Summary

Summary and general conclusions:
Childbearing Trends and Policies in Europe

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Summary and general conclusions:  
Childbearing Trends and Policies in Europe  

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1. Introduction

European fertility early in the 21st century was at its lowest level since the Second World War. This study explores contemporary childbearing trends and policies in Europe, and gives detailed attention to the past two or three decades. We felt motivated to undertake this project because in many European countries, as well as for the European Union as a whole, the overall fertility level and its consequences are of grave concern and draw attention on the political stage. Our account focuses somewhat more on the previously state socialist countries of Central and Eastern Europe, where available knowledge about the impact on childbearing of the momentous political and economic transition that started in 1989 remains relatively scarce.

As family formation and childbearing behaviour are inherent components of societal life, they were influenced and modified by the various political, economic, and social changes that took place in Europe during the past 60 years. There were also profound changes in norms, values, beliefs, and attitudes regarding family and childbearing, and these exerted additional effects on fertility and family trends. To identify such effects, this study pays much attention to the influence of social and family policies on fertility, to the influence of political and economic changes on fertility and family trends, and to the diverse ways changes in values, norms, and attitudes relate to the transformation in family-related behaviour in Europe. In the present chapter, we outline main issues discussed in the subsequent overview chapters, and summarise the main findings of the entire study.

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2. Contemporary fertility levels and trends

During most of the second half of the 20th century, political and economic institutions in Central and Eastern European (CEE) countries differed substantially from those in Northern, Western, and Southern Europe. This created very different environments for family formation and childbearing, which was mirrored in contrasting fertility levels and trends. In the CEE countries, fertility declined in the 1950s and 1960s, while it was relatively high in the rest of Europe, where many countries experienced a baby boom. Conversely, fertility declined rapidly in Northern, Western, and Southern Europe, and was low during the 1970s and 1980s, whereas the CEE countries maintained higher fertility around the replacement level.

The collapse of the authoritarian regimes throughout CEE around 1990 went hand-in-hand with substantial changes in family and reproductive behaviour, expressed in an abrupt decline of fertility to very low levels. In the meantime, a differentiation in childbearing behaviour had taken place in the other parts of Europe. In the countries of Northern and Western Europe, with about one-quarter of Europe’s population, fertility stabilised at levels moderately below replacement with total fertility rates (TFRs) between 1.7 and 2.0 births per woman. Fertility continued to decline to very low levels in Southern Europe and in the predominantly German-speaking countries. In the first decade of the 21st century, three-quarters of Europe’s population live in countries with TFRs between 1.3 and 1.6 births per woman, namely in the latter two regions and in the CEE countries.

An early childbearing pattern, typical of the baby boom period of the 1950s and 1960s, and retained in Central and Eastern Europe until the mid-1990s, has been replaced by a late pattern characterised by a pronounced delay of entry into parenthood. This secular trend towards later childbearing has contributed greatly to the decline and to the fluctuations in period TFRs. A share of the delayed births was eventually recuperated, especially among childless women, but the extent of recuperation differs by country and region. In Western and Northern Europe, most of the delayed births were recuperated by the time women reached their late twenties and thirties. This recuperation has been notably smaller in the German-speaking countries and in Southern Europe. In most of the formerly state socialist countries, any recuperation of delayed births has been weak so far, especially for second and higher-order births.

3. Change in family size and parity distribution

There were many differences in average family size and in parity distribution across European countries at the end of the 20th century. Nevertheless, the two-child family
clearly became the norm. Between 40 and 55 percent of women in the cohorts born in the 1950s and 1960s had two children. Among recent generations, there has been an almost universal increase in childlessness, though this development is not uniform across countries. There were also some incipient signs that the share of two-child families is declining in a number of countries, especially in Central, Eastern, and Southern Europe, where there has been a marked increase in one-child families, and where the share of families with three or more children has continued to decline.

4. Completing the contraceptive revolution

The diffusion of modern contraception has played an important role in giving women control over their reproduction. In tandem with relatively easy access to legal induced abortions, it has affected childbearing behaviour in a number of ways. It has reduced the incidence of unwanted and mistimed pregnancies and births, especially among very young women. It has made it easier for women and couples to postpone their births, and it has provided them with a tool to time pregnancies better than before, and thus to have a more effective control over other life-cycle events, such as education, employment, career development, and marriage. Modern methods of birth control, most recently also including assisted reproduction, constitute major tools for people to have the number of children that best suit their circumstances and reproductive desires. However, historical evidence suggests that the introduction and diffusion of modern contraceptives and relatively easy access to legal induced abortions has had only a marginal influence on fertility levels.

5. The search for explanatory mechanisms

A central issue for all the authors involved in this project is the identification of factors that have generated the respective childbearing trends. In pursuing this goal, we realize that we are faced with a dynamic research situation, and that findings and conclusions may have to be modified as new knowledge emerges. Our starting point is the notion that, under persistent societal norms supporting motherhood, most women will want to have at least one child, given reasonably favourable circumstances.

During the initial decades of the modern welfare state and during the economic growth of the 1950s and early 1960s in the West, marriage was almost universal and fertility was high compared to the low levels of the 1930s. Numerous interacting factors then brought about the precipitous fertility decline of the 1960s and 1970s, and led to the ensuing sub-replacement fertility. The basic demographic mechanism underlying
these fertility levels and trends consisted of delayed family formation and childbearing, and only partial subsequent recuperation of delayed births at higher ages in comparison to older generations.

Concomitant with fertility change was a transformation in the character of sexuality, union formation, and family life. Marriage rates declined dramatically, cohabitation and non-marital childbearing increased, and union instability became widespread because non-marital unions are less stable and divorce rates rose. The higher prevalence of the more fragile non-marital unions could have led to lower fertility in itself, but the relationship between changes in family behaviour, living arrangements, and fertility level is by no means straightforward. Early in the 21st century, the unprecedented changes in family life and living arrangements are not closely related to the relatively low fertility on the continent, and much less so in each individual country.

Furthermore, in most of Europe, with the Nordic countries as a partial exception, it became more difficult for young people to establish a separate household in the later decades of the 20th century, and this remains a challenge at the beginning of the 21st. It has become increasingly difficult to find stable employment and to pursue a work career. A secondary or higher-level education has become essential to secure a satisfying job. Ever larger proportions of women have joined the labour force, their status has improved, and they have enjoyed increasing independence. At the same time, the majority of household chores and the upbringing of children have primarily remained their responsibility. Also, housing costs have risen in many countries, making it difficult to secure housing for young people. New risks and uncertainties have emerged alongside changing patterns of partnership relations.

6. Explaining fertility change in Central and Eastern Europe

Developments in the countries of Central and Eastern Europe merit our special attention. During the era of state socialism, the basic demographic mechanism underlying the fertility level and its stability in the CEE countries consisted of almost universal and early marriage, a low age at childbearing with low rates of childlessness, and high rates of first and second births. Societal circumstances underpinning this demographic regime were generated and sustained by social and economic policies that were predominantly pro-natalist in nature. The socialist state and the lack of market forces created a relatively predictable and risk-free environment, and the authoritarian political system limited the range of available options for self-realisation outside the family.
Following the collapse of state socialism around 1990, young people in CEE adjusted to new conditions. This adjustment resulted in rapidly changing forms of family formation and partnership relationships, and in new patterns of childbearing, notably in a precipitous fertility decline. Two major explanations have repeatedly appeared in the literature. One argues that the economic and social crises of the early 1990s were the principal causes of the rapid demographic change. The other explanation claims that the change was essentially produced by a diffusion of western norms, values, and attitudes. Both explanations are supported by valid arguments and contain important insights, but they do not provide comprehensive answers clarifying what generated the new family and childbearing trends. They do not reflect an interpretation that arises frequently in the country chapters, namely that the structural developments involved in the replacement of the state socialist regimes with the economic and political institutions of contemporary capitalism were instrumental in effecting the fertility decline and in inducing later union formation and childbearing. This process was identified as the root cause of the demographic changes and trends during the transition period in Overview Chapter 5. The broader explanation does not deny the validity of the ‘crisis’ or the ‘cultural and ideational’ explanations. Both are inherent in the ‘root cause’ hypothesis. This involves the fundamental change of the societal system from a centrally planned and authoritarian system to a market economy with democratic political institutions, as well as the remarkably rapid rise in tertiary education enrolment rates, continued high female labour force participation rates, and persisting unequal gender responsibilities for child-raising and household maintenance. Arguably, without these and other structural developments, many of the changes in values and attitudes might not have materialised. As political, economic, social, and cultural changes in many CEE countries were closely intertwined and proceeded rapidly, it is practically impossible to isolate the relative importance of specific factors for the transformation observed in demographic behaviour.

7. The Second Demographic Transition

As we mentioned above, the fertility decline and postponement that got underway in the late 1960s and the early 1970s in Northern and Western Europe were accompanied by a transformation in norms, values, and attitudes regarding family life and childbearing. These developments have been termed the Second Demographic Transition (SDT) by Ron Lesthaeghe and Dirk van de Kaa, whose basic proposition is that ideational change in a broad sense (in combination with the ‘contraceptive revolution’) constituted the main driving mechanism that produced changes in demographic behaviour. The change in family-related values gradually diffused to Southern Europe, and most of its
demographic manifestations were observed in the 1990s in the formerly state socialist countries of CEE as well.

More specifically, in most of Europe there has been an increase in the acceptance of intimate relationships among un-partnered individuals, as well as an acceptance of non-family living arrangements and of childlessness, and a positive evaluation of cohabitation as a premarital stage and as an alternative to marriage. Non-marital childbearing has also become widely accepted, especially within stable cohabiting unions, whereas childbearing to single mothers is still mostly regarded as undesirable. At the same time, the family has not become an obsolete institution. On the contrary, family life — though in more diverse forms — continues to be highly and almost universally valued, and parenthood remains at the top of many people’s life priorities. What has changed is the motivation for parenthood. Childbearing is less frequently seen as a ‘duty towards society’ or as an inescapable destiny, and it has increasingly become a result of a planned decision of each couple, who in their decision-making process may consider various potential positive and negative effects of parenthood on their relationship, lifestyle, and economic wellbeing. Parenthood increasingly serves individual self-fulfilment and private joy, but it is also taken very seriously, and there is a considerable emphasis on responsible parenthood and the well-being of the children.

Without a doubt, these changes in norms and values do not take place in isolation from broader economic and social developments; increasing prosperity, rising educational levels, and the rapid spread of labour force participation among women are among the factors that typically accompany the Second Demographic Transition. Several country studies for Central and Eastern Europe included in our project question the validity of the SDT hypothesis as an explanation for the rapid change in demographic behaviour there, and suggest that structural factors were the main generators of these changes. They also show that some of these changes, notably the rise of non-marital childbearing, were initially experienced by disadvantaged population strata in the CEE countries, something that does not fit in the “classical” SDT narrative. This new behaviour has then gradually been adopted by other social groups, and has eventually led to wider attitudinal change.

In our analysis in Overview Chapter 6, we suggest that there appear to be two distinct pathways in the SDT. Along the first pathway, cultural and value changes are driven by economic affluence and are characterised by secular individualism and by an orientation towards personal self-fulfilment as a precondition to large-scale change in family behaviour. The second pathway, typical especially of the CEE countries, may first lead to an emergence of new family behaviour, especially in disadvantaged strata, as a response to changed structural conditions in society. Subsequently, this behaviour gradually becomes accepted and adopted by other social groups, which in turn leads to
wider changes in attitudes towards it. This pathway does not conform to the original SDT conceptualisation.

Finally, it is important to note that the experiences of the countries that were forerunners in the SDT process, namely the Nordic and Western European countries, suggest that the second demographic transition does not necessarily lead to the long-lasting decline in fertility to sub-replacement levels, which originally was considered an SDT hallmark.

8. The effects of migration on childbearing

Migration streams to Northern, Western, and Southern Europe have been substantial after 1990, and immigration has become the main source of population growth. An increasing proportion of births in Europe are attributable to immigrants. The question arises whether immigration has had a significant impact on fertility levels.

In general, immigrant women in Europe tend to have higher fertility than indigenous women, in particular shortly after immigration. Typical trends indicate a gradual decline of differentials between immigrants and natives as time since migration increases. Even though immigrant fertility is relatively high, its impact on overall total fertility rates is rather small, mainly because the immigrant population constitutes only a fraction of the total population in most countries. In recent years, immigrants’ childbearing raised the TFR in Northern, Southern and Western Europe by three to seven percent, exceptionally by 10 percent.

There are also substantial differences between immigrants and natives in their living arrangements, marriage patterns, and non-marital fertility. Despite these pronounced initial differences, many immigrant groups converge in their fertility behaviour to native women quite rapidly. Especially women who immigrate as children are likely to have fertility levels similar to those of natives.

Experience to date has shown that migration can modify fertility, population size, growth, and structure of European countries. However, a massive amount of immigration would be required to alter substantially contemporary fertility patterns in Europe. On balance, effects of migration could be beneficial by sustaining the size of the labour force and slowing the ageing process. Contemporary economic prosperity and the political stability of most European countries make them attractive destinations for many potential migrants. At the same time, migration is also unstable and is the least predictable component of population change. Furthermore, immigration has become a political question in many countries of Europe, and the lack of will to accommodate and assimilate migrants among the receiving population can be a limiting circumstance.
9. Do public policies affect fertility?

Methodologically, it is difficult to ascertain to what extent individual public policies have had an impact on fertility levels, and how long any such effect has lasted. Depending on the nature of the policies, their impact may have been restricted to influencing mainly the timing of childbearing. To design and recommend policies to modify childbearing behaviour can be even more of a challenge, especially considering that there is a lack of consensus among scholars on the desirability and effectiveness of different policy measures.

Nevertheless, there is evidence that a consistent system of population and family policies can effectively sustain or modify fertility levels in contemporary societies. Total fertility rates have been maintained relatively close to the replacement level in countries where principles of gender equity in the household and in society have been systematically nurtured for extended periods of time, and have been supplemented by wide-ranging societal support for childbearing. Material and structural measures alone, such as paid parental leaves and child bonuses, even when generous, seem to have a limited influence on fertility when they are implemented in a "traditional" male-dominated societal environment. Policy makers need to apply a holistic approach and to use a comprehensive range of policies, which must be sustained over a long period of time to have an appreciable impact on the fertility level.

10. Conclusions and outlook for the foreseeable future

At present, European countries have different levels of low fertility, and there are no signs of a convergence between them. There is also no indication that either childbearing incentives or constraints are likely to change substantially in the near future. In Northern and Western Europe, it is reasonable to assume that fertility will be maintained close to the replacement level. In Southern, Central, and Eastern Europe, some increase in fertility rates may occur, but even so fertility will most probably remain well below replacement. The direction of main trends in family formation and fertility behaviour, values, and attitudes seems reasonably clear. Childbearing and union formation will almost certainly occur later than in previous decades in most countries, the new forms of partnership will probably continue to be practiced, whereas the value attached to the family and parenthood looks likely to remain high. In any case, population ageing will progress to unprecedented levels.

Europe will continue to be attractive to migrants from many other parts of the world, but in the receiving countries there are noticeable pressures, political and popular, to restrict immigration flows. How these countervailing forces will play out is
not clear. It is, however, doubtful that migration flows would take on dimensions that would have a sizable impact on national fertility levels in the near future.

At present there is no evidence of coming discontinuities in the basic institutional configurations that affect fertility and family in Europe. Considerable social, political, and economic change, as well as significant alterations in family values, would have to occur to make a real difference in fertility levels. Fertility could possibly be modified by policy measures, but they would have to be durable and of a major dimension to have a long-lasting effect on fertility trends. Unless the institutional environment changes, most European countries, except for those in Northern and Western Europe, may increasingly have to rely on immigration to maintain their population size. Alternatively, they seem to face the prospect of population decline.