until the situation in the country becomes socially and politically stabile	11.3	16.0	16.9	17.1	15.2	18.7

Expectations for improved situation with health care; pre-school (school) education; social protection for mothers and children	9.7	6.2	6.1	6.1	8.3	<u>5.0</u>
Intentions to become sure of one's feelings (stability of relations with a partner)	6.6	8.0	7.9	7.5	8.7	8.1
Waiting for official registration of marriage	4.8	5.5	4.7	5.4	6.4	5.5
I see no reasons for delaying the birth of a child	–	5.7	4.1	5.1	7.9	10.3

* respondents could choose from several answer options

So, for Ukraine insufficient wages and salaries can be regarded as a powerful factor influencing the implementation of fertility orientations. Based on this finding, we can identify the measures which are expected by the population in terms of improvement of monetary support for families with children: it is increased wages and salaries, along with the actual improvement of material well-being, which will encourage a more positive individual perception of own well-being and make the population more sure of own future, thus leading to a fuller implementation of their fertility orientations.

Sources:

1. Social protection and social inclusion in Ukraine, Belarus and Moldova // European Commission <http://ec.europa.eu/social/main.jsp?langId=en&catId=89&newsId=892&furtherNews=yes>
2. "Marriage, Family and Childbearing Preferences in Ukraine". – Kyiv, Institute for Demography and Social Studies of NAS of Ukraine, United Nations Children's Fund (UNICEF), Ukrainian Centre for Social Reforms, 2009.
3. "Family and Family Relation in Ukraine: Modernity and Development Trends". – Kyiv, Institute for Demography and Social Studies of NAS of Ukraine, United Nations Children's Fund (UNICEF), Ukrainian Centre for Social Reforms, 2009.
4. Youth and Youth Policy in Ukraine: social and demographic aspects. – Kyiv, Institute for Demography and Social Studies of NAS of Ukraine, United Nations Children's Fund (UNICEF), Ukrainian Centre for Social Reforms, 2010.
5. Child Poverty and Disparities in Ukraine (under the editorship of E.M. Libanova) – Kyiv, Institute for Demography and Social Studies of NAS of Ukraine, United Nations Children's Fund (UNICEF), Ukrainian Centre for Social Reforms, 2009.
6. Аналітична записка "Комплексна оцінка бідності в Україні та регіонах за перше півріччя 2011-2013 рр. (Policy Brief "Comprehensive assessment of poverty in Ukraine and regions in the first half of 2011-2013") // http://www.idss.org.ua/public_rus.html

A2.17.2. Family policy strategy

At the heart of the Ukrainian family policy is the so-called 'childbirth grant' which has existed since 1993. Indeed, the lump-sum childbirth allowance is the most essential element of governmental assistance to families with children.

A2.17.3. Specific family policy measures

Childbirth grant

For a long time, childbirth allowances (the birth grant) in Ukraine were foreseen by the legislation but their amounts were so insignificant that they had almost no effect. In 2001, the lump-sum childbirth allowance was UAH 180 (€27) rising to UAH 200 (€30) by 2002. In 2003 the lump-sum childbirth allowance was UAH 320 (€48) and the monthly childcare allowance was UAH 80 (€12). The monthly allowance for children under three years old was UAH 40 (€6). At the same time, the statutory minimum subsistence level in 2002-2003 amounted to UAH 342 per month (€51) and UAH 307 (€46) for children under six. Fundamentally, the monetary allowances for birth and further upbringing of a child were not enough to cover even the most essential needs of families with children. Furthermore, it should be taken into account that the statutory minimum subsistence level was always lower than necessary to cover actual needs of the Ukrainian population. Finally, economic crisis and hyperinflation periodically disturbed payment

The year 2004 should be considered as the turning point in the development of financial assistance at childbirth, as increasing the childbirth grant was one of the points of the presidential Victor Yushchenko's 2004 Election Program "*Ten Steps towards the People*". The promise to significantly increase the lump sum payment at childbirth was realized after the "Orange Revolution" when a new political elite came to power in 2005. At that moment in Ukraine childbirth benefit was one of the highest in Europe. The result of the reform was the significant increase in payments at birth against the backdrop of minor changes of other social welfare expenditures. It is important to note that very little consultation with demographers and other scholars was performed, and the implementation of huge lump sum childbirth grant provoked lively discussions in different academic institutions.

However, the widely held opinion that the large 'birth grant' is an exclusive achievement of those political forces which came to power after the presidential elections and the Orange Revolution is only partially true. In reality, at the beginning of 2004 the lump-sum childbirth allowance was, indeed, rather high – UAH 684 (€102), with effect from 01.01.2004, and UAH 725 (€108) with effect from 01.05.2004 (being almost twice as high as the minimum subsistence level, which amounted to UAH 362 (€54) from 27.05.2004, and almost three times greater than the minimum salary, which at that time was UAH 205 (€31)). Another crucial factor is a significant politicization of the issue of the amount of lump-sum allowance and the status of this issue is still unchanged. As a consequence, monetary childbirth allowances increased considerably, while other social expenditures changed very insignificantly.

After the new political elite came to power, the lump-sum childbirth allowance was significantly increased (and the population was widely informed about this during the presidential campaign). From 01.01.2005 the allowance amounted to UAH 1500 (€225), from 01.04.2005 – UAH 8497 (€1275), and from 01.01.2006 – UAH 8500 (€1275).

The next reform of the allowance system took place in 2008; along with significant changes in the amounts and principals of allowance provision, the reform was largely politicized. The most important element of the reform the lump-sum childbirth allowance was the differentiation of its amount by the order of birth. The childbirth allowance for a child born after December 31, 2007 is UAH 12,240 (€1836) for the first child, UAH 25,000 (€3750) for the second child, UAH 50,000 (€7500) for the third child and next children. This allowance is paid not in a lump sum but by several instalments within a year or several years. Accordingly, the first instalment is UAH 4,800 (€720) at the birth of the first child, UAH 4,840 (€726) – the second child, UAH 5,000 (€750) –the third child and is paid immediately after birth. The remaining amount is paid according to the following scheme: within the next 12 months for the first child (UAH 620 (€93) per month), within 24 months for the second child (UAH 840 (€126) per month), within 36 months for the third child and the next children (UAH 1,250 (€188) per month) in equal instalments.

After change the power in 2010, the lump-sum childbirth allowance was increased again. Since the January, 2011 the size of the childbirth grant for the first child equals 30 times subsistence minimum for children under 6 years (on January 2014: UAH 30,960, €2369), for the second child is 60 times subsistence minimum for children under 6 years (on January 2014: UAH 61,920, €4681), and for the third and following children it is 120 times subsistence minimum for children under 6 years (on January 2014: UAH 123,840, €9498).

In March 2014 through economic crisis and cuts in expenditure budget the allowance system changed again: now the grant is paid a fixed amount (per newborn child), and at the same time the payments for the second and third child significantly reduce. For an overview of the trends in parental benefits and lump sum payments, please see Table below.

<i>Date of implementation</i>	<i>Parity</i>	<i>Total Amount of Benefit</i>	<i>Lump sum</i>	<i>% of total amount of benefit</i>	<i>Monthly</i>	<i>Number of Months</i>
01.04.2005	all	8500 UAH	3400 UAH	40.0	425 UAH	12
31.12. 2007	1	12240 UAH	4800 UAH	39.2	620 UAH	12
	2	25000 UAH	4840 UAH	19.4	840 UAH	24
	3+	50000 UAH	5000 UAH	10.0	1250 UAH	36

01.01.2011	1	22 s.m.	9 s.m.	40.9	1.1 s.m.	12
	2	45 s.m.	9 s.m.	20.0	1.5 s.m.	24
	3+	90 s.m.	9 s.m.	10.0	2.25 s.m.	36
09.04.2011	1	30 s.m.	10 s.m.	33.3	0.83 s.m.	24
	2	60 s.m.	10 s.m.	16.7	1.04 s.m.	48
	3+	120 s.m.	10 s.m.	8.3	1.53 s.m.	72
01.07.2014	all	41280 UAH	10320 UAH	25.0	860 UAH	36

Notes: s.m. = 'subsistence minimum'. 100UAH=6EUR (so 41280UAH=2,575EUR)

Over recent years, there were also some changes in the monthly allowance for children under 3; however, all the changes had one common feature – the amount of this allowance was always very insignificant as compared with other social standards. In 2005 it was UAH 104 (€16), in 2008 – UAH 130 (€20), in 2011 average size was 310 UAH (€46), and the allowance was paid without any differentiation by the order of birth.

The birth grant is awarded to one of the parents (or the adoptive parent/guardian). Since 2005 the size of the benefit has not depended on the mother's pensionable service.

Maternity allowance and leave

Maternity protection is included in the Ukrainian Labour Code and entitles mothers to paid leave in relation to pregnancy, childbirth and baby care. Payment compensates for the loss of wages during this period. A maternity allowance for women covered by the compulsory state social insurance system amounts to 100 per cent of the woman's average monthly income (salaries, scholarships, unemployment allowances, etc.). Those who are uninsured receive 25% of the living wage for able-bodied citizens. Maternity assistance is calculated for 70 calendar days prior to delivery and 56 days after. It is provided to women in full measure, regardless of the number of pregnancy leave days that they actually used prior to childbirth. Traditionally, all women with personal incomes receive this type of assistance; the rest do not always apply to the relevant government institutions to formalise their receipt of it, usually because it is so small. In 2012, the average maternity payment was 1,213 UAH (€111) in total.

A pregnant woman, who is officially working, is granted paid leave for temporary 'disability' in relation to pregnancy and delivery. To be entitled to paid temporary disability in relation to pregnancy and delivery women need to be registered in a women's consultation or clinic and to present an official certificate stating temporary disability. At the end of the period of paid leave for temporary disability, a young mother can either return to work or go on child care leave (for up to three years). In the latter case, she will no longer receive an average monthly salary, but an amount from the State Insurance.

If the child needs home care because he/she is ill, it must be confirmed by a doctor that the child is in need of treatment; the mother is then entitled to supplementary leave without pay until the child is six years of age.

Maternity leave (in Ukrainian Law, it is called "illness sheet for temporary disability in relation to pregnancy and delivery") is currently 70 days before and 56 days after giving birth. Meanwhile, in case of having two or more children or any complications during childbirth, the leave is increased to 140 days (70 days before and 70 after childbirth). Leave for child care lasts till the child is 3 years old.

Other benefits

A monthly benefit is payable to a parent (or adoptive parent or guardian) who cares for a child up to the age of three years old. The payments are made in full measure if the mother is employed part time. The average size of the benefit for children under three in 2012 per month accounted UAH347 (€36).

Child-care assistance is payable to unmarried mothers and single adoptive parents regardless of the availability of other legally established childcare-related payments and is provided for every child. A woman loses the right to assistance for single mothers, however, if she shares the house or lives and brings up children with their father. The average size of this benefit in 2012 was UAH323 (€32).

Finally, an allowance is provided for children under care or guardianship. This allowance is calculated as the difference between the minimum living wage for a child of the relevant age and the average alimony payments and pensions received for childcare during the previous six months. The average size of this benefit in 2011 was UAH1,888 (€170).

Pre-school institutions

Ukraine has inherited a Soviet system of child-care institution. All residential institutions for children in Ukraine are registered by the relevant local authority. Residential institutions are guided by various legislations and are subordinated to defined ministries. There are different types of residential institutions in Ukraine: (1) Residential care institutions, for children up to 4 years (subordinated to the Ministry of Health). (2) Residential institutions for children, (4 to 7 years old), and general educational institutions for orphans and other children without parental care from 7 to 18 (subordinated to the Ministry of Education and Science). They operate according to the regulation on residential institutions and general educational institutions approved by the ministry and their own regulations, which are registered by the local body of executive power. (3) Residential institutions for children with disabilities that are subordinated to the Ministry of Labour and Social Policy. They operate according to a regulation on the residential institutions for children approved by the ministry and to their own statutes, which are registered by the local body of executive power.

As state statistical materials show, despite the fact that in rural area coverage rate with preschool children's institutions demonstrates a gradually rising trend (only 17% of rural children attended preschool institutions in 2001, with rise in the corresponding percentage to 27% in 2005 and to 33% in 2008), however, it is still two times lower than a respective figure for urban area.

Likewise, preschool attendance rates in rural area remain considerably lower than that in urban. Moreover, since in rural area for a long time attendance rates indicated a certain extent of non-attendance of these institutions, this gave grounds to assume that rural residents prefer other forms of child upbringing and preschool institutions are not in high demand.

A2.17.4. Fertility trends

A2.17.5. Summary and conclusions

REFERENCES (incomplete)

- Berelson, B. (1974). *Population Policy in Developed Countries* (p. 793). New York, NY: Population Council.
- Billari, F. C. (2008). Lowest-Low Fertility in Europe : Exploring the Causes and Finding Some Surprises, 6(1).
- Billari, F. C., & Kohler, H.-P. (2004). Patterns of low and lowest-low fertility in Europe. *Population Studies*, 58(2), 161–76. doi:10.1080/0032472042000213695
- Branigan, T. (2012, January 23). Taiwan offers baby bonus to fix plummeting birth rate. *The Guardian (UK)*. London.
- Burrell, K. (2009). *Polish Migration to the UK in the "New" European Union: After 2004*. Farnham, UK: Ashgate.

- Cockerham, W. C. (1997). The social determinants of the decline of life expectancy in Russia and eastern Europe: a lifestyle explanation. *Journal of Health and Social Behavior*, 38(2), 117–30.
- Conrad, C., Lechner, M., & Werner, W. (1996). East German Fertility After Unification: Crisis or Adaptation? *Population and Development Review*, 22(2), 331–358. doi:10.2307/2137438
- Council of Europe. (2006). *Recent demographic developments in Europe 2005*. Strasbourg.
- Ekiert, G., & Hanson, S. E. (2003). Time, Space and Institutional Change in Central and Eastern Europe. In *Capitalism and Democracy in Central and Eastern Europe: Assessing the Legacy of Communist Rule* (pp. 15–48). Cambridge, UK: Cambridge University Press.
- Engbersen, G., Okolski, M., Black, R., & Pantiru, C. (2010). Working out a way from East to West: EU enlargement and labour migration from Central and Eastern Europe. In G. Engbersen, M. Okolski, R. Black, & C. Pantiru (Eds.), *A Continent Moving West?: EU Enlargement and Labour Migration from Central and Eastern Europe* (pp. 7–23). Amsterdam: Amsterdam University Press.
- Eurostat. (2014). European System of Integrated Social Protection Statistics (ESSPROS). *Social Protection (ESSPROS)*. Retrieved May 20, 2014, from http://epp.eurostat.ec.europa.eu/portal/page/portal/social_protection/introduction
- Frejka, T. (1980). Fertility Trends and Policies: Czechoslovakia in the 1970s. *Population & Development Review*, 6(1), 65–93.
- Frejka, T. (2008). Overview Chapter 5: Determinants of family formation and childbearing during the societal transition in Central and Eastern Europe. *Demographic Research*, 19(7), 139–170.
- Frejka, T. (2011). The Role of Contemporary Childbearing Postponement and Recuperation in Shaping Period Fertility Trends. *Comparative Population Studies*, 36(4), 927–958.
- Frejka, T., & Basten, S. (2014). *Fertility Patterns in Formerly Socialist Countries of Europe: Are They Converging with the West?* Boston, MA.
- Frejka, T., & Zakharov, S. (2013). The Apparent Failure of Russia's Pronatalist Family Policies. *Population and Development Review*, 39(4), 635–647. doi:10.1111/j.1728-4457.2013.00631.x
- Gauthier, A. H. (2011). Comparative Family Policy Database. *Comparative Family Policy Database*. Retrieved May 20, 2014, from <http://www.demogr.mpg.de/cgi-bin/databases/fampoldb/index.plx>
- Goldstein, J. R., & Kreyenfeld, M. (2011). Has East Germany Overtaken West Germany? Recent Trends in Order-Specific Fertility. *Population and Development Review*, 37(3), 453–472. doi:10.1111/j.1728-4457.2011.00430.x
- Goldstein, J. R., Sobotka, T., & Jasilioniene, A. (2009). The end of “lowest-low” fertility? *Population and Development Review*, 35(4), 663–699.
- Höhn, C., Avramov, D., & Kotowska, I. E. (2008). *People, Population Change and Policies Lessons from the Population Policy Acceptance Study Vol. 1: Family Change*. Dordrecht, Netherlands: Springer.
- Kantorová, V. (2004). Education and Entry into Motherhood: The Czech Republic during State Socialism and the Transition Period (1970-1997). *Demographic Research Special Collections*, 3(10), 245–274.
- Katus, K., Pöldma, A., Puur, A., & Sakkeus, L. (2007). First union formation in Estonia, Latvia and Lithuania: patterns across countries and gender. *Demographic Research*, 17(10), 247–300.

- King, L. (2002). Demographic trends, pronatalism, and nationalist ideologies in the late twentieth century. *Ethnic and Racial Studies*, 25(3), 367–389. doi:10.1080/01419870020036701d
- King, L., Hamm, P., & Stuckler, D. (2009). Rapid large-scale privatization and death rates in ex-communist countries: an analysis of stress-related and health system mechanisms. *International Journal of Health Services: Planning, Administration, Evaluation*, 39(3), 461–89.
- Kohler, H., Billari, F. C., & Ortega, J. A. (2005). Low and Lowest-Low Fertility in Europe: Causes, Implications and Policy Options, (2004), 1–51.
- Kulczycki, A. (1995). Abortion Policy in Postcommunist Europe: The Conflict in Poland. *Population and Development Review*, 21(3), 471–505. doi:10.2307/2137747
- Leon, D. A. (2011). Trends in European life expectancy: a salutary view. *International Journal of Epidemiology*, 40(2), 271–7. doi:10.1093/ije/dyr061
- Lesthaeghe, R. (2010). The Unfolding Story of the Second Demographic Transition. *Population and Development Review*, 36(2), 211–251. doi:10.1111/j.1728-4457.2010.00328.x
- Lesthaeghe, R. J. (1995). The second demographic transition in Western countries: An interpretation. In *Gender and family change in industrialized countries* (pp. 17–62). Oxford: Clarendon Press.
- Lutz, W., Basten, S., & Striessnig, E. (2012). The Future of Fertility: Future Trends in Family Size and Low Fertility Populations. In E. Kaufman & W. B. Wilcox (Eds.), *Whither the Child? Causes and Consequences of Low Fertility*. Boulder, CO: Paradigm.
- Myrskylä, M., Goldstein, J. R., & Cheng, Y. A. (2013). New Cohort Fertility Forecasts for the Developed World: Rises, Falls, and Reversals. *Population and Development Review*, 39(1), 31–56. doi:10.1111/j.1728-4457.2013.00572.x
- OECD. (2014). OECD Family database: the Family support calculator. *Social Policies and Data*. Retrieved May 20, 2014, from <http://www.oecd.org/social/soc/oecdfamilydatabasethefamilysupportcalculator.htm>
- Popova, S., Rehm, J., Patra, J., & Zatonski, W. (2007). Comparing alcohol consumption in central and eastern Europe to other European countries. *Alcohol and Alcoholism (Oxford, Oxfordshire)*, 42(5), 465–73. doi:10.1093/alcalc/agl124
- Potancokova, M., Vano, B., Pilinska, V., & Jurcova, D. (2008). Slovakia: Fertility between tradition and modernity. *Demographic Research*, 19(25), 973–1018.
- Puur, A., Rahnu, L., Maslauskaitė, A., Stankuniene, V., & Zakharov, S. (2012). The transformation of partnership formation in Eastern Europe: the legacy of the past demographic divide. *Journal of Comparative Family Studies*, 43(3), 389 – 417.
- Sobotka, T. (2003). Re-Emerging Diversity: Rapid Fertility Changes in Central and Eastern Europe After the Collapse of the Communist Regimes. *Population (English Edition)*, 58(4), 451–486.
- Sobotka, T. (2004). Is lowest-low fertility in Europe explained by the postponement of childbearing? *Population and Development Review*, 30(2), 195–220.
- Sobotka, T. (2008). The diverse faces of the Second Demographic Transition in Europe. *Demographic Research*, 19(8), 171–224.
- Sobotka, T. (2011). Fertility in Central and Eastern Europe after 1989: Collapse and Gradual Recovery. *Historical Social Research / Historische Sozialforschung*, 36(2), 246–296.

UNPD. (2013). World Population Prospects: The 2012 Revision. Retrieved from <http://esa.un.org/wpp/>