European Foundation for the Improvement of Living and Working Conditions

QUALITY OF LIFE IN EUROPE

Fertility and family issues in an enlarged Europe

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Foreword

The Lisbon Summit highlighted social policy as a core element in Europe's strategy for becoming 'the most competitive and dynamic knowledge-based economy in the world, capable of sustainable economic growth with better jobs and greater social cohesion' by 2010. This objective defines a series of social policy challenges for the EU. A separate joint report of the Directorate General for Employment and Social Affairs and the European Foundation for the Improvement of Living and Working Conditions, addresses several of these key issues, such as social exclusion and poverty, the relationship between quality of life and quality of work, fertility, migration and mobility, satisfaction with quality of life, care and intergenerational solidarity.

This particular report, which provided some of the material for the above study, focuses on fertility and family issues in Europe.

Examining quality of life in 28 European countries, including the acceding and candidate countries as well as the current Member States of the EU, this report provides, for the first time, an analysis of the views and experiences of the citizens of the new Europe on aspects relating to fertility and family size, as well as responsibility for care and household tasks. The analysis is based on data from the European Commission's Eurobarometer survey carried out in the acceding and candidate countries in Spring 2002 and standard EU 15 Eurobarometers.

This report represents one in a series of reports on quality of life in an enlarging Europe that will be published by the Foundation on the basis of its own survey's findings over the next few years.

Willy Buschak
Acting Director

Country codes in figures and tables

EU Member States (protocol order)	
Belgium	BE
Denmark	DK
Germany	DE
Greece	EL
Spain	ES
France	FR
Ireland	IE
Italy	IT
Luxembourg	LU
Netherlands	NL
Austria	AT
Portugal	PT
Finland	FI
Sweden	SE
United Kingdom	UK
Acceding countries (protocol order)	
Cyprus	CY
Czech Republic	CZ
Estonia	EE
Hungary	HU
Latvia	LV
Lithuania	LT
Malta	MT
Poland	PL
Slovakia	SK
Slovenia	SI
Candidate countries (protocol order)	
Bulgaria	BG
Romania	RO
Turkey	TR
EU 15	15 Member States of the European Union (pre-May 2004)
EU 25	25 Member States of the European Union (post-May 2004)
AC 10	10 countries to accede to the European Union in May 2004
ACC 13	10 acceding countries, plus the three candidate countries

Note: Unless otherwise stated, the aggregate figures for EU 15, EU 25, AC 10 and ACC 13 reported here are weighted to adjust for country population size.

Contents

Additional data on this subject are available from the Foundation at ter@eurofound.eu.int

The fertility dilemma 1

Policy perspective

The EU has no competence in either population policy or family policy. It has not, therefore, adopted a formal policy position on current fertility patterns in the Union. Yet these patterns are an important emergent issue in policy debates, and as such they present the EU with a dilemma. On the one hand, birth rates have fallen to critically low levels in Europe. This has caused many to worry that the EU's long-term position, both as an economic and political force in the world, and as a prosperous and pleasant place to live, may be in danger. Economic growth may be threatened, government budgets may be stretched to pay for pensions and health services, and there may be too few adults of working age to provide care and support for older people. These worries, which arise from what we might call the macro-structural perspective on low fertility, would suggest a need for EU governments to take action to raise birth rates.

On the other hand the right and ability to control one's own fertility on the part of individual women and couples is widely supported in Europe and is now conventionally viewed as a private matter in which governments have little right to intervene. It is also regarded as one of the prerequisites of women's emancipation, and as a basic feature of modern European civilisation. In addition, it comes within the realm of 'quality of life' as defined by the European Foundation for the Improvement of Living and Working Conditions; this is because it could be considered as a manifestation of the degree to which people achieve the level and style of life they would choose for themselves.

Low fertility can be viewed, from this quality of life perspective, as a consequence of freedom of choice and an aspect of daily behaviour that is positively valued by European citizens. For this reason governments have been reluctant to define the practices that give rise to it as negative or to seek to change them in a heavy-handed way.

The macro-structural perspective and the quality of life perspective on low fertility appear, therefore, to be in tension with each other and it is this tension that creates an emerging dilemma for the EU. At the macro level low fertility would seem, at least in the long run, to be bad for Europe; but at the micro level it is what individuals choose and has to be respected on that account. Both perspectives have validity but they point in opposite policy directions.

Reasons for the decline

The purpose of this chapter of the report is to explore this dilemma, using the data on fertility provided by the available survey sources. These data are particularly useful for examining an interpretation of the fertility dilemma that has attracted some interest in public and political discussion, as it seems to offer a resolution of the underlying difficulty. This is the 'affordability' interpretation, which argues that economic pressures are the root cause of the current fertility problem.

According to this interpretation, those pressures have raised the cost of children beyond what people can afford and have limited them to levels of childbearing that fall short of their ideal. This affordability thesis challenges the notion that present very low levels of fertility can be interpreted benignly as the product of high levels of individual control over fertility. It suggests rather that individual control is exercised against a background of economic restrictions that impede people's

capacity to have large families, or indeed any families at all. The precise nature of these economic restrictions may vary: the pressure on women to work full time in the labour market, for example, the high cost and poor availability of child care, the lack of public support for families with children and the high cost of housing.

Whatever their precise nature, economic problems of this kind could be said to narrow people's family formation options and close off ways of living which they might well value highly. Viewed in this way, present low levels of fertility could be identified not only as a macro-structural threat but also as a reflection of restricted personal options and as a negative aspect of present-day quality of life.

This is to suggest that the tension between the macro-structural and quality of life perspectives on low fertility may be more apparent rather real; the macro-structural need to raise fertility and individual preferences about fertility may be less in conflict with each other than they seem at first sight. The supposed policy dilemma posed by falling birth rates may also be illusory, since, if explanations for fertility decline based on affordability are accepted, social need and individual preference can be served by improving the affordability of children to parents. This is an expedient that may be costly to achieve, but is at least clear as a goal.

Expressed in a strong form, the affordability thesis just outlined is untenable. It requires the view that people in the developed world, who are the richest in human history, somehow cannot afford in an absolute sense to have more children. That view flies in the face of common sense. If absolute income were the key factor in human reproduction, then the scope for people to have large families would be greater today than ever it has been before, and we would not have a problem of low fertility in the modern world.

However, a weaker version of the thesis poses the question in different terms and offers a serious interpretation of present very low birth rates. Drawing on economic theory, this version starts from the observation that economic development raises the value of people's time, particularly those people who have high levels of human capital (for classic expositions of this approach see Becker, 1981 and Easterlin, 1978; for overviews see Alter, 1992 and Robinson, 1997). Their choices as to how to spend that time widens, and the value of what they can gain from effort they expend in any direction increases.

For women in particular, this development has radical implications, since it gives them new options in life beyond the traditional female roles of childbearing and child rearing. In deciding which of those options to pursue, women consider the range of incentives (the costs and the benefits) associated with the various courses of action open to them and choose the mix of activities which best suits their individual circumstances. Childbearing takes its place among many possible outlets for women's time and energy, and the degree to which that particular outlet is pursued could be decisively tipped in one direction or the other by quite fine shifts in the balance of incentives.

One may still say, from this perspective, that women today cannot 'afford' to have children as their mothers and grandmothers did; but this is only true in the sense that that the other options available to them are so rich and attractive that the loss entailed in sacrificing those options for the sake of family formation is greater than anything experienced in previous generations. A similar argument applies to men, though the forces at work and the contrast with historical experience are less sharp in their case.

Expressed in the pure terms just outlined, this version of the affordability thesis is simply a restatement of the free choice perspective referred to earlier: women (and men) have fewer children today because they have decided that smaller families help them maximise the overall benefit they get from life.

However, in trying to resolve the fertility dilemma facing Europe, a variation on the pure form of the thesis can be introduced. This variation is not one that many economists would be willing to accept; yet it reflects the popular beliefs and political perceptions that provide the context for the policy debates referred to earlier. It departs from the notion of the rational economic actor as the ideal-typical agent and points to ambivalence, uncertainty, social and cultural pressure, conflict between short-term and long-term goals, and other complicating factors as additional influences on the way people live. The effect of these complicating factors can mean that people sometimes end up making what might be called inauthentic or unfulfilling choices. That is, they pursue a way of living that is appealing at one level and conforms to some of their impulses, or that responds to incentives and pressures coming from outside, but that somehow fails to satisfy deeper needs.

Childbearing is one dimension of life that can be viewed in these terms. In particular, the low levels of childbearing found in Europe today can be interpreted at one level as a response to immediate social and economic pressures and even as freely selected choices within that context. On another level, however, it might be argued that such an adaptation to a particular external situation is satisfactory to a certain degree but fails adequately to fulfil people's deeper impulses to form families and reproduce. This is to suggest, in other words, that very small family sizes and the rising incidence of childlessness may generate a certain layer of dissatisfaction and lack of fulfilment even among those who make these choices for themselves.

People's uneasiness about their family size choices may not be strongly articulated and may co-exist with a determination to protect the right to freely decide their own fertility. Yet it may indicate a latent willingness to move towards an increase in family size, both generally and at the level of the individual. That latent willingness could provide a potential which public policy might be able to tap and, with suitable measures to address affordability issues, could convert into an upward movement in the fertility rate.

The key idea in this version of the affordability hypothesis, therefore, is that low fertility is at least partly undesired at some fundamental level and gives rise to subtle negative effects on subjective well-being among individuals. If fertility achievements are unfulfilling in this sense, then the policy problems posed by low fertility may be more tractable than they seem. People may be more receptive to incentives to increase fertility than the seemingly inexorable decline in fertility in Europe would lead one to expect. This then would suggest that the way is more open for effective policy intervention in this area than has been assumed so far.

Fertility results and trends

One of the primary aims of this report is to test the idea that fertility results in Europe today fail to fulfil people's fertility desires or ideals and produce negative effects (however subtle) on subjective well-being in consequence. The secondary aim is to provide a descriptive account of the data, highlighting the main features of interest in the patterns they reveal. As we shall see further in

Chapter 2, given the degree to which low fertility is a free personal choice, there is not a very strong a priori case for expecting the thesis of the negative subjective effects of low fertility to be validated by empirical data.

Rational choice theory, especially as applied in neo-classical economics, raises the strongest formal objections to the notion of unfulfilling or unsatisfying choice as an explanatory concept, and other influential strands of thinking in the social sciences (particularly feminism) would be hostile to any representation of voluntary fertility control as something likely to make women unhappy.

Nevertheless, the thesis has sufficient popular appeal and surface plausibility to make it an important part of the context for emerging EU policy debates. It therefore warrants empirical investigation. It is particularly useful to do so in the present report since the available survey data on fertility and related areas provide a useful basis for testing it. The key relevant variables are in three categories:

1. A measure of respondents' fertility situation, based on a question about how many children they have had.
2. Two sets of variables that provide different approaches to measuring what respondents want or wanted by way of number of children. (One of these refers to present fertility ideals; while the other, which was asked only in the CC Eurobarometer, asked respondents how many children they wanted when they were aged 20 and whether they have had the number of children they wanted at age 20. The latter questions were posed only to those aged over 25).
3. An item measuring satisfaction with life in general and, in the case of the ten acceding countries (AC 10) and the three candidate countries (CC 3), a similar item measuring satisfaction with family life.

These variables do not allow for a test of certain important elements of the afford-ability thesis, particularly concerning the role of economic factors as causes of fertility decline. However, there are three things they enable us to do in some detail:

1. Describe fertility levels in the 28 countries in the data set (the EU 15 plus the 13 acceding and candidate countries (ACC 13)).
2. Assess the degree to which people's childbearing outcomes are in line with what they want, as the affordability thesis suggests is often *not* the case in the developed world today. Two measures of people's wants can be used for this purpose, one based on what people say is the ideal family size for themselves, the other (which is available only for ACC 13) on what those aged over 25 say they wanted when they were 20.
3. To the extent that there is a mismatch between what people attain and what they want as far as child-bearing is concerned, to examine whether people's subjective satisfaction relating both to life in general and to family life is affected as a result. This is to test the hypothesis that today's very low levels of fertility reduce subjective well-being in subtle ways and thus produce a certain impairment in quality of life. The satisfaction variables available to us here provide relevant outcome variables to test this hypothesis (though the second of these variables, on satisfaction with family life, is available only for the AC 10 and CC 3).

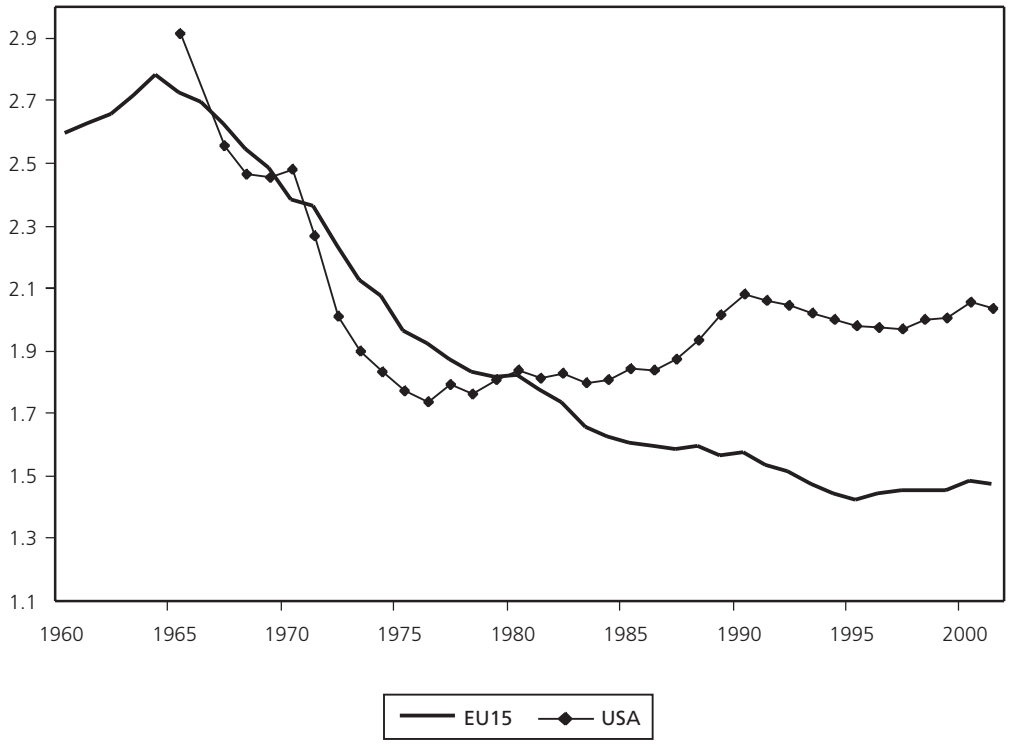
As well as presenting data for each of the 28 countries both individually and in total, the report also presents data for the EU 15, the AC 10 and the CC 3. The focus on CC 3 rather than AC 13 is presented in order to isolate as much as possible the effect of Turkey, since Turkey is an exceptional case as far as fertility patterns are concerned. In weighted demographic data for groups of countries (such as AC 13) it has a disproportionate effect on account of its large size. By showing the data for CC 3 separately, it is possible to get an indication of the additional heterogeneity within the EU that will arise from the accession of the CC 3 later this decade (if and when that occurs).

Current fertility levels in Europe 2

Present concern about fertility in the EU arises from a long decline in European birth rates to very low levels. As Figure 1 shows, the total fertility rate in the EU 15 fell below population replacement level three decades ago (in 1974, to be precise). For the past 15 years it has been at less than three-quarters the level that is needed to replace the population (the total fertility rate for the EU 15 is now at 1.47 births per woman, while the replacement fertility rate is conventionally defined as 2.1).

Eurostat's projections are that within the next four to five years, for the first time in modern European history, the number of births in the combined EU countries will fall below the number of deaths, and a natural decrease in the population will occur (Eurostat 2002, 126). Inward migration is likely to stave off population decline for up to a decade or so after that, but by 2020 the EU's total population is projected to be on a pronounced downward path (Eurostat 2002).

Figure 1: Total fertility rate in the EU 15, 1960-2001



Sources: Eurostat 2002, National Vital Statistics Reports (US) Vol 51, No. 12 (4 August 2003), Statistical Abstract of the United States (various years).

Europe's weak reproductive performance is a concern not only because of its internal implications but also because of likely effects on Europe's global position. In particular, European fertility compares poorly with that of its main competitor on the world stage, the United States. US fertility fell to moderately low levels in the 1970s, bottoming out at a total fertility rate of 1.74 in 1976. At that time, the fertility rate in the present EU 15 was about 15 per cent higher than in the US. Since then US fertility has recovered and moved upwards while European fertility has moved downwards. The US total fertility rate overtook that of the EU in 1980 and from then onwards the gap between the two has widened. In 1989 the US total fertility rate rose above 2.0 and it has hovered around that level since then.

This has meant that the US has had a fertility advantage over the EU for over two decades. For the second half of that period the US advantage has been large, with a fertility rate about 40 per cent higher than that of the EU 15. So the positive differential in favour of the US is now stretching out to embrace a full generation of children and teenagers, and will be present for the long term as it works its way up through the age structure. This differential is not enough to prevent population ageing in the US, but it is sufficient to slow down the pace of that process and, taking inward migration into account, to preserve the US on a path of population growth for at least another half century (United Nations 2000).

The accession of 10 new states to the EU in 2004 will do nothing to brighten the fertility outlook for the EU since the reproductive performance of the acceding countries is weaker than that of the existing Member States. As Figure 2 shows, only Malta and Cyprus have fertility rates that exceed the current EU average, while the other eight fall well below that level. The distinction of having the lowest fertility rate in the world, which in the late 1990s was shared between Italy and Spain, has more recently passed to the Czech Republic.

Population decline, which is still around the corner for the EU 15 (and for all its Member States individually) has already arrived in the AC 10 taken as a whole. In 2001 more people died than were born or migrated inwards in seven of the ten acceding countries, thus giving rise to population decrease. The three that showed an increase – Slovenia, Malta and Cyprus – are tiny, having a combined population of less than three million people between them (Eurostat 2002, 135, 137). So, as the EU enlarges from 15 to 25 states, its total population will increase but the reproductive vitality of that population will be lower than it is in the present EU 15.

Further enlargement to include the three candidate countries of Bulgaria, Romania and Turkey may have a marginally more positive effect on overall reproduction in the EU. This is so because fertility in Turkey (the largest country of the three) is high by European standards, at 2.5 births per woman in 2001. However, the birth rate in Turkey has been falling rapidly in recent decades, having declined from a total fertility rate of 5.02 in 1970 to its present 2.5. The United Nations assumes that it will have fallen to replacement level by the second half of the present decade (United Nations, 2000). So by the time Turkish accession to the EU is completed it may have lost much of the reproductive vitality that sets it apart today.

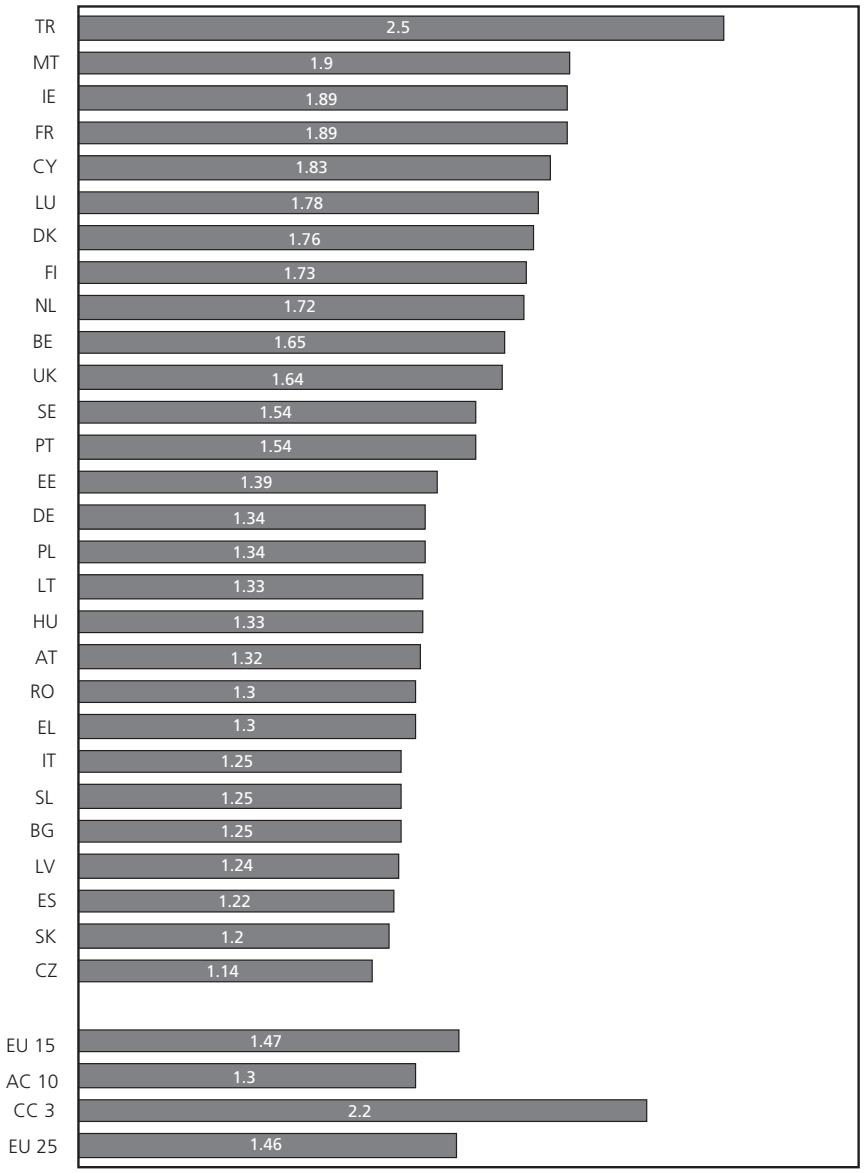
Patterns of completed fertility

We now turn to the survey data from CC Eurobarometer 2002 and Standard Eurobarometer 56.2, 2001, to examine fertility results in the 28 countries in more detail.

Data issues

First, a note on the limitations of point-in-time cross-sectional data for present purposes. From a policy point of view, the fertility behaviour of younger age-cohorts of adults is of most interest since they represent the immediate reproductive future of the EU 28. However, in cross-sectional data it is difficult to distinguish between cohort aspects of fertility behaviour (that is, those aspects which will persist through to the point when each age-cohort's fertility is completed) and age-related aspects (that is, those which arise simply because an age cohort is young and has not yet achieved its eventual fertility outcome). Policy interest lies primarily in cohort rather than age-related patterns, since these have the greatest long-term impact.

Figure 2 Total fertility rates in the EU 28 countries, 2001



Source: Eurostat 2002.

However, cross-sectional data do not reveal cohort patterns among those whose are still in the family formation process. For example, women in their 20s in cross-sectional data will show lower levels of childbearing than women in their 30s or 40s but it will not be possible to infer from that how their eventual fertility outcome will turn out. Thus, despite the policy interest in the reproductive patterns of younger adults, a general descriptive account of younger age groups in a cross-sectional data set can yield only limited information on those aspects of their behaviour that will have lasting significance. This is particularly so in the present case given the small sample sizes on which the data are based and the consequent inability to present fine breakdowns by age.

The conflation of cohort and age-related patterns is removed when the focus is limited to older age groups who have completed their childbearing. Their fertility outcomes are complete and fully

known and so are open to analysis. For these reasons, much of the present account focuses on those with completed fertility, while fertility achievements among younger women are dealt with only in a secondary way. To maximise the policy interest of findings on women with completed fertility, it is necessary to identify the youngest possible segment of women in that situation, while at the same maintaining reasonable sample size at the country level in the data at our disposal.

For present purposes, therefore, the relevant category is defined as women aged 40-64, who, if they are aged under 50, have said they plan to have no more children. While some of the women in their 40s who are counted here as having completed their child-bearing may go on to have an unplanned pregnancy and birth, these are likely to be rare enough not to give rise to substantial errors in the data.

Even though the age-range of this group is narrowed down as far as sample size considerations will allow, the childbearing time span of the women involved is quite wide. The oldest women in the age group (who are aged 63-64) would have entered their childbearing years in their late teens, that is, in the late 1950s, while the youngest (who are in their early 40s) are arriving at the end of their childbearing years around the present time. The data on completed childbearing among this age group therefore reflect childbearing activity over a 45-year period, spanning most of the second half of the twentieth century. This again indicates the difficulty of linking cross-sectional data of this kind to short-term temporal patterns of fertility, and so drawing conclusions about time trends that might be of interest to policy.

Finer gradations by age are also used in the analysis below, but because of sample size constraints, these can only be applied to clusters of countries rather than individual countries. The clusters we focus on here are three major groupings that correspond to phases of EU enlargement – the EU 15, the AC 10 and the CC 3.

Completed family size

Table 1 shows both mean family size among women with completed fertility (aged 40-64) and the distribution across family size categories. The means indicate that even for this older age group of women, completed fertility is just below replacement level for both the EU 15 and AC 10. Ireland joins Turkey as an exceptional case with high fertility, and Cyprus is not far behind.

The distributions across family size categories enable us to assess how the means are affected by particular combinations of childlessness, medium family size and large family size. Previous research in Europe has shown that there has been only one standard feature in the patterns found across countries as far as evolution of family size over recent decades is concerned. This is a universal decline in the incidence of large families – families of four or more children (Pearse, 1999).

Other developments in family size patterns have varied across countries. This is particularly so in connection with childlessness. Some countries have shown a considerable rise in childlessness, and in some cases (such as Germany) this has been identified as the main driver of fertility decline (in Germany, the incidence of childlessness rose from 11 per cent among the age cohort of women born in 1940 to 32 per cent among the age cohort born in 1965 – Birg, 2001).

Table 1 Family size among women aged 40-64 with completed fertility

		Distribution by number of children (%)				
	Average	None	1 or 2	3 or more	Total	No. of cases
AT	1.91	12.1	63.0	24.9	100	192
BE	1.91	13.3	59.5	27.2	100	176
BG	1.92	4.8	81.8	13.4	100	263
CY	2.61	1.0	51.5	47.6	100	134
CZ	1.96	3.8	75.7	20.5	100	216
DK	1.94	11.4	64.7	23.9	100	182
EE	1.84	7.9	75.4	16.8	100	207
FI	2.14	16.0	48.7	35.3	100	190
FR	2.31	6.8	55.6	37.7	100	166
DE	1.85	12.0	64.3	23.7	100	415
UK	2.33	7.5	57.5	34.9	100	230
EL	2.00	7.6	65.2	27.2	100	196
HU	1.99	5.7	75.8	18.5	100	247
IE	3.07	10.1	29.5	60.4	100	145
IT	1.86	11.0	65.4	23.6	100	185
LV	1.82	8.1	69.5	22.4	100	208
LT	1.95	5.6	72.6	21.8	100	211
LU	1.91	9.1	64.4	26.5	100	107
MT	1.80	22.8	46.5	30.7	100	82
NL	2.10	12.9	52.8	34.3	100	183
PO	2.23	10.2	54.0	35.8	100	479
PT	2.61	8.7	53.0	38.3	100	185
RO	1.89	7.6	75.8	16.7	100	232
SK	2.03	17.8	50.5	31.7	100	263
SI	1.76	13.6	67.5	18.8	100	218
ES	2.25	8.4	55.7	35.9	100	173
SE	2.03	10.1	60.3	29.6	100	169
TR	3.13	4.0	30.6	65.3	100	219
EU 15	2.08	10.6	58.1	31.3	100	2,894
AC 10	2.09	9.4	64.5	26.0	100	2,265
CC 3	2.56	5.5	60.5	34.0	100	714
EU 25	2.07	9.2	59.3	31.5	100	5,873

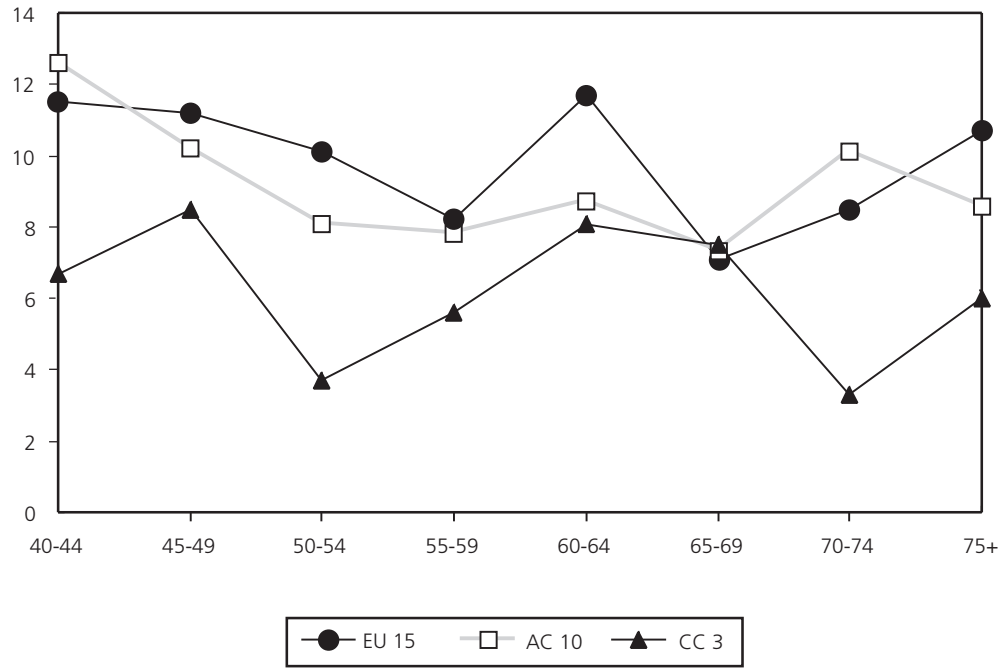
Question: Q12. Have you had any children? (If yes) How many?
Source: CC Eurobarometer 2002 and Eurobarometer 56.2.

In a study of eight EU countries, Pearse (1996) found that, comparing the age cohort born in 1940 to that born in 1960, the incidence of childlessness had risen from 5 per cent to 16 per cent in Ireland, from 11 per cent to 21 per cent in the UK and from 12 to 18 per cent in the Netherlands. However, such increases in childlessness were not universal. In five other European countries analysed by Pearse, the level of childlessness remained the same or changed only slightly between the age cohorts born in 1940 and 1960: it remained at 8 per cent in France; and rose only from 6

to 7 per cent in Portugal; from 8 to 10 per cent in Spain; from 10 to 12 per cent in Denmark; and from 14 to 18 per cent in Finland (Pearse, 1996, p. 38).

Figures 3 and 4 give an indication of the incidence of childlessness and of larger family sizes across five-year age bands of women with completed fertility (that is, who are aged over 50 or are aged 40-49 and have said they intend to have no more children). In order to maintain the sample numbers on which the graphs are based at adequate levels, the data are presented at EU 15, AC 10 and CC 3 levels rather than for each country. The women covered in these graphs would have been in their childbearing years over the period between the late 1940s and the 1990s. In effect, therefore, the graph uses cross-sectional age-data to provide a synthetic picture of family size trends over most of the second half of the twentieth century.

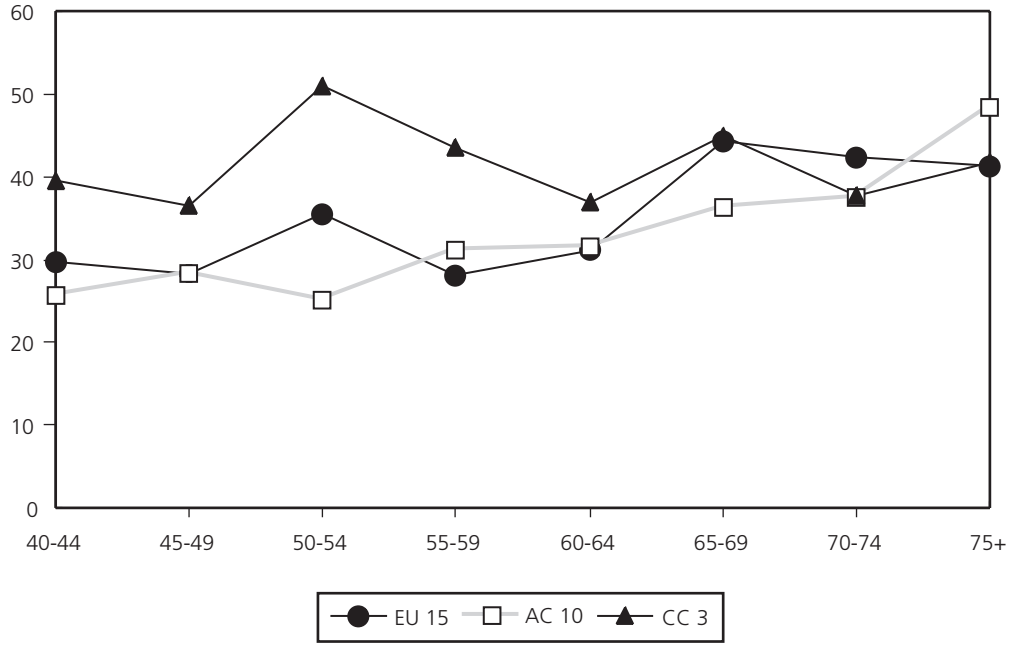
Figure 3 Percentages with no children by five-year age groups among women with completed fertility*



* Aged 50 and over, or aged 40-49 but not planning to have children.
Source: CC Eurobarometer 2002 and Eurobarometer 56.2.

In the case of childlessness as illustrated in Figure 3, the data show no clear upward or downward movement, though there is considerable fluctuation between the five-year age bands. This would tend to confirm the point made earlier that while childlessness has risen in some countries, that rise has not been consistent across countries and is not strong enough to act as a major driver of overall European fertility rates. The trend in large family size tracked in Figure 4 is different, in that in both the EU 15 and the AC 10 there is a general and consistent decline across age groups, though in the CC 3 such decline is not evident. Overall, in the EU 15 and the AC 10, the incidence of completed families with three or more children is about one-third lower among women aged in their 40s than among women aged 75 and over.

Figure 4 Percentages with three or more children by five-year age groups among women with completed fertility*



* Aged 50 and over, or aged 40-49 but not planning to have more children.
Source: CC Eurobarometer 2002 and Eurobarometer 56.2.

The differing significance of childlessness and large family size for overall fertility outcomes, as just outlined on the basis of time-trend data, is confirmed when we look at patterns across countries at a single point in time. Both these aspects of fertility varied widely across countries in 2001-2002. As Figure 5 shows, childlessness ranged from 1 per cent in Cyprus to 23 per cent in Malta, while the incidence of families of 3 or more children ranged from a low of 16 per cent in Romania to a high of 65 per cent in Turkey. However, these two factors have a very different bearing on mean family size across countries.

Table 2 shows that while the level of childlessness is negatively correlated with mean family size, the correlation is not particularly strong and is not statistically significant. The proportion of women who have three or more children, by contrast, is very strongly correlated with mean family size. Thus, in accounting for differences in mean family size among women with completed fertility across countries, the effect of having a third or subsequent child is much more substantial than the effect of having no children at all.

Age at childbirth and remaining single

Two further factors, often regarded as a negative influence on the birth rate, are worth noting here. The first is the delay among women in having their children. In most countries the average age at childbirth among women has been rising steadily since the 1960s. So too has the average age at which they give birth to their first child. In France, to take a fairly representative example, the mean age at childbirth rose by almost two years (from 27.6 years to 29.4 years) between 1960 and 1999, while the mean age at birth of first child rose by 4 years (from 24.8 to 28.7 years) (Eurostat 2002, pp. 89, 92). Similarly people have been marrying later or not at all. In the EU generally, the mean

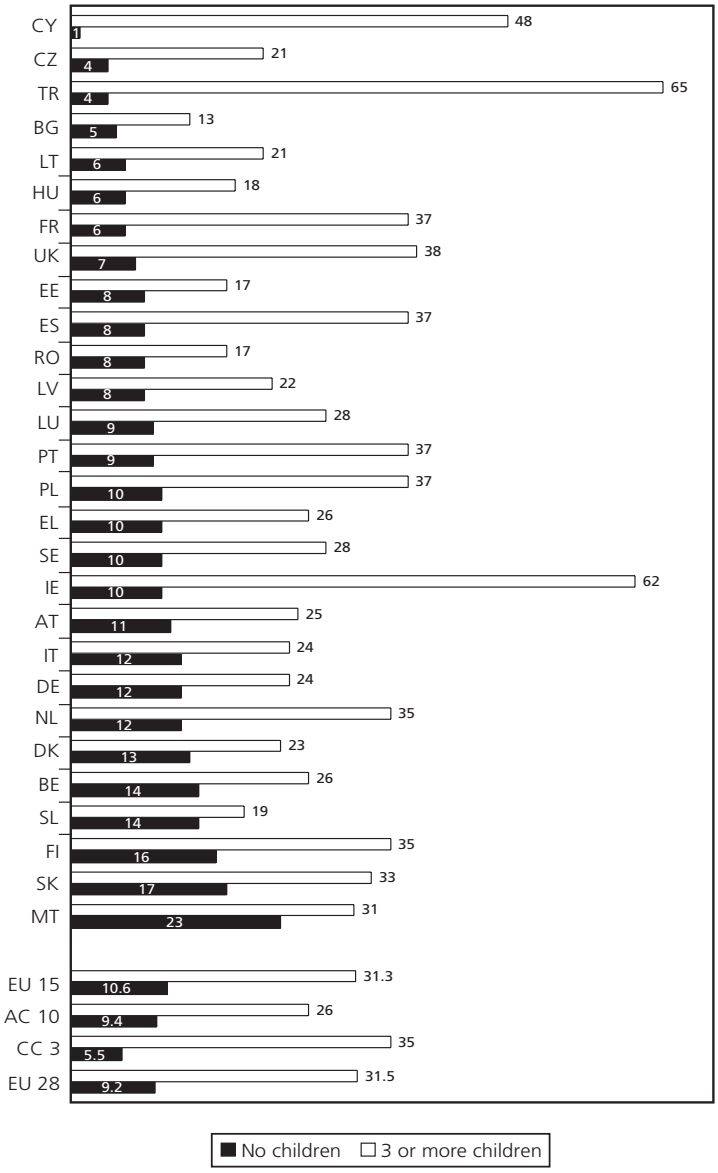
age of marriage has risen by about five years since the mid-1970s (Eurostat 2002, p. 97), though the effect on fertility has been moderated by the growth of consensual unions and of childbearing outside of marriage.

Table 2 Correlations between average family size and percentage childless and percentage with three or more children among women with completed fertility aged 40-64

	% childless	% with three or more children
Average family size	-0.36	0.93

Source: CC Eurobarometer 2002 and Eurobarometer 56.2.

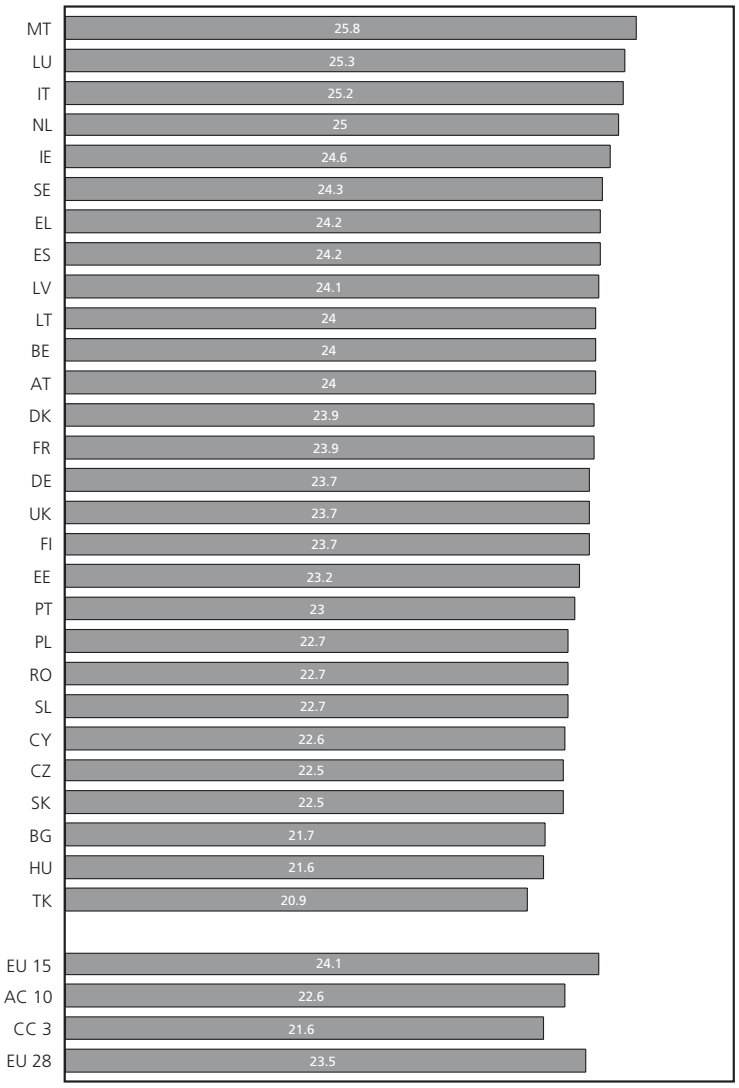
Figure 5 Percentage with no children and with three or more children among women with completed fertility (aged 40-64)



Source: CC Eurobarometer 2002 and Eurobarometer 56.2.

Turning to the patterns on these issues shown by our data, there is considerable variation across countries in both the age at birth of first child and the propensity to remain single. Among women with completed fertility there is, as Figure 6 shows, almost a five-year gap in mean age at first birth between Turkey (the lowest, at 20.9 years) and Malta (the highest, at 25.8 years). However, the scatter plot in Figure 7 shows that there is almost no relationship between this variable and eventual family size.

Figure 6 Average age at birth of first child, women aged 40-64 with completed fertility

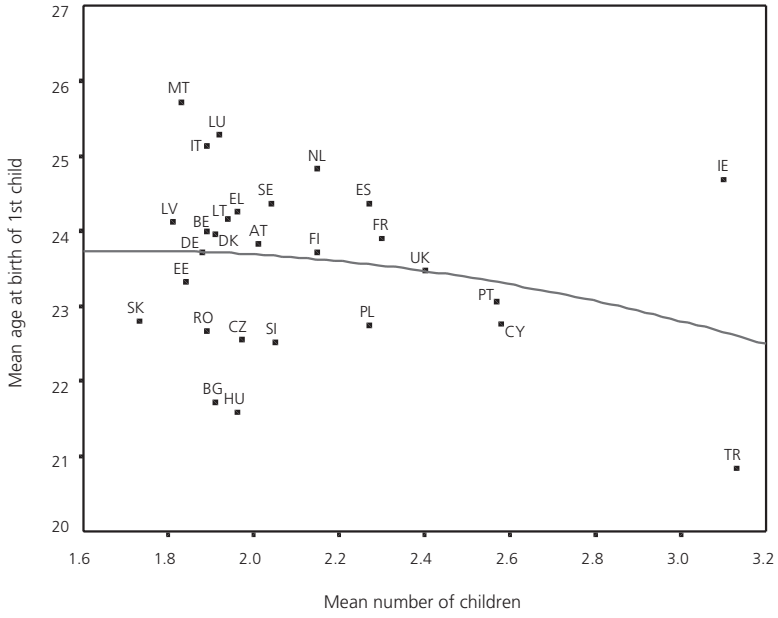


Question: Q13. How old were you when you had your first child?
Source: CC Eurobarometer 2002 and Eurobarometer 56.2.

So, for example, countries where the mean number of children born was below two include some where the mean age at birth of first child was low (e.g. below 22 years in Hungary and Bulgaria) and others where it was high (e.g. above 25 years in Malta, Luxembourg and Italy). Turkey, which has a high number of children born, also has an early average age at birth of first child; but Ireland has a high number of children born and a late average age at birth of first child. Figure 7 shows

that there is no real link across countries between average age at birth of first child and average number of children born.

Figure 7 Age at birth of first child and average number of children born to women with completed fertility (ages 40-64)

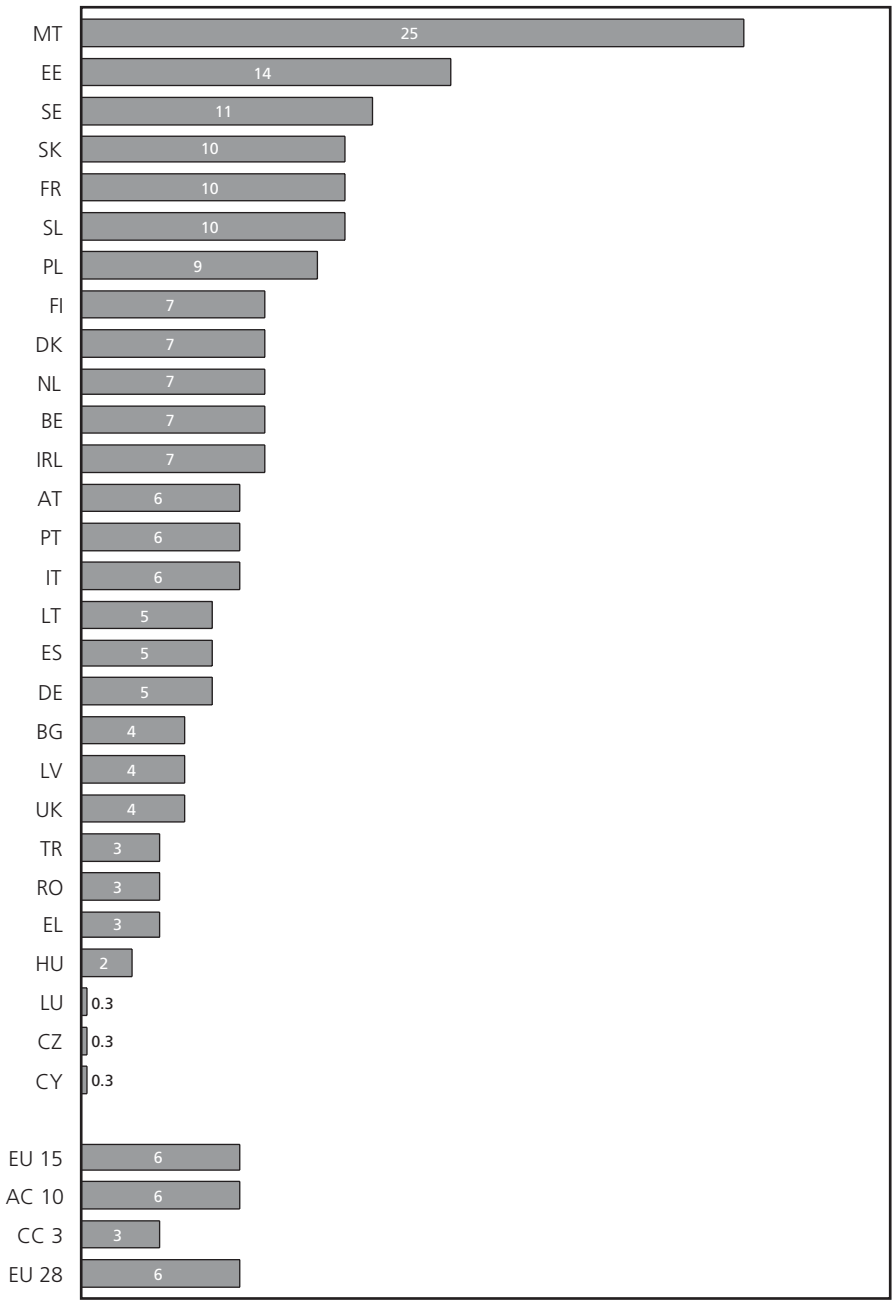


Source: CC Eurobarometer 2002 and Eurobarometer 56.2.

The second possible influence on the level of childbearing that we can check here is the proportion of women who remain single throughout their childbearing years. In the historical past in Europe, the level of singlehood was a dominant influence on fertility levels and a major mechanism of fertility limitation at the societal level (Alter 1997). As the proportion of births taking place outside marriage has soared in western countries in recent years, the role of marriage as a gateway to reproduction has reduced. It is unlikely that singlehood has as great a negative influence on birth rates as it had in the past. Nevertheless, it remains possible that many women who would want to have children end up childless because they do not find a long-term partner whom they would want as fathers of their children.

The propensity to remain single is shown in Figure 8, while Figure 9 tests whether it has an effect on fertility outcomes in the 28 countries. In this instance the single are defined as those who have never married and never lived with a partner outside marriage. The results show, first, that countries differ widely in the level of singlehood. In Cyprus, the Czech Republic and Luxembourg almost no women in the 40-64 age group are living without a partner; while in Malta 25 per cent are in that situation. However, the results also show that at the country level the proportion that remains single has no consistent impact on the numbers of children born. The majority of countries with low fertility (that is, with a mean number of children below two) also have a low proportion of women who remained single. Malta is the only low-fertility country where the proportion of women who remained single was high enough that it could have amounted to a significant negative influence on the level of childbearing.

Figure 8 Percentage of women aged 40-64 with completed fertility who are single and not currently living with a partner

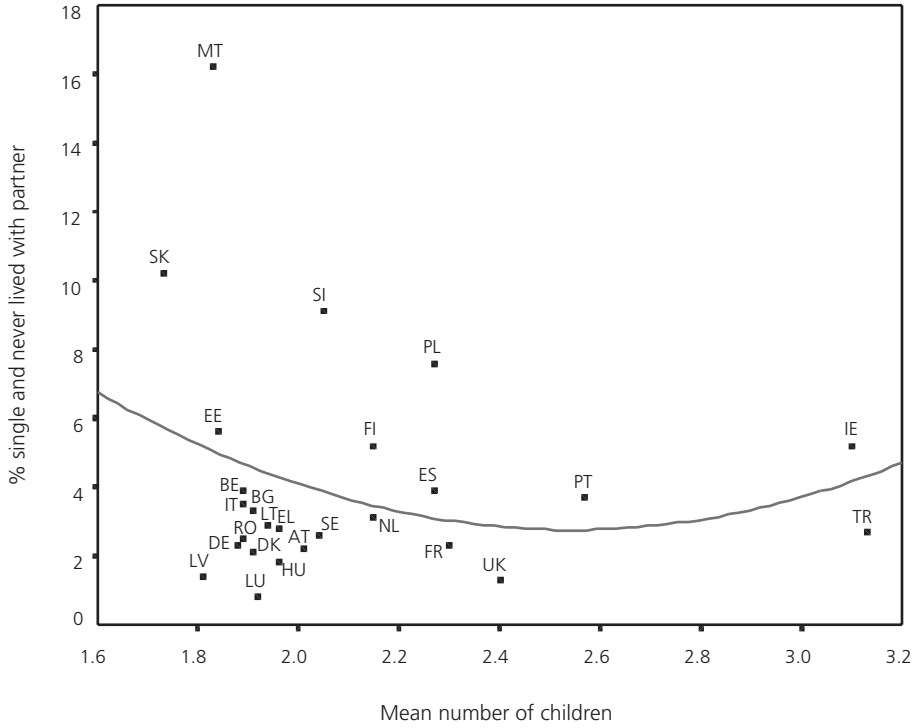


Sources: CC Eurobarometer 2002 and Eurobarometer 54.2.

Fertility of younger women

In looking at fertility patterns among younger women, the number of children born to date is only of limited interest for present purposes, since it gives little indication of likely completed family size. However, as well as the item on children born, the data contain an item that asked respondents how many children they still planned to have. When these two items were added together, we arrived at a projection of completed family size among those still in their childbearing years.

Figure 9 Percentages remaining single and average number of children born to women with completed fertility (ages 40-64)



How accurate this projection is likely to prove is difficult to say. Stated future fertility intentions have been shown to have only a limited relationship with actual future behaviour, though this relationship improves if measures of certainty or intensity of the intention are included (Thomson and Brandreth, 1995). Since the present item relates only to broad intention, without any measure of intensity or certainty, its predictive power is likely to be limited. So the sum of the number of children respondents already have and those they intend to have should best be read as an indication of respondents' general orientation to family size, rather than as a firm prediction of what their eventual family size will be.

Table 3 presents the country means on both present and intended number of children among women aged 18-39, and Figure 10 presents a graph of the same data. If the sum of present plus intended number of children could be taken as a guide to eventual outcomes, then these data would suggest that Europe is headed for a significant increase in fertility. Actual plus planned fertility among women aged 18-39, in both the EU 15 and the AC 10, would give a fertility rate in the region of 1.8 or 1.9, which is about one third higher than the current total fertility rate for those regions.

Figure 11 shows the relationship between present plus planned fertility and the current total fertility rate in more detail. In Turkey, present plus planned fertility is *lower* than the total fertility rate. This indicates that young Turkish women aspire to have fewer children than is currently the norm in Turkey. In all other countries, however, things are the other way around: aspirations exceed the prevailing norm and women plan to have more children than are produced by the prevailing birth rate.

Table 3 Present and planned number of children among women aged 18-39

	Average number of children			
	Present	Planned	Present + planned	No. of cases
AT	0.89	0.54	1.4	219
BE	1.01	1.00	2.0	217
BG	1.01	0.56	1.6	190
CY	1.15	0.98	2.1	110
CZ	0.62	1.15	1.8	223
DK	1.00	1.14	2.1	210
EE	0.93	0.83	1.8	213
FI	1.14	0.92	2.1	209
FR	1.01	1.24	2.3	235
DE	0.85	0.67	1.5	410
EL	0.76	1.18	1.9	218
HU	1.08	0.91	2.0	183
IE	1.01	1.12	2.2	235
IT	0.46	1.05	1.5	215
LV	0.93	0.86	1.8	209
LT	0.98	0.50	1.5	239
LU	1.09	0.79	1.9	129
MT	0.59	1.01	1.6	93
NL	0.84	0.97	1.8	229
PO	0.92	0.96	1.9	443
PT	0.89	0.99	1.9	229
RO	0.83	0.69	1.6	195
SK	0.97	0.83	1.8	220
SI	0.72	0.97	1.7	213
ES	0.56	1.12	1.7	231
SE	1.03	0.93	2.0	198
TR	1.34	0.87	2.2	668
UK	1.61	0.62	2.2	284
EU 28	0.97	0.91	1.9	6,800
CC 3	1.23	0.82	2.1	1,103
AC 10	0.90	0.94	1.8	2,134
EU 15	0.91	0.93	1.8	3,563

Questions: Q12. Have you had any children? (If yes) How many?
Q14: How many children do you still plan to have?

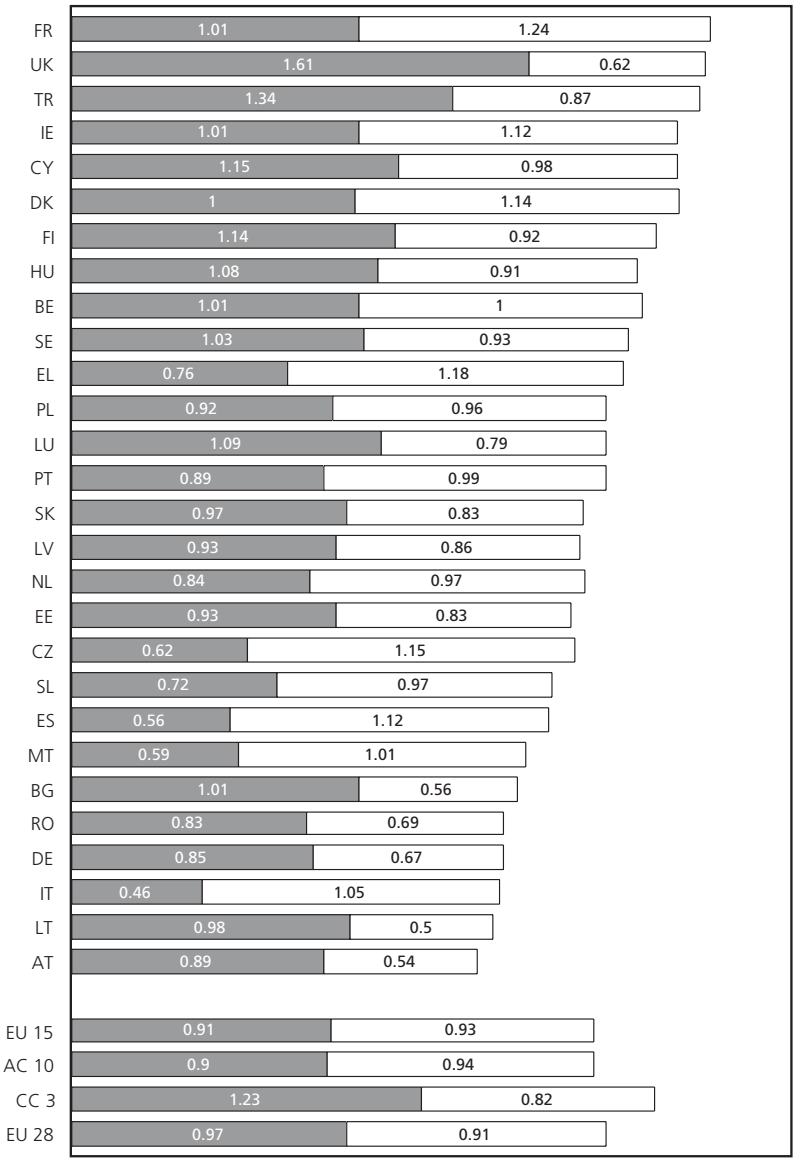
Source: CC Eurobarometer 2002 and Eurobarometer 54.2.

Conclusions

The general outlines of fertility patterns in Europe are well known. Present fertility rates in the EU 15 have been below population replacement level for three decades and are now only at two thirds of that benchmark level. The situation in the AC 10 is no better in that their collective fertility rate is slightly lower than that of the EU 15. Only Turkey, one of the CC 3, has a fertility rate above

replacement level, but even in Turkey's case fertility has been declining rapidly and is likely to fall below replacement level later this decade.

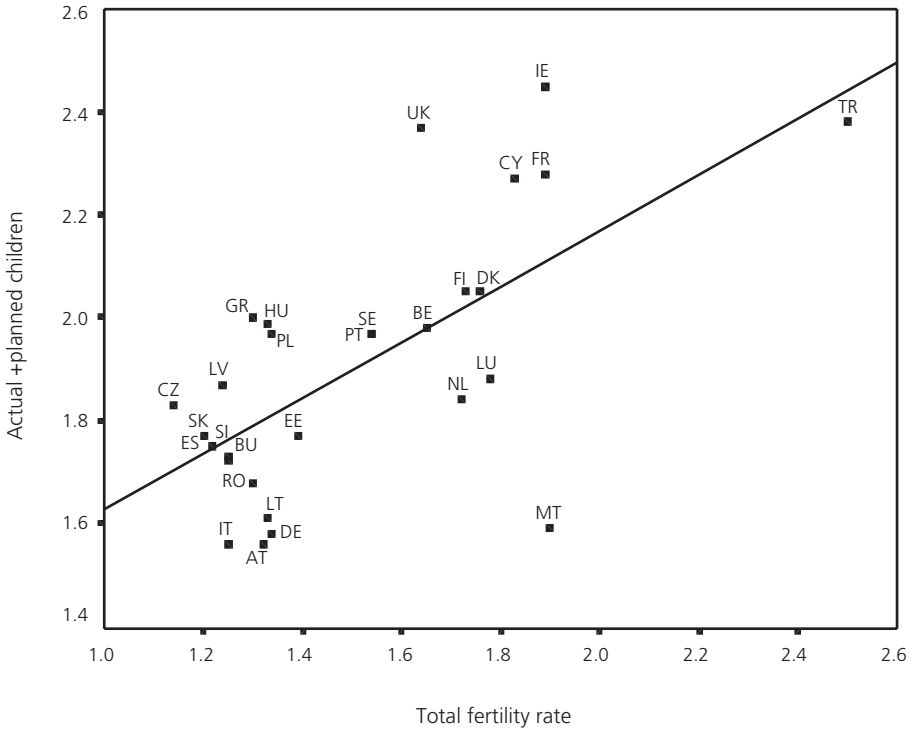
Figure 10 Present children plus planned children among women aged 18-39



Source: CC Eurobarometer 2002 and Standard Eurobarometer 54.2.

The survey data on fertility outcomes presented in this chapter showed that, although below-replacement fertility was common to all countries in the EU 28 bar Turkey, the composition of fertility varied greatly across countries and showed a wide diversity in underlying patterns. Three behavioural elements that had a strong bearing on fertility outcomes – childlessness, average age at birth of first child, and propensity to remain single – differed widely in how they influenced country level mean fertility. In some countries, rising levels of childlessness was an important contributor to overall fertility decline, but in other countries the incidence of childlessness had hardly changed over time and a decline in the incidence of large family sizes was the main cause of fertility decline.

Figure 11 Present plus planned children among women aged 18-39 and total fertility rate by country



Sources: CC Eurobarometer 2002 and Eurobarometer 56.2.Figure 2.1

Looking across countries at the present time, those countries with the lowest fertility rates were not necessarily those with a high level of childlessness; nor were they most likely to show a tendency among women to delay the start of childbearing; nor were they marked by a strong propensity for women to remain single throughout their childbearing years. Rather, fertility outcomes at the country level could be achieved by a wide range of combinations of these factors so that there is no model pattern of either high or low fertility within the range of fertility variation found in Europe today. However, one factor is strongly and consistently related to fertility outcomes at the country level, and this is the degree to which women go beyond the second child and have a third or fourth child.

From the fertility behaviour of younger women as revealed by the present cross-sectional data it is difficult to say whether their eventual completed family size will be higher or lower than that of older women. Their responses to an item on fertility intentions would suggest that, if those intentions were followed through in actual behaviour, average family sizes in Europe would show a marked upward movement over the coming years. However, stated intentions cannot be taken as a reliable guide to future behaviour, so the likelihood of such an outcome is uncertain.

Aspirations regarding fertility 3

In this chapter, we turn to the relationship between fertility outcomes and fertility ideals or desires. Fertility ideals are of interest in themselves since they may influence fertility outcomes, though as we shall see further below, there is little agreement in the research literature on the causal significance of fertility aspirations – or indeed of any other ideal – on people's reproductive behaviour (see also Goldstein et al, 2003). The chapter first describes fertility ideals across the 28 countries, focusing especially on variations by age, since age differences in this area are most obviously relevant to the decline in fertility across age-cohorts.

This chapter then turns to the main issue of interest, which is to assess the degree of mismatch between people's fertility aspirations and what they actually achieve. This concern is followed up in the next chapter where we test the impact of such mismatches on life satisfaction. But first a brief overview of the theoretical literature on the causes of fertility decline in the modern world will help to place the causal significance of fertility aspirations in context.

Causes of low fertility

The United Nations Population Division has commented that 'there exists no compelling and quantifiable theory of reproductive behaviour in low fertility societies' (United Nations Population Division 1999, p. 140). As a result there has been little success to date in providing systematic, coherent explanations for fertility decline over time or for variations in the timing and pace of that decline across countries (Alter, 1992, Chesnais, 1999, Robinson, 1997). However, various theoretical approaches do provide means for ordering analyses of fertility patterns, if only to the extent of identifying the main types of variables likely to have an influence. Economic approaches are particularly useful in this regard. While many dispute that economic factors can give a satisfactory explanation for fertility behaviour, the conceptualisation of the relevant factors used in economics has proved helpful as a way of talking about the issues involved and has gained widespread currency on that account.

Economic approaches to fertility begin by considering fertility outcomes as fundamentally similar to all other economic outcomes in that they represent the interaction between supply and demand. Demand side influences on fertility may be thought of as those factors influencing the number of children that individuals or couples want to have. These include the cost of children, the income available to spend on childbearing and child rearing, and the cultural valuation of children. Supply side influences can be thought of as those which cause couples (or individuals) to have either more or fewer children than they want to have – the factors that cause supply either to undershoot or overshoot demand.

The most generic supply-side factor that causes fertility to overshoot demand is unplanned and unwanted pregnancy where the mother nevertheless decides not to have an abortion and carries the child to term. That factor in itself is quite complex as it involves the interplay of a range of other factors: the level of sexual activity, the use and effectiveness of contraceptive practice, and the use or non-use of abortion.

The most common supply-side process causing fertility to undershoot demand is that associated with couple-formation, as in the case of women who would wish to have one or more children but who are constrained from doing so by an inability or unwillingness to form a marriage or stable

cohabitation. In such instances the formation of a union is likely to be at least partially independent of the demand for children. It is, nevertheless, a threshold that most women would wish to cross before choosing to have children. A health-related inability to conceive or bear pregnancies to term is another form of supply-side constraint.

General explanations for changes in fertility behaviour are hard to find in part because supply and demand factors can combine in a large variety of ways, and quite different combinations sometimes produce quite similar fertility outcomes (Mason 1997). Factors capable of producing fertility decline could arise just as easily on the supply side (such as a fall in the incidence of marriage or an increase in access to contraceptives) as on the demand side (such as an increase in the cost of children or a decline in the cultural valuation of large families). In addition, whether the focus is on demand or supply factors, a further layer of complexity in explaining fertility behaviour arises from the general question of the relative importance of economic versus cultural or ideational influences.

Economic influences

Approaches that emphasise the importance of economic influences tend to focus on the demand side of the equation and especially on the interplay between the economic costs of children and the incomes of households (Robinson 1997). A wide range of factors can affect the cost of children, such as the demand for female labour (as reflected in women's wage rates and employment rates), the cost and availability of child care, the generosity of the tax-benefit system towards families with children, the cost of housing, and so on. Over recent decades in developed countries, factors such as these have generally tended to raise the cost of children and thus depress fertility.

However, income growth can have positive effects on the demand for children as it enables people to cope more easily with the cost of children. The theoretical problems here are, first, that extra income is often devoted to goods or activities other than childbearing; and second, that even if extra income is devoted to children, it is often spent on added investment per child rather than on added children. It is difficult to predict on theoretical grounds which of these options will dominate, so there is considerable ambiguity as to what effects on fertility should be expected of economic factors.

Empirical research does little to clear up this ambiguity since the influence of various economic factors seems to vary. For example, when Becker (1981) formulated his influential theory on the economics of family patterns, he posited a causal relationship between high female employment and low fertility. That relationship seemed to be quite strong in developed countries at the time. In 1970 correlation between the total fertility rate (TFR) and the female employment rate across 21 OECD countries was significant and negative ($r = -0.517$), as Becker's theory would predict. But by 1996 the relationship had turned the other way around and become strongly positive ($r = .714$) (Brewster and Rindfuss, 2000). So by the 1990s the OECD countries with the lowest fertility rates (principally the Mediterranean countries in Europe) also had the lowest rates of female employment. This is a paradoxical finding from an economic theory point of view (for an attempt to grapple with this paradox in the case of Italy, see Bettio and Villa, 1998).

A further question mark over the importance of economic influences arises from the apparently weak effect on fertility rates of generous state benefits for families with children. In a comparative

study of 22 western countries in the period 1970-1990, Gauthier and Hatzius (1997) found that a 25 per cent increase in family allowances would raise fertility rates by only 0.6 per cent in the short term and about 4 per cent in the long term – an effect of the order of 0.07 children per woman on average. This trivial effect is in keeping with the broader paradox that ungenerous welfare provisions in the US co-exist with higher fertility than is found in what has been called the highly pro-natalist Scandinavian welfare states (Demeny, 1999, p. 190; for a somewhat contrary view, see Castles, 1998, pp. 271-78).

Likewise, the dismantling of the welfare state in New Zealand in the period 1985-1995 (Evans et al, 1996) appeared to have little or no negative effect on fertility. Ireland too has relatively poor state provision for families with children but nevertheless has higher fertility than countries with more generous regimes (see, for example, Randall (2000) on levels of state provision of childcare in Europe). While the precise implications of these patterns are uncertain, they are enough to caution against any expectation that pro-natalist government policies can readily succeed in propping up flagging birth rates.

Cultural influences

The difficulty in finding robust empirical support for economic theories of fertility determinants has lent credence to perspectives that emphasise cultural influences (see, for example, Cleland and Wilson, 1987, Lesthaeghe and Surkyn, 1988). These influences can arise on both the supply and demand side of the fertility equation. In studies of the long-term historical decline of fertility, much of the interest in cultural influences arose in connection with the supply side, particularly in connection with contraception (Alter, 1997). These influences included religious prohibitions on the use of contraception as well as lack of knowledge about contraceptive techniques.

In addition, cultural influences can operate on the demand side of the equation, particularly in connection with ideas about the desirability of having children and about ideal family size. While the general importance of such influences on the demand for children is difficult to establish, it seems inescapable in particular cases. So, for example, in the United States, the exceptionally high fertility of the state of Utah (TFR of 2.7 in 1998) is hard to attribute to anything other than the influence of the Mormon religion. Likewise the high fertility of Hispanics in the United States (particularly compared with African-Americans, with whom they would overlap in socio-economic terms) seems to arise in large part simply because Hispanics want more children. According to survey data presented by Ventura et al (2000, p. 16), US Hispanics who had children in 1995 wanted on average 2.7 children, while African-Americans wanted 1.8 and US Caucasians wanted 1.7.

There is a long tradition of research on the relationship between the subjective 'demand' for children (as measured by ideals, preferences, intentions and desires) and fertility behaviour (see, for example, Bongaarts, 2001, Thomson and Brandreth, 1995, Schoen et al, 1999, Freedman, 1980). In Europe, there has been particular interest in the relationship between changing family size aspirations and the decline in fertility to below replacement levels. For long it appeared that the two-child ideal remained quite strong even if actual fertility declined well below that ideal; but the concern has recently been raised that among young adults in some European countries even the two-child ideal is now fading, and is being replaced by preferences for even smaller family sizes (Goldstein et al, 2003). This has given rise to the prospect that value systems among the emerging parental generation in Europe provide little basis for halting, much less reversing, the fertility

declines of recent decades. This chapter looks at differences in family size ideals across countries and across age groups, examines how they relate to differences in childbearing and assesses their implications for future trends in fertility in Europe.

Patterns of fertility ideals

This brings us to the first substantive concern of this chapter, which is to examine respondents' fertility ideals. As mentioned earlier, two sets of variables are available for this purpose, the first of which relates to respondents' current fertility aspirations and the second to the number of children they wanted when they were aged 20. The first of these sets of variables is dealt with here and the second later in the chapter.

In the present survey sources, two questions on fertility ideals were included:

> Q8: Generally speaking, what do you think is the ideal number of children for a family?
>
> Q9: And for you personally, what would be the ideal number of children you would like to have or would like to have had?

The second of these two items is the more clear-cut since it unambiguously relates to the respondent's personal family size aspirations. For that reason it is the one focused on here.

Fertility ideals by age and gender

Tables 4 and 5 compare mean personal family size ideals across three age groups of women and men (under 35, 35-54 and 55 or over) in the 28 countries. The data confirm that ideal family size is in general decline: family size ideals are smaller among the youngest age group of women than the oldest, in all countries bar France. Here, quite exceptionally, younger women have slightly larger family size aspirations on average than older women. Among men, there are no exceptions: the decline in fertility ideals is found in all countries. Generally speaking, patterns of decline differ little by gender. Men have slightly lower ideal family sizes than women, but the difference is slight.

The widest differences in family size ideals are found in those countries, of which Cyprus and Ireland stand out, where older women had the largest ideal family sizes. These are the only two countries where the difference in the ideal family size between the oldest and youngest age group exceeds one. Taking the weighted means of the AC 10 and EU 15, there is little difference either in the levels or extent of decline in family size ideals between these two regions of Europe.

The extent of the decline in family size ideals is not so great that the two-child ideal has generally been abandoned among younger women, though that has occurred in some countries (see Goldstein et al, 2003, for similar findings). Among 18-34 year old women, five of the 28 countries show mean ideal family sizes below two (the Czech Republic, Romania, Malta, Austria and Germany). At the other extreme, three countries – France, Ireland and Cyprus – have family size ideals among younger women that exceed 2.5. Overall, the means for the ACC 13 and EU 15 indicate that even among women aged 18-34, the average ideal family size still exceeds two.

Figure 12 presents finer age-gradations of the same variable for women based on the aggregated samples for the EU 15 and the AC 10. The purpose here is to test if the decline in fertility

aspirations is really as consistent across age groups as the quite broad age-classification used in Table 4 might suggest; and to see in particular if there is any sign of the decline in fertility ideals bottoming out as we get to the youngest age group of women (sample size restrictions prevent us from conducting this analysis at country level).

Table 4 Family size ideals among women aged under 35, 35-54 and over 55 years

	Age group			Difference*: under-35s - 55+
	under 35	35-54	55+	
	Average ideal number of children			
AT	1.72	1.92	2.41	-0.69
BE	2.19	2.22	2.42	-0.23
BG	2.06	2.03	2.15	-0.09
CY	2.52	3.08	3.77	-1.25
CZ	1.97	2.17	2.3	-0.33
DK	2.44	2.37	2.57	-0.13
EE	2.15	2.23	2.16	-0.01
FI	2.46	2.49	2.85	-0.39
FR	2.56	2.54	2.46	0.1
DE	1.74	1.98	2.13	-0.39
EL	2.28	2.58	3.03	-0.75
HU	2	2.26	2.25	-0.25
IE	2.58	2.83	3.68	-1.1
IT	2.12	2.27	2.63	-0.51
LV	2.03	2.19	2.38	-0.35
LT	2.05	2.19	2.43	-0.38
LU	2.02	2.39	2.33	-0.31
MT	1.85	1.98	2.58	-0.73
NL	2.08	2.28	2.6	-0.52
PO	2.14	2.28	2.63	-0.49
PT	2.03	2.52	2.57	-0.54
RO	1.85	2.09	2.33	-0.48
SK	2.09	2.27	2.38	-0.29
SI	2.02	2.22	2.48	-0.46
ES	2.07	2.38	2.6	-0.53
SE	2.44	2.5	2.51	-0.07
TR	2.17	2.46	2.24	-0.07
UK	2.44	2.47	2.67	-0.23
EU 15	2.17	2.31	2.49	-0.32
AC 10	2.08	2.26	2.46	-0.38
CC 3	2.11	2.32	2.26	-0.15
Total	2.14	2.31	2.47	-0.33

* Negative values indicate that family size ideals are lower among women aged under 35 than among women aged 55+
Q9: 'And for you personally, what would be the ideal number of children you would like to have or would like to have had?'

Table 5 Family size ideals among men aged under 35, 35-54 and over 55 years

	Age group			Difference*: under-35s - 55+
	under 35	35-54	55+	
	Average ideal number of children			
AT	1.74	1.81	2.16	-0.43
BE	1.92	1.93	1.97	-0.05
BG	1.95	2.09	2.09	-0.14
CY	2.49	3.16	3.53	-1.04
CZ	1.82	1.95	2.14	-0.32
DK	2.32	2.16	2.55	-0.23
EE	2.14	2.34	2.45	-0.31
FI	2.14	2.24	2.47	-0.33
FR	2.24	2.25	2.46	-0.22
DE	1.31	1.67	2.00	-0.69
GR	2.34	2.56	3.07	-0.74
HU	1.98	2.32	2.31	-0.33
IE	2.31	2.76	3.36	-1.05
IT	2.26	2.08	2.33	-0.07
LV	1.96	2.18	2.19	-0.23
LT	1.96	2.26	2.33	-0.36
LU	2.05	2.28	2.09	-0.04
MT	2.19	2.25	2.47	-0.28
NL	2.05	2.17	2.43	-0.38
PL	2.01	2.28	2.52	-0.51
PT	2.11	2.34	2.52	-0.40
RO	1.85	2.13	2.21	-0.36
SK	2.01	2.26	2.55	-0.55
SI	2.26	2.23	2.37	-0.11
ES	2.08	2.10	2.53	-0.46
SE	2.27	2.50	2.38	-0.11
TR	2.38	2.67	2.62	-0.24
UK	2.38	2.27	2.53	-0.15
EU 15	2.17	2.31	2.49	-0.32
AC 10	2.08	2.26	2.46	-0.38
CC 3	2.11	2.32	2.26	-0.15
EU 28	2.14	2.31	2.47	-0.33

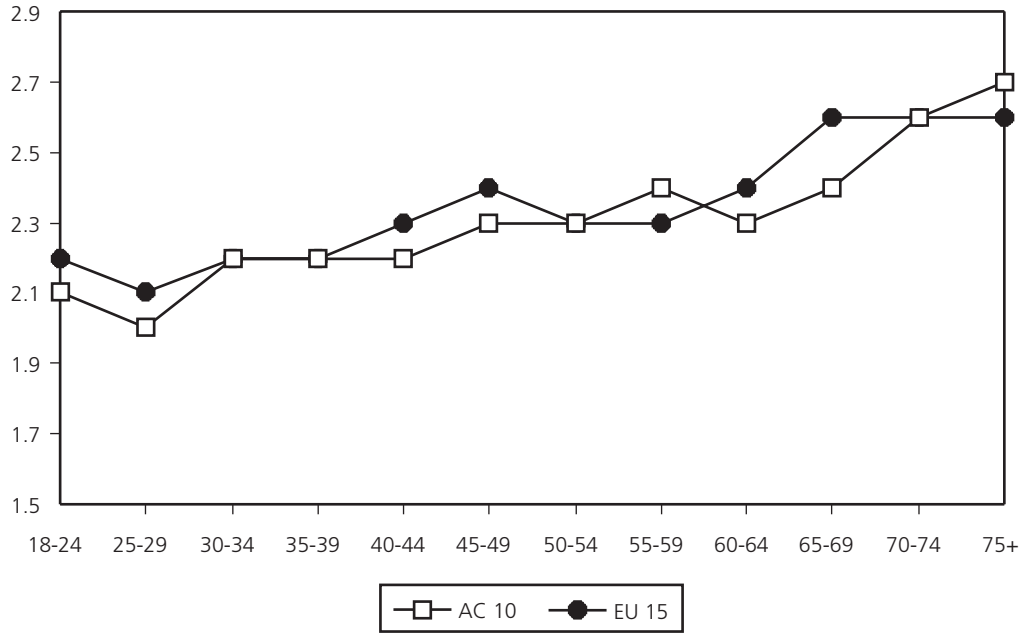
* Negative values indicate that family size ideals are lower among women aged under 35 than among women aged 55+

Q9: 'And for you personally, what would be the ideal number of children you would like to have or would like to have had?'

The trend lines confirm the broad downward movement in fertility ideals across age groups but also show that the movement is not entirely even. There is some up and down fluctuation around the broad trend. There is also an interesting twist to the movement among the youngest age groups: fertility aspirations are at their lowest among those aged 25-29, while the very youngest group – those aged 18-24 – have slightly larger ideal numbers of children. Whether this indicates the

beginning of an upturn in the family size ideals among young people or whether it is simply another transient fluctuation is not possible to say.

Figure 12 Family size ideals among women by five-year age group, EU 15, AC 10 and CC 3



Sources: CC Eurobarometer April 2002; Standard Eurobarometer 54.2

Table 6 explores this issue further by looking at the percentages of younger and older women who state that the ideal number of children for them is 'none' or 'one', and who therefore are at one extreme of the distribution in ideal family size. The percentages of either younger or older women who give 'none' as their ideal number of children are for the most part small – generally less than 5 per cent. These proportions are much smaller than the proportions of women who go on to have no children, as described in the previous chapter. There are three countries (Germany, Austria and the Netherlands) where more than 10 per cent of younger women give this preference, and a fourth (Belgium) is just under 10 per cent. Yet even in these cases childlessness as an ideal seems to be much less common than childlessness as a reality (c.f. Pearse, 1999, who shows, in a number of European countries, that the level of childlessness is in the range 10-20 per cent in most cases and is nowhere less than 5 per cent).

Fertility ideals and actual childbearing

In order to check on the possible influence of ideals of family size on achieved family size, we can look at the relationship across countries between mean stated family size ideals and the actual level of childbearing. We can do this first in the case of women with completed fertility (the women included in this category for present purposes are aged 40-64 and, among those aged under 50, those who have stated that they plan to have no more children). Figures 13 and 14 compare ideal family size and present childbearing among these women, using their own reports of the number of children they have had as the measure of actual childbearing. In general the results show that ideals and actuality are quite closely related to each other at the country level, although there are a number of exceptions.

Table 6 Percentages of women in age-group 18-34 and 55 and over with 'none' or 'one' as ideal number of children

%

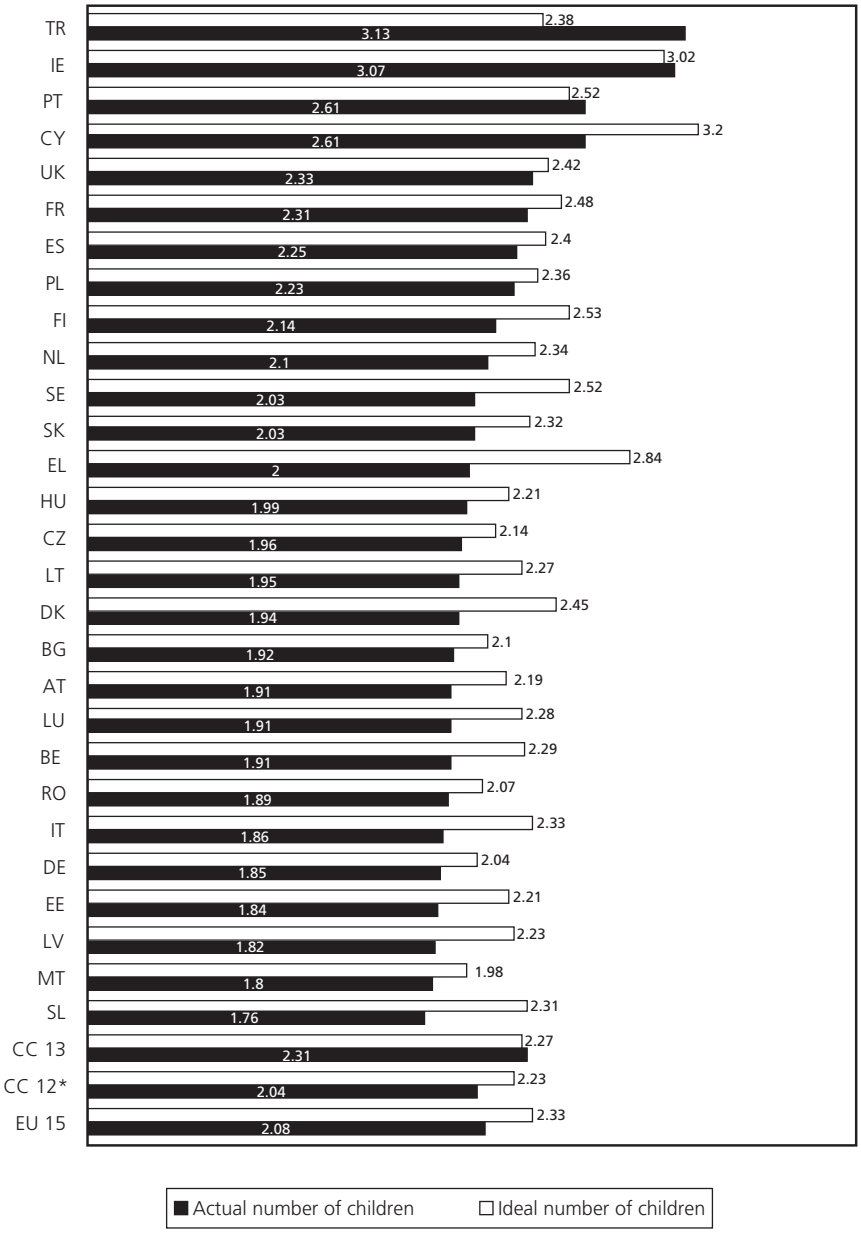
	Age group 18-34		Age group 55 and over	
	Ideal number of children			
	None	One	None	One
DE	16.6	19.1	5.0	12.8
AT	12.6	14.0	6.1	9.9
NL	12.2	3.3	5.7	4.3
BE	9.4	10.6	5.5	12.6
LU	6.2	10.9	4.4	11.7
CZ	5.2	14.4	1.0	7.9
IE	4.8	3.6	3.4	1.7
FI	4.3	9.3	3.3	6.5
HU	4.1	11.7	1.4	5.3
PO	4.1	9.9	1.6	6.6
ES	3.9	12.2	3.9	6.5
IT	3.8	8.4	2.4	7.4
PT	3.7	15.4	2.3	13.2
FR	3.7	7.0	3.9	8.1
UK	3.5	6.9	3.6	3.4
EL	3.4	6.8	0.6	1.5
SI	3.4	12.8	1.3	5.2
RO	3.1	19.6	2.1	8.5
SE	3.1	4.0	1.5	5.9
LT	2.2	13.7	2.2	6.1
DK	2.0	5.8	1.6	4.6
SK	2.0	13.7	1.3	5.3
LV	1.9	15.4	1.8	8.1
MT	1.9	15.2	5.8	8.3
CY	1.8	3.6	0	0.6
EE	1.5	14.5	4.0	8.0
TR	0.8	12.0	0	5.5
BG	0	12.6	0.8	7.8
ACC 13	1.7	14.7	1.1	7.5
EU 15	5.5	12.2	2.9	8.2

Source: CC Eurobarometer 2002 and Eurobarometer 54.2.

As Figure 13 shows, Turkey, Ireland and Portugal were the top three countries as far as number of children born are concerned, and were also the only countries where the mean number of children born exceeded the mean ideal number of children – though the gap between the two was much wider in Turkey than in either Ireland or Portugal. In all other countries birth outcomes on average fell short of the ideal family size, though the extent of the shortfall varied by country. It was widest in Greece, where the ideal was 2.84 and the actual number of children born was 2.0. It was narrowest in the UK, where the ideal was 2.42 and the actual was 2.33.

Looking at the weighted means for the CC 3, the impact of Turkey (which, with 65 million population, accounts for 38 per cent of the total CC 3 population) is evident. For the ACC 13 the mean number of children born (2.31) slightly exceeds the mean ideal family size (2.27), but when Turkey is excluded (ACC12), the actual number of children born drops to 2.07 and is below the mean ideal number of children (2.23). The picture for the EU 15 is similar to that for the ACC12, again confirming that, excluding the case of Turkey, there is no consistent east-west difference in these aspects of fertility.

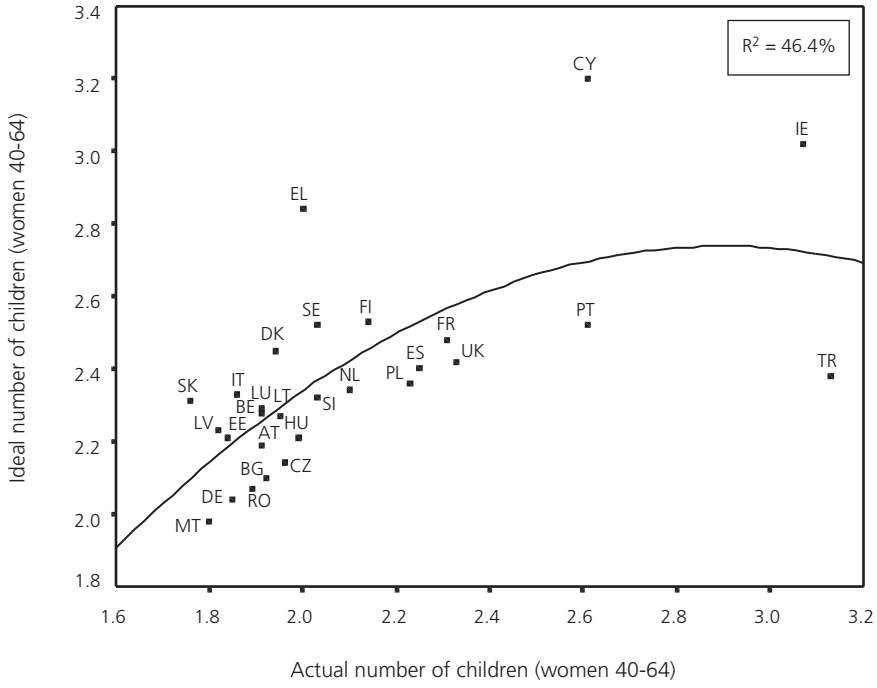
Figure 13 Present and ideal number of children among women with completed fertility (aged 40-64)



* excluding Turkey

Sources: CC Eurobarometer 2002 and Eurobarometer 54.2.

Figure 14 Average ideal number of children and average actual number of children among women with completed fertility (40-64)



Sources: CC Eurobarometer April 2002; Standard Eurobarometer 54.2

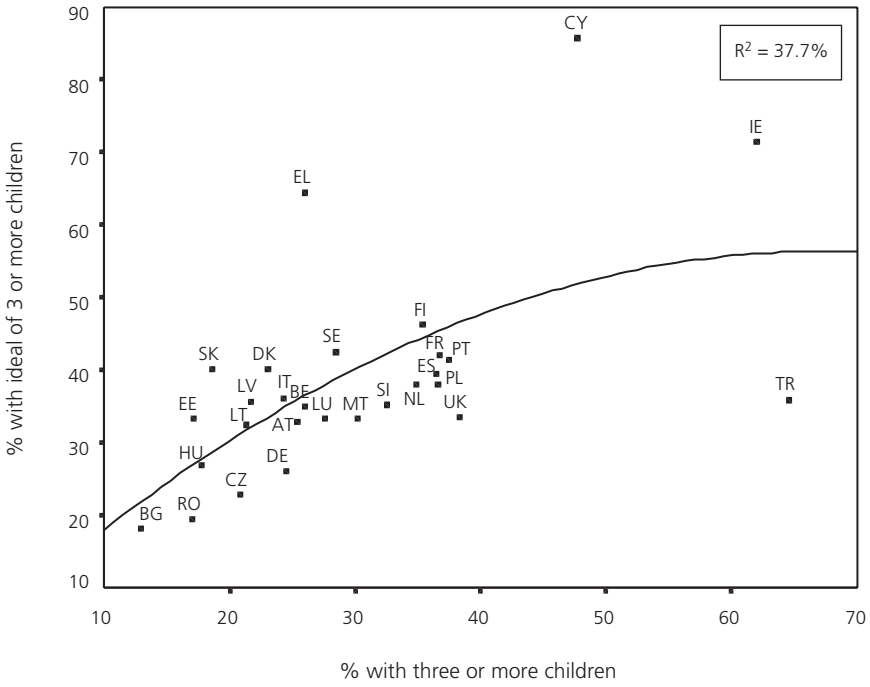
Figure 15 expands on these patterns further by showing the relationship at country level between large family ideals and large family outcomes. It presents a scatter plot of the percentages of women with completed fertility whose ideal number of children was three or more and whose actual number of children was also three or more. In most countries, substantial minorities of women had ideal family sizes of three or more while significantly smaller minorities actually achieved that ideal. Greece, Cyprus and Ireland were the only countries where more than half of women had such an ideal, and Ireland was the sole country where well over half of women attained that ideal (though Cyprus was not far behind). Again the anomalous position of Turkey stands out: only a minority of women in that country (about one third) had an ideal family size of three or more but a clear majority (almost two thirds) had actual numbers of children at that level.

A further perspective on the relationship between ideals and reality, as far as childbearing is concerned, can be obtained by examining the correlation between family size ideals and period fertility measures among women still in their childbearing years. This is done in Figure 16, which plots mean ideal family size among 18-34 year olds in each country against the total fertility rate (TFR) in 2000 (the latter indicator being derived from national birth registration data for each country). The age groups of women covered by these two indicators do not match exactly but nevertheless they can both be taken as roughly representative of women of childbearing age.

The patterns suggest that at the country level there is some relationship between family size ideals and actual levels of childbearing, but the relationship is looser than was the case for older women just looked at (a quadratic regression produces a fit of 30.7% between the two variables). Germany and Austria, the countries with smallest family size ideals and the largest proportion of young

women who state that their ideal is to have no children, are well up the table of 28 countries when it comes to the actual fertility rate (Germany is fourteenth from the bottom and Austria is tenth from the bottom in TFRs). Although the TFR for Turkey shows a decline in fertility over time, it is still relatively high compared with other countries. Among younger women it is the only country where the mean ideal family size among young women is lower than the actual fertility rate.

Figure 15 Percentages of women with completed fertility whose ideal number of children and actual number of children is three or more



Sources: CC Eurobarometer April 2002; Standard Eurobarometer 54.2

Attainment of fertility ideals

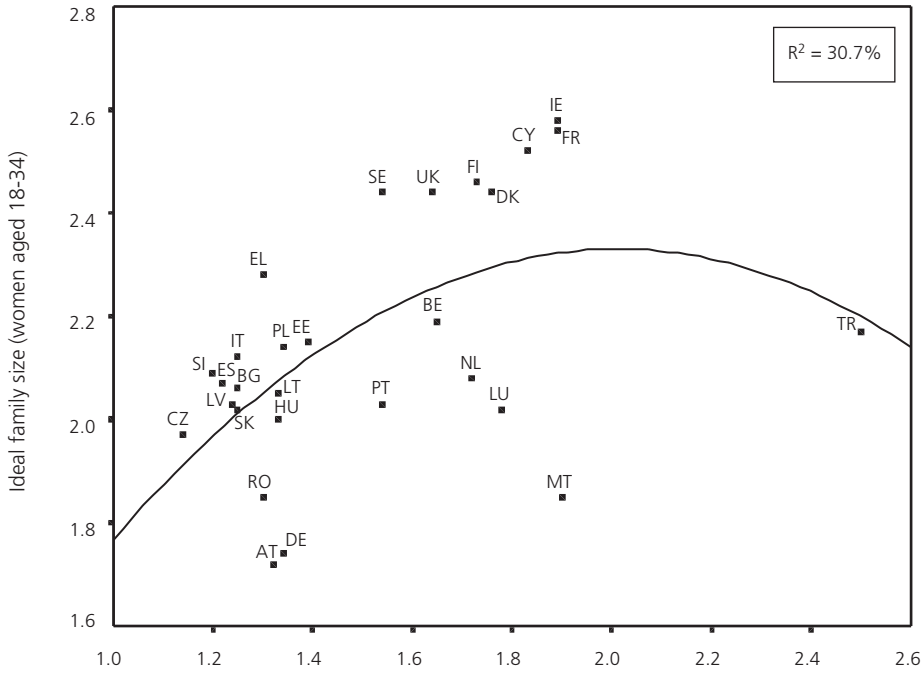
As we have just seen, the general pattern in Europe both among younger and older women is that the number of children women would regard as ideal for themselves is on average higher than the number they actually give birth to. However, these patterns relate to averages and we also need to examine the distributions around these averages – how many women have actual births that fall below the ideal, match the ideal or exceed the ideal. Figure 17 summarises these distributions with reference to women with completed fertility in the age group 40-64 (more detailed data underlying this graph are presented in Table 7).

In the majority of European countries, fertility ideals were fully met for between half and two thirds of women aged 40-64, which means that the balance of women among whom fertility ideals were not met, or were only partially met, amounted to significant minorities. Turkey is an exception, in that only one third of women had the number of births that they regarded as ideal for themselves.

In most cases, as we would expect from findings already presented, under-attainment of family size was the main form of non-fulfilment of fertility ideals: women had fewer children than their ideal.

Greece had particularly high levels of such under-attainment (56 per cent) and Turkey had particularly low levels (15 per cent). In some countries with especially low fertility (such as Spain), the proportion of women whose number of children fell below their ideal was not especially large.

Figure 16 Average ideal family size among women aged 18-34 and actual total fertility rate in 2000



Sources: CC Eurobarometer April 2002; Standard Eurobarometer 54.2, Eurostat 2002.

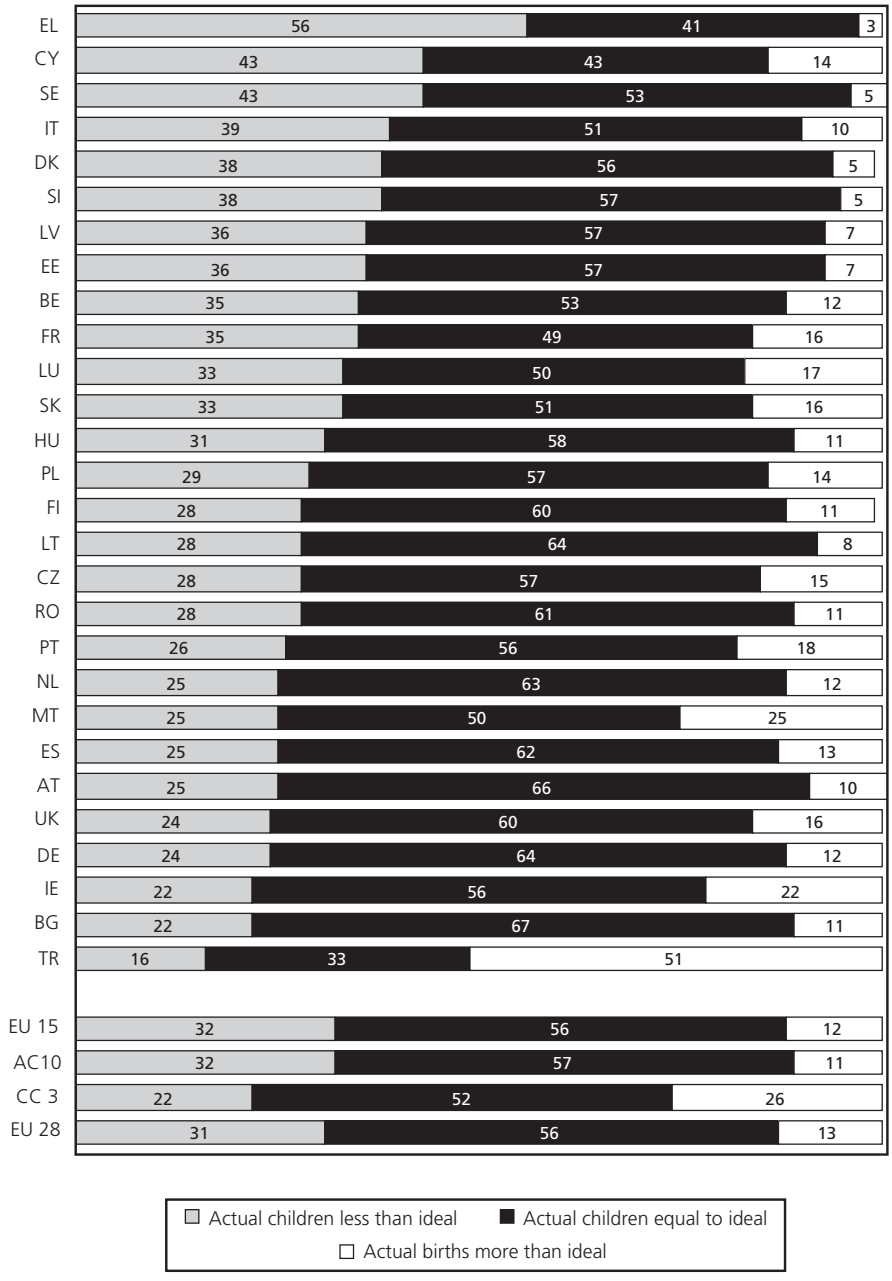
Alongside such under-attainment of family size, there were also significant levels of what might be called over-attainment or excess fertility, that is, where women had more children than their ideal. In most countries, between 10 and 20 per cent of women aged 40-64 had excess fertility in this sense. Again, Turkey was an exception: here excess fertility was the most common situation and was present among half of women, which was three to four times the level of excess fertility found in most other countries.

Figure 18 presents the same analysis for men. This shows that at the broad regional level the patterns for men are similar to those for women, though there are some differences at the country level. In Sweden, for example, only 29 per cent of men had fewer children than their ideal, compared with 43 per cent of women (so Sweden ranks in third place in Figure 17, but in eighteenth place in Figure 18). In Poland the contrast was the other way around: 39 per cent of men had fewer children than their ideal compared with 29 per cent of women. In general, however, the distributions in the graphs in Figures 17 and 18 are remarkably similar, at least at the level of the EU 15, AC 10, CC 3 and EU 28.

These findings throw important additional light on the meaning of family size ideals and the implications they have for fertility outcomes. They indicate that the widespread shortfall in fertility attainment compared with fertility ideals, noted earlier, is in fact an average outcome that combines some over-attainment with more extensive under-attainment. The composition of this average and

the way it varies over time and across social categories is central to a proper understanding of the actual-ideal fertility gap. It also means that if women were enabled to achieve a greater degree of fulfilment of their family size ideals, the consequences for actual childbearing levels would not all work in the direction of raising the fertility rate. In those circumstances, some women would increase their childbearing in line with their ideals, but others would reduce their childbearing and so the net effect on the level of childbearing could be slight.

Figure 17 Relationship between actual number of children and ideal number of children among women with completed fertility (aged 40-64)



Note: Countries ordered in descending importance of 'actual children less than ideal'.
Sources: CC Eurobarometer April 2002; Standard Eurobarometer 54.2.

Table 7 Difference between ideal number of children and actual number of children among women with completed fertility (aged 40-64)

%

	Difference between ideal and actual number of children (negative values indicate actual lower than ideal)						
	-3 or more	-2	-1	0	1	2	3 or more
BG	1.1	4.3	18.5	66.3	8.7		1.1
CY		16.7	33.3	50.0			
CZ	0.8	2.5	24.6	56.8	13.6	1.7	
EE		8.3	25.0	66.7			
HU	0.7	6.5	23.0	59.0	7.9	1.4	1.4
LV	4.0	8.0	24.0	60.0	4.0		
LT	2.7	5.4	21.6	64.9	5.4		
MT			33.3	66.7			
PL	1.1	10.5	16.6	57.6	7.0	4.8	2.4
RO	0.9	10.8	16.0	61.0	3.0	6.1	2.2
SK	1.9	14.8	14.8	51.9	9.3	5.6	1.9
SL	9.1	9.1	22.7	54.5	4.5		
TR	2.1	3.6	8.8	33.2	24.4	17.4	10.6
BE	4.3	6.5	23.7	53.8	7.5	2.2	2.2
DK	1.9	9.6	25.0	57.7	5.8		
DE	3.6	5.3	14.9	64.8	6.1	3.6	1.8
EL	5.5	17.4	33.0	41.3	0.9	0.9	0.9
IT	2.9	8.6	26.0	52.4	7.2	2.2	0.5
ES	4.1	5.7	14.4	62.6	7.0	3.3	3.0
FR	3.1	6.4	23.2	50.1	9.7	5.6	1.9
IE	4.3	4.3	13.0	56.5	8.7	4.3	8.7
LU		16.7	16.7	50.0	16.7		
NL	3.3	6.7	15.3	62.7	5.3	5.3	1.3
PT	2.0	7.1	16.3	56.1	8.2	4.1	6.1
UK	5.8	4.6	14.3	59.9	5.2	6.6	3.7
FI	5.9	5.9	15.7	60.8	7.8	2.0	2.0
SE	3.5	11.8	25.9	54.1	2.4	2.4	
AT	4.3	7.1	14.3	65.7	5.7	1.4	1.4

Sources: CC Eurobarometer April 2002; Standard Eurobarometer 54.2

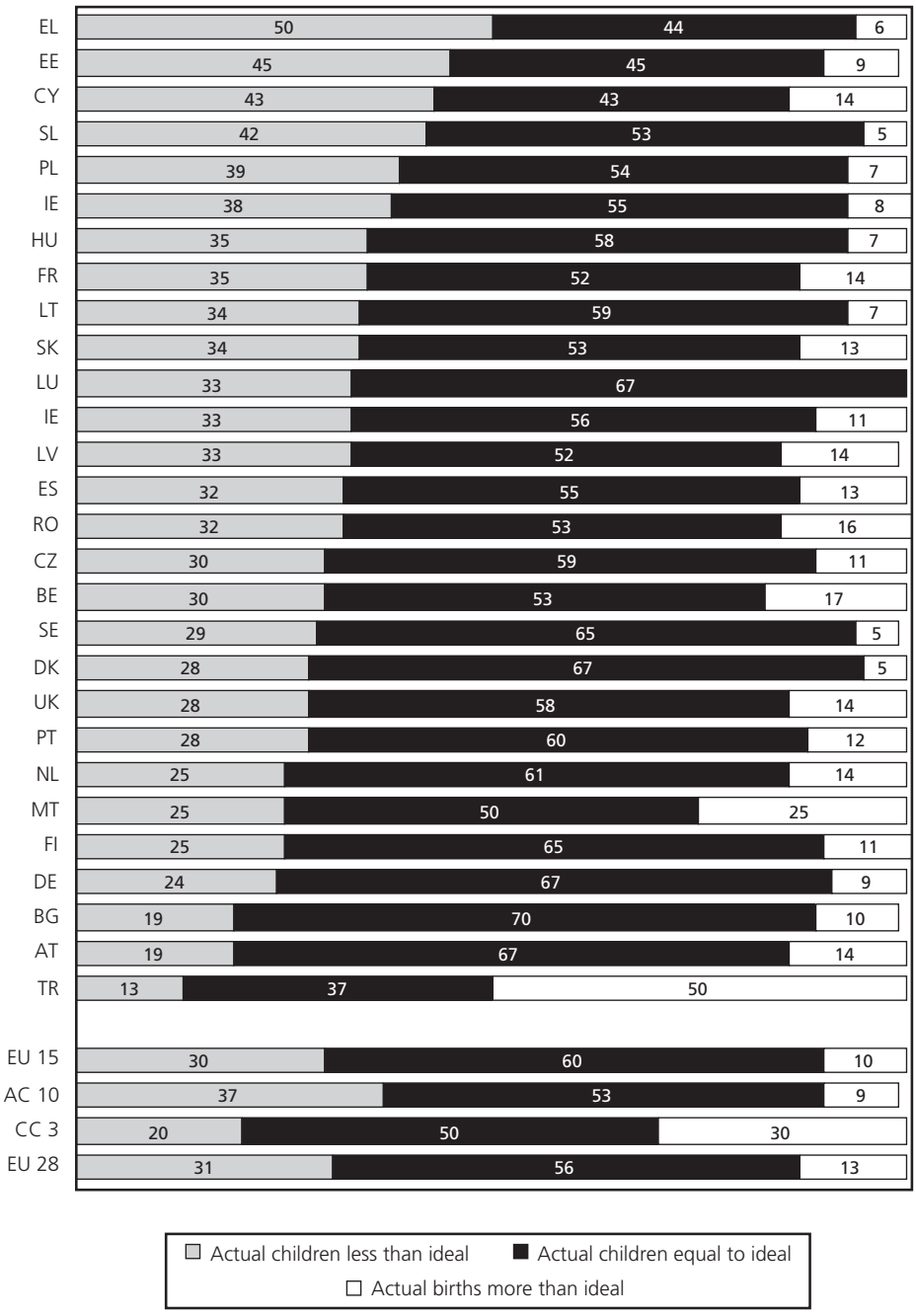
Fertility aspirations of young women

This section looks at the second set of variables that can be used to measure the extent to which respondents fulfil what they want by way of number of children. These variables are available only for the AC 10 and CC 3 so the following paragraphs refer only to those countries.

The variables are based on a sequence of three questions posed to respondents aged 25 and over. The first of these asked respondents to think back to when they were aged around 20 and say how many children they wanted to have at that time. Those who answered with a number greater than one were then asked if they had all the children they wanted, more than they wanted or less than

they wanted at age 20. (Those who said they wanted none in response to the first question were not asked this question). A third question then followed for those who said they had fewer children than they had wanted at age 20. They were asked for the reasons why they had fewer children than they wanted and shown a card with a list of possible reasons from which they were asked to pick the top three.

Figure 18 Relationship between actual number of children and ideal number of children among men with completed fertility (aged 40-64)



Note: Countries ordered in descending importance of 'actual children less than ideal'
Sources: CC Eurobarometer April 2002; Standard Eurobarometer 54.2.

These variables, taken together as a means of measuring fertility fulfilment, differ from those just looked at in the previous section in a number of ways. Firstly, the benchmark of desired fertility to which they refer is located in the past (when the respondent was aged 20) rather than the present. Thirdly, the respondent is asked directly whether there is a shortfall between (present) reality and (past) desire, whereas with the variables used above this shortfall was derived by comparing the respondent's ideal with the respondent's outcomes. And finally, an important additional item of information is sought: in the case of respondents who said they now had fewer children than they had wanted at age 20, the reasons they give for the shortfall are asked for. These features in the present set of variables mean that they provide an approach to measuring fertility fulfilment that adds a new piece of information: that is, people's subjective perception of the reasons that deterred them from fulfilling their fertility ideals.

We look first at the numbers of children respondents aged 25 and over wanted when they were aged 20. As Table 8 shows, the modal desired family size was two, for both males and females. Males were somewhat less clear on this question than females: more than a quarter of males were in one of the 'don't know' or 'didn't think about it' categories compared with about 18 per cent of females. Furthermore, males were more likely to say they had wanted no children at age 20 than females, and this again may partly be taken to mean that they were less likely to have thought seriously about the question. However, taking those who provided a definite response, the difference between males and females was slight, with a mean desired number of children among males of 1.99 and among females of 2.02.

Table 8 Number of children desired at age 20 in ACC13

%

	Male	Female	All
None	12	8	10
One	8	13	11
Two	35	45	40
Three	12	12	12
Four	3	4	3
Five	2	1	1
Six	1	0	1
More than six	2	0	1
Wanted children, but did not know how many	5	5	5
Did not think about it	17	10	13
Don't know	3	3	3
Total	100	100	100
Average*	1.99	2.02	2.0
Total number	11,690	12,982	24,672

Question: Q10 (Ask all age 25+): Thinking back to when you were around 20 years old, how many children did you want to have then?

* Excluding 'did not think about it', 'don't know' etc.

Source: CC Eurobarometer 2002.

Table 9 takes up the issue of primary concern here: the degree to which respondents felt they had attained the number of children they had wanted at age 20. Responses to this question seemed to be least likely to be confounded with other issues in the case of those who felt their childbearing was complete (and who were, therefore, referring to what they expected would be their permanent situation, rather than a temporary state that would change when their next child came along). So the data in Table 9 apply to those aged over 25 who, in response to a separate question later in the questionnaire, said they planned to have no more children. The data are classified between AC 10 and CC 3, largely in order to separate out the effect of Turkey (which dominates in the CC 3 and which, as we saw earlier, has exceptional fertility characteristics).

Table 9 Fulfilment of fertility aims, by gender, in AC 10 and CC 3

%

	Male	Female	All
AC 10			
Yes, had all I wanted	48	48	48
Yes, had even more that I wanted	14	16	15
No	38	36	36
DK/no opinion	1	1	1
Total	100	100	100
Total number	1,514	2,654	4,168
CC 3			
Yes, had all I wanted	48	48	48
Yes, had even more that I wanted	28	31	30
No	24	21	22
DK/no opinion	0	0	0
Total	100	100	100
Total number	744	1,003	1,747

Question: Q11 (Ask if 1 or more in Q10). Have you had all the children you wanted to have when you were aged 20?
Note: Data relate to those aged 25+ who stated that they planned to have no more children.
Source: CC Eurobarometer 2002

This measure of fertility fulfilment differs (in the ways already mentioned) from the 'fertility ideals' measure referred to earlier. It also covers a broader age range in the population. Yet it shows results that are not widely dissimilar to those for the 'fertility ideals' measure. In the AC 10 the proportion who had either more or fewer children than they wanted was slightly higher than in the fertility ideals measure for the same region, while the proportion that had attained the number of children they wanted was slightly lower.

Reflecting the influence of Turkey, the CC 3 had quite a high incidence of those who had more children than they wanted, and a relatively low incidence of those who had fewer children than they wanted; but this too was similar to the patterns for the same region found in the 'fertility ideals' measure. So these measures confirm that, while the majority of people have the number of children they want, there are sizeable minorities (of about one third on average, if Turkey is excluded) who have fewer children than they want and smaller but still significant minorities (of around 15 per cent) who have more children than they want.

The final item in this sequence of variables focuses on those who said, in response to the previous item, that they had fewer children than they wanted. It asks them to give reasons why they thought this had happened. The format of the question was such that respondents could pick up to three reasons from a list of twelve. Most respondents who answered mentioned either one or two reasons, so the number of mentions is about one-and-a-half times the number of respondents. Table 10 takes all the mentions of all the items and shows how frequently each of the reasons appeared in the total.

Table 10 Reasons for not having had all the children wanted at age 20 in ACC 13

Reason	Male	Female	All
		% of mentions	
Health problems	6.4	18.3	13.6
Partner's health problems	9.9	3.5	6.0
Problems with partner	12.2	13.5	13.0
Financial problems	16.8	14.3	15.3
Partner's financial problems	1.9	3.0	2.6
Difficulty combining work and family (lack of nurseries, etc.)	7.0	7.1	7.1
Accommodation difficulties	13.2	10.6	11.6
Cost of children too high	9.8	9.2	9.4
Could not find the right time	7.6	5.2	6.1
Changed my mind about how many children I wanted to have	6.0	6.1	6.0
Other	8.7	8.7	8.7
Total	100.0	100.0	100.0
Total reasons mentioned	1,308	1,975	3,284
Valid cases	730	1,132	1,862
Missing cases	59	55	114

Question: Q11a (Ask of those answering no to Q.11). Why not?
Source: CC Eurobarometer 2002

Looking first at women's responses, health and relationship factors (own health, partner's health, and problems with partner) account for about one third of the reasons mentioned for not having had as many children as they wanted at age 20. Financial problems are less prominent among women than health problems, but when a number of other factors that are closely related to financial problems are taken into account, such as the cost of children being too high and problems with accommodation, one could say that obstacles of a broadly economic character make up the most important cluster of reasons.

Is the gap between aspirations and reality widening?

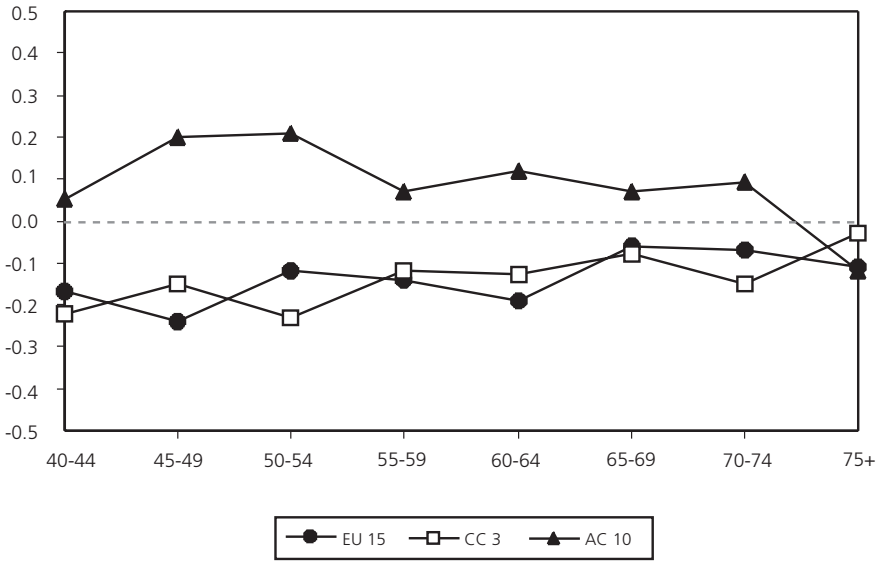
We have already seen that ideal family size has declined over the past half-century in Europe, and that this decline is likely to be at least one of the causes of the general fall in birth rates that has occurred over the same period. We have also seen that actual family sizes on average fall short of people's ideals. This section now looks at the possibility that the gap between ideal and actual fertility has widened over time. This question is of interest since, in addition to decline in ideal family sizes, a further negative influence on birth rates could arise from a widening of the gap

between ideal and actuality, perhaps as a result of the affordability pressures referred to earlier. To the extent that this were so, today's very low birth rates could be seen as the outcome of a double process of decline: firstly, people wanting fewer children and, secondly, perhaps becoming less successful in attaining even those lower numbers.

To test if this widening of the gap between ideal and actuality has occurred, a synthetic time trend can again be obtained by means of cross-sectional comparisons across age groups. As before, the focus is on women with completed fertility (that is, who are either aged over 50 years, or are aged 40-49 years and have said they intend to have no further children). The age groups compared run from 40-44 years up to 75 years and over. Interpreted as a synthetic time trend, this cross-sectional comparison relates to women who completed their child-bearing over most of the second half of the twentieth century.

Figure 19 presents a summary measure of the ideal-actual gap across age groups for the EU 15, the AC 10 and the CC 3 (because of sample size limitations, it is not possible to present this analysis at country level). This measure is arrived at by subtracting the mean ideal family size from the mean actual family size for each age group. Positive values indicate that the actual number of children exceeds the ideal; negative values indicate that the actual number of children falls short of ideal.

Figure 19 Age comparisons in the difference between average ideal and average actual number of children among women with completed fertility



Computation: Means of Q12 ('How many children have you had?')-Q9 ('And for you personally, what would be the ideal number of children you would like to have or would like to have had?'). Positive values indicate that actual number of children exceeds ideal; negative values indicate that actual number of children falls short of ideal.
Sources: CC Eurobarometer April 2002; Standard Eurobarometer 54.2

The results show, first, that the situation of the CC 3 is quite different from that of the EU 15 or the AC 10: actual family sizes exceed the ideal across all age groups in the CC 3 and fall short of the ideal across all age groups in the EU 15 and AC 10. This result is as we would expect, given the dominance of Turkey in the data for the CC 3 and the pattern we noted earlier for Turkey (where,

in contrast to all other countries, the majority of women have more children than they think ideal for themselves).

Setting aside the exceptional case of Turkey and focusing on the EU 15 and AC 10, we find from Figure 19 that the shortfall between actuality and ideal in those regions does seem to widen slightly, but not consistently, as we move from the oldest to the youngest age groups. The shortfall is nowhere very large (the maximum value of the difference is -0.24, which arises among women aged 45-49 in the EU 15). Roughly speaking it is about twice as large among women aged under 50 as it is among women aged 65 and over, though the difference is less marked at some ages than others.

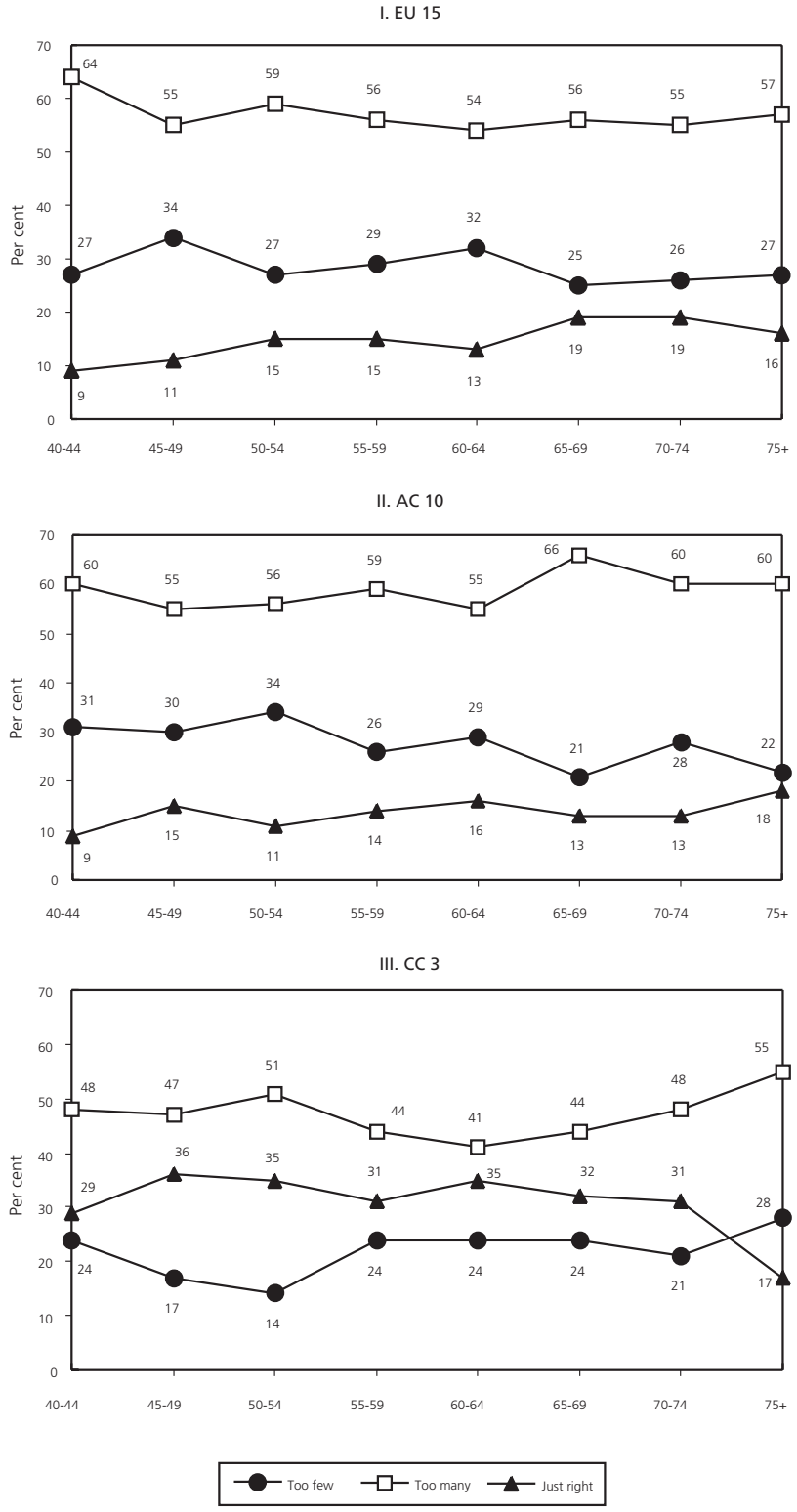
Taking this finding at face value, it would seem to confirm that in spite of the decline in family size ideals across age groups noted earlier, younger women are having somewhat greater difficulty achieving their family size ideals than older women, and that perhaps this is a contributor to fertility decline in recent decades. This in turn could be taken to support the idea outlined earlier that affordability constraints are posing increasing restrictions on women's capacity to have the number of children they would want.

However, a closer look at the data indicates that such an interpretation oversimplifies the patterns involved. The point to recall here is that, relative to their own ideal family sizes, women can have too many as well as too few children; and that any measure of the ideal-actual gap in fertility is a composite of under-attainment, over-attainment and 'just right' attainment of fertility ideals. Figure 20 looks at age comparisons in each of these three components separately. Looking first at Panel I in Figure 20, which relates to the EU 15, we find that despite the widening ideal-actual fertility gap across age groups just noted, the proportion of women who attain 'just right' fertility outcomes is more or less the same across all age groups: there is no decline in the proportion of women who have achieved their personal fertility ideals as we move from the oldest to the youngest age groups.

We can also see that, for the 'too few' outcome, there is some fluctuation from one age group to the next but again there is no consistent trend either up or down: there is no consistent increase in the proportion of women whose actual fertility outcomes fall short of their ideals. It is only in connection with the third component – the 'too many' fertility outcome – that we see any consistent trend: the proportion of women with this outcome is lower among younger than among older women. The proportion with this outcome falls from around 19 per cent among women in their late 60s and early 70s to around 9-11 per cent among women in their 40s.

As this is the only component in fertility ideal attainment in the EU 15 that has changed across age groups, it is reasonable to conclude that the decline in the incidence of over-attainment of fertility is the main proximate cause of the widening gap between ideal and actual fertility noted above. As far as the EU 15 is concerned, therefore, the widening of the ideal-actual fertility gap across age groups is in a certain sense a statistical artefact: it has occurred not because younger women were less able than older women to have as many children as they wanted, but because younger women became better at avoiding having more children than they wanted. In other words, when the older women in the present surveys were in their child-bearing years, under-attainment of fertility ideals tended to be compensated for by over-attainment and the net result was that mean fertility outcomes came close to matching mean fertility ideals – even though a considerable proportion of women had numbers of children that were either above or below their personal ideals.

Figure 20 Age comparisons in fertility ideal attainment among women with completed fertility (aged 45 and over, or aged 40-44 but intending to have no more children) in EU 15, AC 10 and CC 3



Sources: CC Eurobarometer April 2002; Standard Eurobarometer 54.2

For younger women control over fertility improved; the incidence of over-attainment of fertility ideals fell; the compensating effect of over-attainment on under-attainment weakened; and the gap between ideal and actual fertility widened – even though there was no real increase in the incidence of under-attainment or any real decrease in the proportion of women whose fertility outcomes were 'just right'. All that changed was a decline in excess fertility and this in itself caused the gap between ideal and actual fertility to widen.

Looking at Panel II in Figure 20, which presents similar data for the AC 10, we find that the balance between under-attainment and over-attainment of fertility ideals across age groups differs slightly from that found in the EU 15. The downward movement in the incidence of the 'too many' outcome across age groups is not quite as pronounced and there is a slight tendency towards an upward movement in the incidence of the 'too few' outcome. However, these patterns – particularly the upward movement in the 'too few' outcome – are not very pronounced, so to a large degree the interpretation of the trend in the ideal-actual fertility gap just outlined for the EU 15 applies to the AC 10 also.

The situation in the CC 3 outlined in Panel III in Figure 20 is considerably different from that in either the EU 15 or the AC 10, and here again the distinctive influence of Turkey is evident. In the CC 3, the 'too many' outcome is more common than in the EU 15 or AC 10 and is more common than the 'too few' outcome. The consequence is that actual fertility exceeds ideal fertility, as noted earlier. If we were to project into the future what might happen in this area in the CC 3 (and particularly in Turkey), using the present pattern in the EU 15 or the AC 10 as a guide, the most likely development would be that the 'too many' outcome would become less common, the 'too few' outcome would remain more or less as it is now, and the 'just right' outcome would increase. The net consequence would be that the excess of actual over ideal fertility would soon disappear and would eventually turn into a shortfall – but mainly because women had come to have more control over their fertility.

This interpretation of the gap between ideal and actual fertility means that a widening gap does not necessarily signify a reduction in women's ability to achieve their fertility ideals. Rather it can signify an increase in their control over their fertility and a consequent decline in the incidence of childbearing that goes beyond their ideals. It can, therefore, be viewed as reflecting, not a growing loss of freedom in the face of economic constraints (as the affordability thesis outlined would suggest), but a further extension of control over fertility that has been a dominant feature of demographic patterns in Europe for over a century.

Influence of education

Further clarification of the nature of under-attainment and over-attainment of fertility ideals can be obtained by looking at the social characteristics of those who fall into these categories. Keeping in mind that fertility ideal attainment in the sense meant here can be examined only in connection with those with completed fertility, it is less their current social circumstances that are of interest than the situation they were in during or prior to their childbearing years. Most of the social characteristics of respondents measured in the present data set relate to their present situation (such as income, employment status and family composition). They do not provide the retrospective information needed to profile the social circumstances of women with completed

families during the years their families were being formed. However, one important variable in the data set does approximate to such a retrospective measure. This is education, as measured by an item that asked respondents their age when they finished full-time education.

For the most part, people complete their education before they begin childbearing, and their educational level does not change as their family formation proceeds (levels of participation in adult or lifelong education are usually too low to make a substantial difference to this picture). So a measure of education taken among mature women today would correspond reasonably closely to their educational situation during their child-bearing years. It can be considered as a measure that has retrospective as well as contemporary validity. Furthermore, logistic regressions not reported here indicated that, of all the socio-economic and related variables contained in the present data set, by far the strongest predictor of ideal attainment in fertility was education. Education is often used as a proxy indicator for social position and command over resources. For these reasons, the present analysis focuses on education as the most useful basis on which to attempt to differentiate the social circumstances of women with different levels of ideal attainment.

Table 11 shows the distribution of the 'too few', 'just right' and 'too many' fertility outcomes classified by terminal educational age in the EU 15, the AC 10 and the CC 3. Figures 21 and 22 graph the patterns for those at the two extremes of the educational distribution. It is clear that educational level has a strong impact on the balance between these outcomes. In all three regions, as Figure 21 shows, those with high education are much more likely to have 'too few' than 'too many' children: 40-41 per cent of women whose terminal education age is 20 years and over have 'too few' children, while only 5-8 per cent (depending on the region) have 'too many'.

Table 11 Fertility ideal fulfilment and school-leaving age among women aged 40-64 with completed fertility

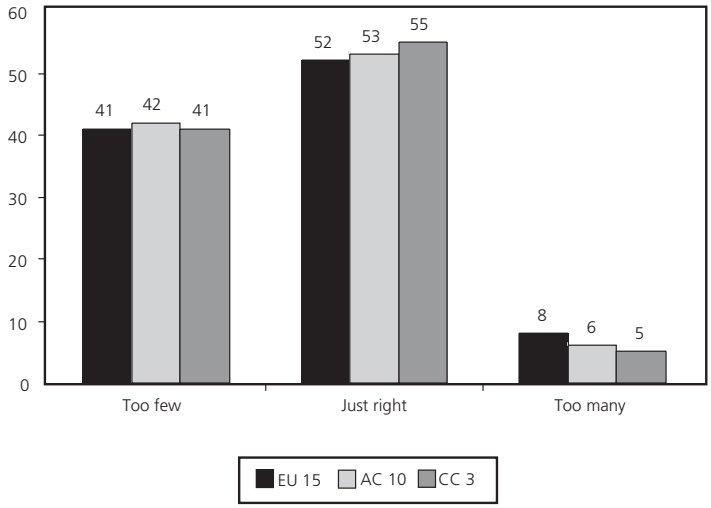
School-leaving age				Total	
	Too few	Just right	Too many	%	No.
EU 15					
Up to 15 years	26	58	16	100	1,266
16-19 years	28	59	12	100	1,616
20+ years	41	52	8	100	753
AC 10					
Up to 15 years	20	58	22	100	254
16-19 years	31	58	11	100	361
20+ years	42	53	6	100	177
CC 3					
Up to 15 years	17	45	38	100	354
16-19 years	24	64	12	100	170
20+ years	41	55	5	100	88

Sources: CC Eurobarometer 2002, Standard Eurobarometer 56.1

The data in Table 11 and the illustration in Figure 22 show that the pattern is different for those in the lowest educational category: with a terminal educational age of 15 years or under. Far fewer women in this educational category (17-26 per cent) have 'two few' children. Considerably more

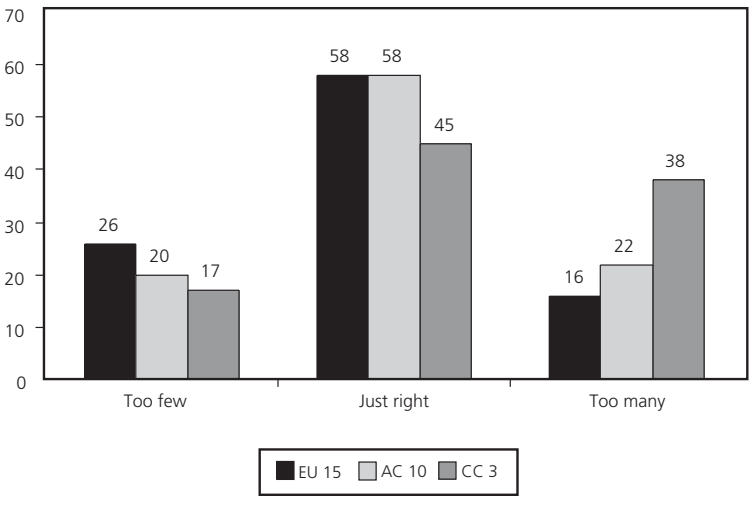
have 'too many', especially in the CC 3 (16 and 22 per cent have too many children in the EU 15 and AC 10, while 38 per cent do so in the CC 3). So those with low education are more likely to have 'too many' children and that likelihood increases as we move from the EU 15 to the AC 10 and to the CC 3.

Figure 21 Fertility attainment outcomes for those with high education (terminal education age 20+ years) among women with completed fertility (aged 40-64) in the EU 15, AC 10 and CC 3



These quite strong relationships between education and fertility ideal attainment are revealing and point to some implications about the possible influence of affordability pressures on fertility outcomes, as discussed earlier. If we take educational attainment as a proxy measure of social position and command over resources, we can conclude that the better off are more likely to have 'too few' children than the less well off, while the less well off (and especially the less well off in poorer countries) are more likely to have 'too many' children.

Figure 22 Fertility attainment outcomes for those with low education (terminal education age under 15 years) among women with completed fertility (aged 40-64) in the EU 15, AC 10 and CC 3



Having too few children, therefore, is associated with a relative abundance rather than a lack of resources. It is therefore difficult to represent as a consequence of affordability pressures in the sense outlined earlier, since the people who could most afford to have as many children as they want are the least likely to do so. Furthermore, in so far as a lack of resources has an impact on fulfilment of fertility ideals, the nature of that impact is as likely (or in poorer countries, even more likely) to cause people to have too many rather than too few children.

Lack of resources, therefore, seems to cause a reduced level of control over the avoidance of childbearing, rather than an increased level of constraint over the numbers of children women feel able to have. The key point here is not that lack of resources causes people to want more children, rather that it causes them (or is part of a syndrome which causes them) to be unable to limit the number of children to the amount they desire.

Conclusions

Fertility behaviour is the outcome of a complex interaction between a wide range of factors. Any given family size among individuals or couples, and any given fertility rate at a country level, can be produced by any of a wide range of combinations of those factors. Given such complexity in the causal background to fertility outcomes, it is uncertain what causal significance should be attached to changing norms and ideals relating to childbearing in general or about family size in particular.

Be that as it may, the present chapter has shown that ideals of family size have declined across the generations. Falling family size ideals may be a consequence of other forces (such as changes in the balance between the costs and benefits of having children) or they may represent autonomous cultural changes. But whatever their ultimate causal status, there is no doubt that they have been part of the proximate causal background to the decline in fertility in Europe over recent decades.

At the same time people's ideal family size is on average higher than the one they attain. Of the 28 countries examined here, Turkey is the only exception to this rule, since in Turkey women's family size outcomes are considerably higher than their ideals. Some information was available from the survey data on the reasons people identified for falling short of their desired level of childbearing; though these data relate only to the ACC 13, and the desired level in question is that which people link to early adulthood (i.e. when they were aged 20) rather than in later stages of family formation. A range of economic factors, such as financial problems, the cost of children and availability of accommodation, were the most common reasons cited. But for women in particular, an important role was also played by two kinds of non-economic factors: their own health and problems in their relationships with their partners.

The importance people ascribed to economic constraints as reasons for their failure to attain ideal family size would tend to support the affordability thesis outlined in Chapter 2 above: that growing economic pressures restrict the number of children people feel they can have. A further piece of evidence would seem to point in the same direction. If we use cross-sectional age comparisons as a basis for inferring a trend over time, the gap between ideal and actual fertility seems to have widened somewhat over the past half century or so, particularly in the EU 15 and also to some degree in the AC 10 (the CC 3, which are dominated by the exceptional case of Turkey, show a different pattern). This would support the notion that changing economic conditions have made it more difficult to for women and families to achieve the number of births they would like.

However, two aspects of the widening gap between ideal and actual fertility indicate that the picture is more complicated than it first appears. One aspect is that the widening gap is in a certain sense a statistical artefact. It arises not because more women are failing to achieve the family sizes they want but because fewer women are overshooting the family sizes they want. It is the more effective avoidance of excess fertility, rather than a declining capacity to achieve ideal fertility, that is behind the widening ideal-actual fertility gap.

The second aspect is that below-ideal fertility is a function of social advantage rather than disadvantage. It is most common among the highly educated and least common among those with poor education. Social disadvantage is more likely to be accompanied by excess fertility. Lack of resources tends not so much to restrict the number of children that women can have as weaken their control over their fertility: increasing the likelihood that they will overshoot their ideal fertility limits.

The patterns of under-attainment and over-attainment of fertility ideals examined here do not support the strong version of the affordability explanation for fertility decline in recent decades. The evidence tends to contradict the view that women have fewer children today because some worsening of the economic context makes that necessary – that is to say because their range of choice has narrowed. However, a weaker, relativistic version is more consistent with the evidence, even though to some extent it turns the strong version on its head.

This is the version that suggests that women (or indeed men) have fewer children today because of the ever-widening array of alternative ways of using their time and resources – because their range of choice has expanded. One may still say, from this perspective, that women today cannot 'afford' to have children as their mothers and grandmothers did. But this is only true in the sense that that the other options available them are so rich and attractive that the loss entailed in sacrificing those options for the sake of family formation is greater than anything experienced in previous generations.

Impact on subjective well-being

4

Having examined fertility outcomes, ideals and desires and the extent of mismatch between outcomes and ideals/desires in preceding chapters, this chapter looks at the final major substantive issue in the present section of the report: the impact of mismatch between outcomes and ideals/desires on subjective well-being. This analysis takes the two measures of fertility fulfilment developed in the last chapter – the match between present fertility ideals and fertility outcomes, and whether respondents have had the number of children they wanted to have at age 20 – and assesses their impact on subjective well-being. The key question is whether those whose childbearing outcomes either under-attain or over-attain their personal ideal family size, suffer any diminution in subjective well-being on that account.

One indicator of subjective well-being, relevant as an outcome variable in this regard, is available in both the CC Eurobarometer and the Standard Eurobarometer 56.2: a measurement of global life satisfaction. For the full 28-country data set, this is the outcome variable to be analysed. The CC Eurobarometer contains further indicators of subjective well-being, of which satisfaction with family life is particularly relevant in the present context. The latter indicator provides the basis for analysis of the quality of life implications of fulfilling fertility preferences in the 13 acceding and candidate countries and will be looked at here for that purpose. Both these satisfaction variables are measured on a four-point scale (from 'very satisfied' to 'very dissatisfied').

The answers, reached using these variables, to our key questions about the effect of fertility fulfilment on subjective well-being can only be tentative. This is so partly because the cross-sectional nature of the data means that we cannot clearly identify causal direction. Even if we establish correlations between fertility fulfilment and subjective well being, we cannot draw strong inferences about causal influence from that fact. In addition, we cannot be sure that we have controlled for all relevant confounding factors. It is possible that correlations between our key variables have little or no direct causal significance, since the relationship might be due to the common influence of a third set of factors that are not measured in the data set. But it is still worth establishing if *any* link is present since that at least will keep open the possibility that fertility fulfilment or lack of it is a significant component in subjective quality of life.

Differences in satisfaction levels

Multi-variate analysis is required to test for the relationships we are interested in, as it is necessary to control for a wide range of possible confounding factors. First, however, an illustrative description of the relationship between fertility fulfilment and subjective well-being can be provided by comparing mean scores on the satisfaction variables across the categories of the fertility fulfilment variables. This is done first in connection with global life satisfaction, as the outcome variable, and fulfilment of present fertility ideals as the predictor variable.

Table 12 presents comparisons of means along these lines for the four main regions (EU 15, AC 10, CC 3 and EU 28) and for an indicative selection of countries, focusing on women with completed fertility as defined in Chapter 3 above. This comparison of mean life satisfaction levels between those with below ideal, ideal and above ideal numbers of children shows that a relationship between ideal attainment of fertility and life satisfaction is present, but not in all regions of the EU 28. In the AC 10 and CC 3, the relationship is absent: there are no significant differences in life satisfaction between women with below-ideal, ideal and above-ideal numbers of children.

However, in the EU 15 those with above-ideal numbers of children show a significantly lower life satisfaction score than those with ideal numbers of children. This evidence would suggest that across the EU 15 as a whole, in so far as non-fulfilment of fertility ideals has an impact on global life satisfaction, that impact may be more likely to arise from having too many children than too few. As already mentioned, above-ideal number of children and low life satisfaction may both be consequences of unmeasured additional factors rather than direct causal influences on each other. Nevertheless the possibility of some causal link, whether direct or indirect, is there. Difference-of-means data for a number of individual countries are also included in Table 12. These confirm the inconsistent nature of the links between fulfilment of fertility ideals and global life satisfaction since none of the differences are significant.

Table 12 Differences in average satisfaction with life in general between those whose actual number of children is less than their ideal, is equal to their ideal, and is greater than their ideal among women with completed fertility

	Less than ideal	Equal to ideal	Greater than ideal
	Average satisfaction with life in general (1=not at all satisfied, 2=very satisfied, 3=fairly satisfied, 4=very satisfied}		
EU 15	2.98	3.02	2.82**
AC 10	2.58	2.56	2.46
CC 3	2.30	2.33	2.49
EU 28	2.84	2.87	2.67**
TR	2.62	2.63	2.56
EL	2.55	2.38	–
SE	3.36	3.42	–
FR	2.79	2.91	2.66
IE	–	3.12	3.37

* significantly different from 'equal to ideal' at 0.05 level

** significantly different from 'equal to ideal' at 0.01 level

– too few cases for reliable estimate

Table 13 provides a further descriptive illustration based on an indicator of subjective well-being that would on the face of it seem likely to have a closer relationship to childbearing patterns: satisfaction with family life. Since this indicator is included only in the CC Eurobarometer, it can be analysed here only for the ACC 13. The difference-of-means data set out in Table 13 indicate that fulfilment of fertility ideals is significantly linked to this indicator of subjective well-being. In the ACC 13 as a whole, those with both below-ideal and above-ideal numbers of children are significantly less satisfied with family life than those whose number of children matches their ideal.

The means for satisfaction with family life among those with too many children (above-ideal numbers of children) are slightly lower than among those with too few children. The latter differences are too small to support large conclusions, but nevertheless they give slight additional support to the idea that having too many children may be more damaging to subjective well-being than having too few. The data for selected individual countries included in Table 13 indicates that the negative consequences of either below-ideal or above-ideal numbers of children are not consistently found across all countries. In Turkey, Slovenia and Poland, for example, the mean

levels of satisfaction with family life differ across the three categories of fulfilment of fertility ideals in the same way as in the CC as a whole, but not to a degree that is statistically significant.

Table 13 Differences in average satisfaction with family life between those whose actual number of children is less than their ideal, is equal to their ideal, and is greater than their ideal among women with completed fertility

	Average satisfaction with family life (1=not at all satisfied, 2=very satisfied, 3=fairly satisfied, 4=very satisfied}		
AC 10	2.99**	3.15	2.89**
CC 3	2.89**	3.06	2.89*
ACC 13	2.95**	3.11	2.89**
TR	2.84	2.98	2.88
SI	3.36	3.41	–
PL	3.01	3.17	–
SK	2.81**	3.19	2.66**
HU	2.93**	3.20	2.85**

* significantly different from 'equal to ideal' at 0.05 level
** significantly different from 'equal to ideal' at 0.01 level
– too few cases for reliable estimate

Effects of fulfilment of ideals on life satisfaction

To test more systematically for the effects of fertility fulfilment on subjective well-being we use multiple regression techniques (ordinary least squares). Since the significance of childbearing differs strongly between men and women, controls for the gender effect are basic to the analysis. For this reason, we run separate models for women and men. As is shown in other reports in this project, many aspects of subjective well being are strongly influenced by country context. In consequence, controls for country effects (using country dummies) are also included, and these controls are added to by including country-level GDP per capita as an individual-level variable. In addition, a range of other variables is controlled for: age, age left full-time education, rural/urban location, and income quartile of household (defined on a country basis).

Eight models are analysed, four with global life satisfaction as the dependent variable and four with satisfaction with family life as the dependent variable. Within each of these four models, two are for men and two for women. Within the two for each gender, one includes attainment of fertility ideals a predictor variable (i.e. whether outcomes match current personal fertility ideals), while the other includes attainment of fertility desires at age 20 as a predictor variable. The central concern is whether, having controlled for all the other variables included in the models, the two predictor variables just mentioned have significant effects on the two outcome variables.

Table 14 extracts the relevant results from the eight models. For ease of presentation, the regression coefficients for the control variables are omitted from the table and attention is focused on the regression coefficients for the predictor variables of interest. Looking at the bottom half of this table first, it is clear that the second of the key predictor variables – fulfilment of fertility desires at age 20 – has only a limited relationship with subjective well-being. It has no relationship at all with

global life satisfaction, but it does have a partial link with satisfaction with family life. Women who have had fewer children than they wanted at age 20 have slightly lower satisfaction with family life. Men do not show this pattern, and neither men nor women who have had more children than they wanted at age 20 show any effect on satisfaction with family life.

Table 14 Effects of fulfilment of fertility ideals, and attainment of fertility desires at age 20, on life satisfaction and satisfaction with family life

Independent fertility fulfilment variables	Dependent variable = Life satisfaction (EU 28)		Dependent variable = Satisfaction with family life (AC 10 + CC 3)	
	Females	Males	Females	Males
	Standardised regression coefficients			
1. Fulfil current ideals?				
Just right (ref)				
Less than ideal	0.0	-0.06***	-0.10***	-0.14***
Greater than ideal	-0.12***	-0.20***	-0.09***	-0.01
R^2 (inc. control variables)	19%	18%	4%	4%
2. Had all children wanted at age 20?				
Yes (ref)				
Had more than wanted	0.0	-0.03	-0.03	0.04
Had fewer than wanted	0.0	-0.03	-0.08***	-0.04
R^2 (inc. control variables)	18%	17%	4%	2%

Note: Sample base for all regressions = women/men aged 40-64 with completed fertility. Variables controlled: country dummies; age; terminal education age; urban-rural location; income quartile of household; country-level GDP per capita.
* $p < 0.05$ ** $p < 0.01$ *** $p < 0.001$

Looking at the top half of Table 14, it is clear that the 'current fertility ideals' measure of fertility fulfilment has a stronger significance for subjective well-being, as measured either by global life satisfaction or satisfaction with family life. For global life satisfaction, over-attainment of fertility ideals has significant negative effects both for women and men. The negative effect on men is stronger but it is quite large for women as well. Under-attainment also has a negative effect, but only for men and with a smaller coefficient.

It is worth noting that these relationships are net of the effects of the control variables, which include education. While education has strong positive effects on global life satisfaction and also, as we saw earlier, tends to reduce the likelihood of over-attainment of fertility ideals, there is also an independent effect of over-attainment of fertility ideals on global life satisfaction. These findings suggest that having too many children is worse for life satisfaction than having too few – indeed that, for women, having too few has no negative implications for life satisfaction at all.

Turning to satisfaction with family life, the impact of fulfilment of fertility ideals is still present but is turned around: the most consistent impact is from having too few children rather than too many, an effect which is found for both women and men. The effect from having too many children is also present, but only for women.

These findings corroborate the idea that fulfilment of fertility ideals is a quality-of-life issue: subjective well-being is negatively affected, at least in some ways and in some contexts, if people have either more or fewer children than their ideal. As mentioned earlier, it is difficult to say with any confidence what causal connections are involved here. It is possible, for example, that the causal effects may in some cases be the reverse of what we have been concerned with: for example, lower subjective well-being may cause people to hang back from having children. It is also difficult to say whether under-attainment or over-attainment of fertility ideals is the worse for subjective well-being. Having too many children is worse for global life satisfaction but having too few is worse for satisfaction with family life.

Nevertheless, one firm conclusion can be drawn that is relevant to the initial hypothesis. This hypothesis, drawn from an 'affordability' interpretation of the fertility decline, was concerned with the effect of economic constraints on narrowing people's scope to have the number of children they wanted, and with the possibility that this might have negative consequences for subjective well-being. In the present analysis, echoing the findings of the previous chapter, it has become clear that there is another side to this coin. Despite the general effectiveness of modern contraceptive technology, people can still end up having more children than they want and, in some cases at least, this outcome is associated with reduced subjective well-being.

Main factors influencing fertility rates 5

The starting point of this report was an apparent emerging tension facing European policymakers between what may soon become an imperative to increase the birth rate, and an opposing obligation to allow citizens to exercise their own individual choices about the number of children they want to have, even if that means a continuation of present very low fertility levels. The former is a long-term macro-structural concern to do with the future place of Europe in the world; the latter is an immediate quality of life issue that arises at the individual level.

The issue posed at the outset was whether this tension was as real as it might appear, since the case has been made that present low birth rates are as much the consequence of economic constraints on childbearing as the freely chosen preferences of individuals. This case argues that low levels of childbearing might not reflect what people really want and so might be seen as a negative rather than a positive feature of quality of life today. This chapter seeks to test that argument, while along the way providing a descriptive account of certain aspects of present low fertility patterns.

Looking first at fertility outcomes across the 28 countries covered by the data, the report pointed to the diversity that occurred within the present overall regime of low fertility in Europe. It was not just that the gap between the highest and lowest fertility rates in the EU 28 was quite wide – when Turkey is included in the picture the gap is wide indeed, since the highest is just about double the lowest. It is also that the components of fertility behaviour vary in no consistent fashion across countries.

Three likely influences on fertility rates – the proportion of women remaining childless, the average age at which women began their childbearing, and the proportion who remained single throughout their childbearing years – turned out to have no consistent effect on fertility rates at the country level. These factors combined in wide variety of ways in different countries, and regularities in those combinations were hard to detect.

One factor did emerge as having a strong effect on country-level fertility rates: the incidence of relatively large families (that is, of three or more children). It would appear that the decision to have a third or fourth child is critical for national birth rates in the majority of European countries while the decision not to have children at all is important only in some.

The decline in fertility across recent generations has been accompanied by declines in ideal family size. Shrinking ideals of family size may thus be posited as a cause of shrinking families, though again there is little consensus on what causal relationships are at work here. Despite falling family size ideals, there is a gap between ideal and actual family size: people's ideals are generally higher than their attainment. Furthermore, evidence from the present data indicates that the gap between ideal and actuality has widened over recent decades, particularly in the EU 15 and to some degree also in the AC 10.

From this, it might be tempting to conclude that the pressures which prevent women from realising their fertility ideals are on the increase and, therefore, that falling fertility can at least partly be seen as an indication of narrowing options when it comes to family formation. However, a closer look at the data cautions against accepting this interpretation too readily. The widening gap between ideal and actual fertility turns out to be a consequence of a falling incidence of over-attainment of fertility rather than a rising incidence of under-attainment. It therefore reflects an increase in women's ability to avoid excess childbearing rather than a decrease in their ability to reach their

ideal family sizes. Furthermore, while a substantial minority of women have fewer children than they would want, those women are concentrated among the better off and so it is difficult to represent their situation as a consequence of binding economic constraint.

The gap between ideal and actual fertility is itself a complex thing, since it is an average arising out of an amalgam of quite different components. It is made up of a majority (something over half of those with completed fertility) who attain their ideal number of children, a minority (usually around one third) who fall short of that ideal, and a smaller minority (usually between 10 and 15 per cent) who over-attain their ideal: they have more children than they would want. This third group is important because it reminds us that the gap between ideal and actuality is not always on the deficit side but can arise also on the excess side. From a quality of life perspective, where the freedom to choose the style of life that best suits oneself is the central issue, the problem of attaining fertility ideals is two-fold rather than one-fold. It is a problem of too much *and* too little rather than just of too little.

The analysis of the implications of fulfilling fertility ideals for subjective well-being confirmed this two-sided character of the fertility problem. Having either more or fewer children than one wants is associated with reduced subjective well-being. As expected, the association is not very strong and is not very consistent across countries or across the two domains of satisfaction looked at in the present analysis (satisfaction with life and satisfaction with family life). Nor is it clear what the causal paths are. The possibility that fertility outcomes are the cause and the subjective well-being the effect is just that – a possibility. A reverse causal path or a more complex interplay of causes are also possibilities.

However, from the point of view of the initial question, the key issue is that while some people may be having fewer children than they want, there are still others who have more than they would consider ideal. On the life satisfaction measure of subjective well being, having too many children has worse associations than having too few, though the opposite is the case for satisfaction with family life. In consequence, one cannot say that either one of these fertility outcomes is worse than the other from a perspective of subjective well-being. But one can say that both are bad to some degree, or at least that they are part of some larger syndrome that has negative implications for how satisfied people feel with key dimensions of their lives.

Coming back to the policy tension between the emerging need to raise fertility rates and the widespread preference for leaving people to decide their own childbearing levels that provided the starting point of this analysis, what do these findings imply? In general the implications are not comforting. Policymakers might hope that if they were to alter the context of childbearing so that people were better enabled to pursue their preferences, the birth rate might rise and quality of life, thought of in terms of scope to achieve one's own preferences, would also be enhanced. However, according to the estimates presented here, for every two people whose preferences would seem to point towards higher levels of childbearing, there is one whose preferences point in the opposite direction. So enhancing the capacity to achieve overall preferences as far as fertility is concerned would be a two-way street: some would head towards higher fertility and others would head towards lower fertility. The balance of numbers might seem to favour overall movement upwards, since they outnumber those whose orientation is downwards. Nevertheless, the conclusion must be that that the best one could hope for would be a small net gain in the direction required rather than the gross movement upwards which the critical state of the birth rate in Europe now requires.

Sharing family responsibilities 6

Context

Considerations about work and family balance have developed into a crucial element of policy discussions in today's Europe. A better understanding of the relation between employment (paid work) and family obligations (unpaid work) is needed in order to evaluate adaptation processes in Europe and to formulate new policy responses to specific needs. Relevant issues include gender inequalities in wages in the labour market, and the influence of work/family balance on the long-term fertility decline in Europe.

Obviously several structural and behavioural elements could affect patterns of work-family balance: historical, structural and social-psychological factors could contribute to a particular pattern of gender division in a country. The character of the welfare state is especially important: family/child/gender related policies, the generosity of social services, the availability of part-time jobs and the monetary programmes supporting parents/mothers could strongly shape patterns of family and work reconciliation, and the employment opportunities of mothers/parents.

At first glance it seems that ideas and beliefs about gender roles, the reconciliation of work and family, and the division of labour in society and the home are of low importance. It is often assumed that beliefs will adapt if new circumstances and options arise. On the other hand, there is also the assumption that values, beliefs and attitudes are much slower to change, so it is important to investigate and understand them in their own right. The study of values and beliefs could also be useful from another perspective, that is, in relation to assessing the effectiveness of particular social policies in meeting the needs of ordinary people. Policy programmes and measures are likely to be more effective if they fit well with the ideas of those they are aimed at.

The Eurobarometer/candidate country surveys lack data on welfare provisions at a local level, and they do not have an elaborated section relating to gender roles. They do, however, facilitate a closer look at the child rearing ideas and beliefs in 28 European countries (Q. 16). It is important to note that the idea of child rearing responsibilities is embedded in a broader set of ideas about gender roles and division of labour at home, especially at a time of fertility decline and of increased female labour force participation.

Different welfare models

This report cannot aim to provide a full elaboration of welfare state supports for child rearing, but it is necessary to take into consideration some of the essential differences between European welfare models. There are several classifications of the welfare regimes and states. The most widely used is that of Esping-Anderson (Esping-Anderson, 1990, Kautto et al, 2001). He differentiates between three types of the welfare regime: the Scandinavian, the continental and the liberal.

Although research sometimes points out the difficulties of fitting particular measures and/or countries into the 'ideal types' of the welfare models, it is widely agreed that his models capture the basic differences in the methods of state intervention in western European countries. The Scandinavian welfare state makes childcare services widely available and has generous parental leave systems. Continental welfare policies aim primarily to compensate for the costs of childbearing (van Dulk et al, 2000). Liberal welfare states target support mainly at those who are

worst-off. Besides the UK, the Mediterranean countries could be classified as belonging to this regime.

There are several debates about the convergence of the welfare states, and it is stressed that globalisation and the political unification of Europe could promote its own kind of convergence (Kautto et al, 2001). But as Kautto emphasises there is another mechanism that reinforces the persistence of differences. It is not appropriate to analyse these differences at this time, it would be more fruitful to use them to formulate a hypothesis relating to beliefs about child rearing. The various programmes of the different types of welfare state, the different mix of 'in kind' and 'in cash' benefits, the extent of female employment and the dispersion of part-time jobs (van Dulk et al, 2000), not to mention differences in historical heritage, strengthen the belief that there are different notions about responsibilities relating to child rearing activities. On the other hand, the efforts of the European Union, including the Equal Opportunities Programme, tend to encourage the homogenisation of beliefs. In summary, we should consider differences between the EU 15 countries and similarities among those belonging the same welfare state regimes.

There is little effort made to classify the welfare system of the former socialist countries in the literature. These were de jure and de facto state-integrated societies and welfare regimes. Before the transition they were quite close to the Scandinavian welfare state regime, functioning with very high levels of female employment, having universal and work-related benefits and widely extended child-care facilities. But during the last decade social and economic transformation has not left their welfare regimes untouched. Examples of change include the movement from universal to means-tested benefits as well as a drastic reduction in the level of support.

This means that the legacies of the communist systems and the consequences of the transformation cannot be denied. There is no agreement on how to assess whether or not the welfare system is working in the former socialist countries. The experience of state-organised employment and the use of child-caring institutions during socialist times, and the experience of economic and social transformation indicate similarities of belief in the countries of the AC 10. On the other hand, despite communist type redistribution, there were always structural and cultural differences between those countries.

Forming a hypothesis regarding differences in gendered ideas between the EU 15 countries and AC 10 countries is not straightforward. There are contradictory assumptions. On the one hand full, or nearly full, female employment has been present for decades in the former socialist countries. That could influence attitudes toward gender modernity, gender equality or a rejection of traditional gender roles. On the other hand high female employment was the result of a forced process, where many women did not integrate into the world of paid employment of their own free will. The relative 'backwardness' of these countries and the presence and importance of the 'secondary economy' has perhaps enabled the survival of a more traditional style of role sharing. So one could reasonably assume that the accession countries will be found to be similar to each other, and perhaps also to the Scandinavian countries, on this issue. These and other considerations support the assumption that there will not be too much difference between the EU 15 and AC 10 countries in their ideas about child rearing responsibilities.

It is not hypothesised that countries are internally homogeneous, but that in every society there are groups who try out new life styles and who are responsive and adaptive to new ideas. It is assumed

that the more educated and the younger generation are more inclined to accept a new way of life, so will tend to more shared ideas about child rearing responsibilities. The same assumption can be made with regard to females, who can be expected to lean towards a gender-sharing approach. Men are assumed to think more traditionally on this subject.

There is little scope in this report to examine these issues in any detail. For one thing, the questions in the Eurobarometer relate only to beliefs and contain no information on sharing behaviour. In addition, even with regard to beliefs, the questions relate only to one class of household task: activities related to children. This is only one of a wider range of household activity and seems, moreover, to be the most non-gendered (Pahl, 1984). Previous research has found that if there is any shift in the gendering of household tasks, then housework with modern 'gadgets' and child rearing activities are especially subject to change: men have become more active in these two spheres than in any others (Gershuny, 1988). Finally, it is difficult to incorporate information about the objective context (welfare regimes, labour market) into the analysis. Such country-level characteristics can be referred to only in passing. The main objective of the analysis is the description of the beliefs and the identification of commonalties and differences on child rearing in the European countries.

Measuring the sharing of childcare

The Standard Eurobarometer 50.1 and the CC Eurobarometer both include one question on child rearing ideas. The question referred to 11 elements of child rearing, from 'playing sport with the children', through 'changing nappies' to 'answering important questions'.[1] In each case the question was formulated in the following way: 'whether you think it should be carried out mainly by the father, by the mother or both?'

To process the answers to the 11 tasks in the 28 countries surveyed here, the first step was to construct an overall index measuring the prevalence of belief in shared child rearing responsibilities. The scale of the index is from 0 to 100. Zero indicates a belief that each activity should be carried out either by the mother or by the father, with no shared responsibilities; while 100 means the opposite: that all child rearing tasks should be shared. Usually scores fall somewhere in between. (For an account of the elements in this index, see Table 15 and Table 24 in the Annex. The country-specific ratios of shared beliefs about each task can be found there.)

The second step is to examine the mean values of the index classified by gender, age group and level of education in each country, using population-weighted country groups in the EU 28. Thirdly, a closer look is taken at a non-shared, strongly gendered belief: the task 'changing the nappies'. Fourthly, the basic question is approached from a different angle, with an exclusive focus on gendered ideas. We construct task-specific indices to measure the general features of non-shared tasks.

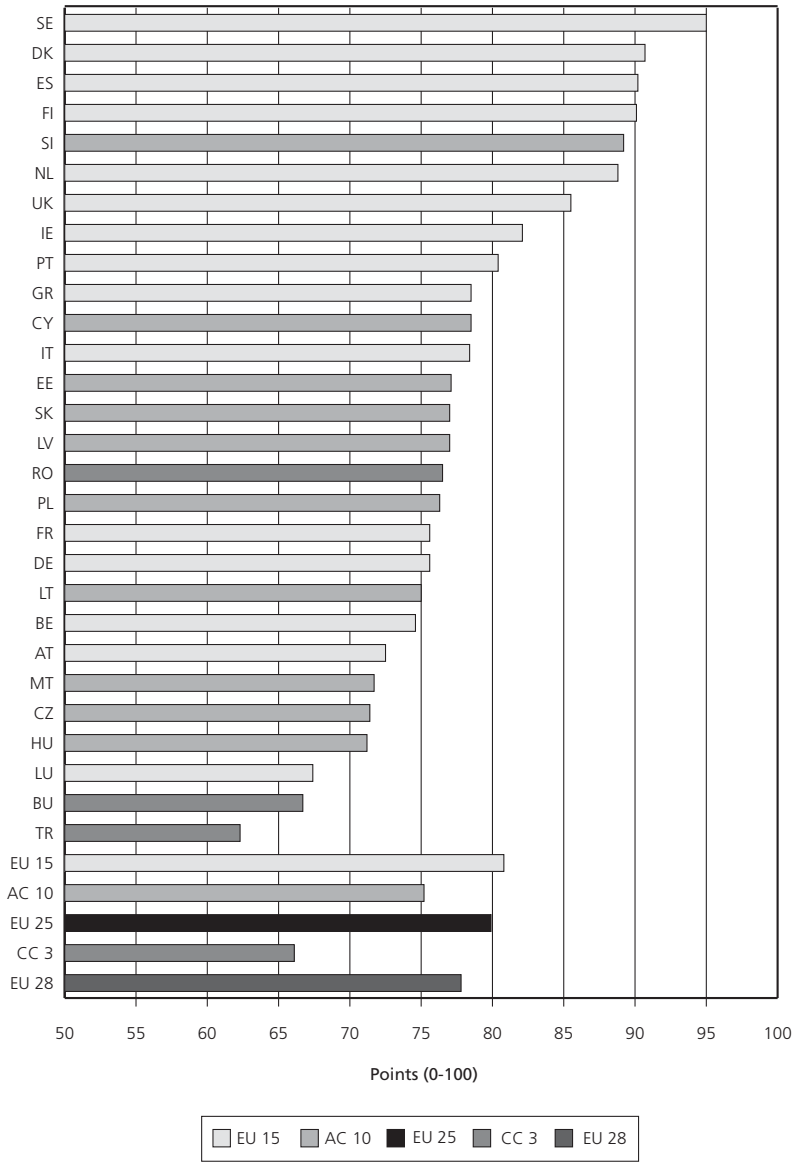
[1] The exact wording of the question is as follows: 'Here is a list of tasks concerned with looking after children which may be carried out by the father or the mother or by both. Please tell me for each of them, whether you think it should be carried out mainly by the father, mainly by the mother or both?' The tasks are the following: 1) Playing sport with the children. 2) Bringing the children to activities such as drama, music, (boy-) scouts. 3) Changing the baby's nappies. 4) Dressing the children or choosing their clothes. 5) Taking the children to the doctor. 6) Helping the children with schoolwork, going to parents meetings. 7) Reading to the children. 8) Buying toys for the children. 9) Punishing the children. 10) Putting the children to bed. 11) Answering important questions raised by the child.

During the analysis it should be remembered that ideas and beliefs, rather than real division of tasks, are being discussed. (It can be assumed that the real task division is much more gendered.) It should also be borne in mind that the questions do not assume rigid patterns of task-division in the family, but asked who should 'mainly' be carrying out a task.

Belief in sharing childcare

The overall index measuring the prevalence of childcare-sharing ideas gives a very interesting picture of Europe. The basic finding is that most of the people of Europe believe that childcare is basically a non-gender-specific task: both mother and father are expected to carry out child rearing. The index score on this issue is 81.8 (out of 100) in the EU 15 Member States and 76.6 in the AC 10. It is lower in the CC 3 at 66.8 but still is clearly above the 50 mark (that is, the point where half the population think that child rearing activities should carried out by both the mother and the father.)

Figure 23 Prevalence of the belief in sharing of child rearing tasks in 28 European countries



Comparing the country patterns within the EU 15, the AC 10 and the CC 3 countries, we see the highest deviation in the EU 15. The range between the highest (Sweden, 94.9) and the lowest (Luxembourg, 67.3) is 27.6. The range in the AC 10 is only 17.0 (between Slovenia at 89.2 and Hungary at 71.2). The lowest variation can be found between the three CC countries: the difference between Romania and Turkey is 14.2.

Within the EU 15 the prevalence of the idea of sharing is the strongest in the Scandinavian countries and, surprisingly, in Spain. The least widespread acceptance of the idea of sharing activities is to be found in the continental European welfare states: in Luxemburg, Austria, Belgium, Germany and France. The Mediterranean countries (excluding Spain) take the middle positions. This signifies a probable relationship between beliefs and the existence of welfare state arrangements.

The overall level of belief in childcare sharing in the candidate countries is at the lower end of the scale. The overall weighted means of the AC 10 are lower than in the EU 15 counties. This may be a surprise given that, in most of the AC 10, women have been in the labour market on a large scale for decades. Furthermore, women's employment does not leave much time, all other things being equal, for child rearing. That should have resulted in the practice of sharing being more widespread. It had been assumed that the very early spread of the dual earner family model in the former socialist countries would have resulted in the spread of more egalitarian beliefs about household tasks.

But the literature suggests that in the former socialist countries the division of labour was quite traditional and gendered. Moreover, 12 years of transformation in the former communist countries, which has lowered the level of employment (including of course female employment), might have led in the opposite direction and led to a 'jam' in the trend. Of course the analysis of a single index based on beliefs about a narrow range of household task cannot be enough to identify the overall character of gender roles. But the results do not support the hypothesis that the prevalence of the idea of sharing in the former socialist countries should be as strong as in most countries in the European Union.

This means that with the enlargement of the European Union the variation will not increase much, as there are large overlaps between countries in the two groups. On the contrary, the prevalence of a belief in sharing will be generally somewhat lower.

Task-specific differences

There are strong task-specific differences in the 'both together' idea (Table 20). For some activities, almost all believe that tasks should be shared ('helping the children with schoolwork': 85%; buying toys: 84%; 'punishing the children': 85%; 'answering important questions': 92%). For two tasks, belief in sharing is only slightly above the 50 per cent mark ('changing the baby's nappies': 61%; 'dressing the children or choosing their clothes': 56%).

Using the population size weights and comparing the EU 15 and the AC 10 a difference of slightly over 10% can be found in some activities. The highest difference can be found in the case 'putting children to bed' (12%) and 'changing nappies' (11%). On the other hand there are five tasks where the difference is below 5%. This result may be due to the fact that usually the smaller countries (for

example, Sweden, Denmark, Finland, Slovenia, Luxembourg and Malta) have more visible incidence.

Furthermore, the countries with more sizeable populations (for example, Germany, France, Italy and the UK from the EU 15 and Poland from the AC 10) take up a middle position. If the CC 3 are added, then the variation becomes much larger. In increasing the variation those questioned in Turkey play a crucial role, as their beliefs regarding some but not all tasks differ strongly from those of other countries. Summing up: taking the population size into consideration the differences in Europe seems to be lower than in the picture that was developed from the country-comparison.

Socio-economic factors

The socio-economic factors that could be investigated play only a minor role in determining the patterns of belief in sharing. Gender, age, level of education, type of settlement and socio-economic status were all analysed. The clearest links are to be found to people's level of education: the higher their educational level the higher the probability that they opt for 'shared responsibilities' (Table 23 in Annex). Of course in countries having a very high score on belief in sharing, there is little possibility of variation by educational level. But in countries where there is a lower level of belief in sharing (e.g. Luxemburg, Austria, Hungary) the education effect has more scope to operate, and the more educated show higher levels of belief in shared responsibilities.

However, in some countries (e.g. Germany, Denmark, Latvia), there is very little difference between levels of education. The biggest difference can be found in the case of 'changing nappies': half the less educated but nearly three quarters of the most educated believe that it should be carried out by both the mother and father (data not shown). The differences between educational levels is at its lowest, but is still significant in the case of 'playing sport', 'helping the children with schoolwork' and 'punishing the children'. The possible influence of occupational status should be mentioned here. But because of the small sample, and its strong correlation with the level of education its effect is not shown or described here.

The influence of age groups (the period and/or cohort effect) is quite slight. It was assumed that the younger people were, the more dedicated they would be to the idea of sharing. That is clearly not the case with the very young (15-24) generation, and only slightly so with the other three age groups. Not surprisingly, the elderly have a more gendered idea of child rearing compared with the middle aged and the younger age groups (Table 22 in Annex). It should be taken into account that the differences between the different cohorts or generations are not so strong. The breaks do not always seem to come at the same age categories, but usually those older than 55 differ from the others. As regards occupational status the higher spread of non-gendered beliefs can be found among white-collar workers (not shown in the tables). This coincides with the results for the influence of education. If we differentiate our analysis between country groups, or single countries, the pattern remains.

It was assumed that more differences between genders would be apparent (Table 24), but the data in the table do not indicate that females have a greater belief in sharing than the male population. In some countries some differences can be found, but in most countries there are no significant differences by gender.

If the range of differences relating to socio-economic factors in the different countries were compared, it could be concluded that in Europe the country-specific determinants are stronger. On the other hand, when considering only the AC 10 countries, the most significant influences seem to arise from socio-economic factors.

Country differences

A more detailed picture of country- and task-specific differences can be given if each child rearing task is considered separately. In this section differences between the different tasks will be examined, concentrating on the ratio of shared activities[2].

It has been demonstrated that Europe is not homogeneous (Table 24, Annex). If it is recognised that there are country differences relating to the different tasks, a large heterogeneity between the countries of the European Union (EU 15) can be found. The greatest differences exist in the case of 'changing nappies': in Greece 49% of the population think it is the responsibility of both partners, in Sweden 93%. The lowest differences can be found in case of 'answering important questions raised by the child' (Luxembourg: 88%; Sweden: 98%), and on 'helping the children with schoolwork'. In Luxembourg 75%, and in Sweden 98% of the population judge that both partners should help their children with schoolwork. Therefore, on average, the lowest difference between the countries is 23%, and the highest is 44%. The country-specific spread of belief in shared responsibilities varies between the two values.

Some country-specific characteristics can be underlined. In all tasks Sweden shows the highest incidence of 'shared responsibilities'. Denmark, Finland and Holland follow Sweden in most cases, in different orders. At the other end, ranked near Luxembourg, are Germany, Austria, Belgium and the Central European countries, where the average expectation of sharing is quite low. The southern European countries (Italy, Spain, Portugal and Greece) seem to be between these two poles, but sometimes Greece or Spain are exceptions.

The mean ratio for shared responsibilities in France is sometimes closer to the central European countries, and at other times closer to the southern Europeans. The UK and Ireland have quite high shared responsibilities ratios, close to the Scandinavian countries. To summarise, the variation in the European Union is striking. In different countries beliefs about how far child rearing activities should carried out by both mother and father are quite different. But the ordering of the activities that should be carried out by both is very similar.

The AC 10 and the CC 3 (Romania, Bulgaria, Turkey) show remarkable differences, so they will not reduce Europe's heterogeneity. If we focus on the AC 10, the highest levels of homogeneity are to be found in the case of 'answering important questions raised by the child'. Almost everyone believed that 'answering' was a task for both mother and father (Hungary 89%; Slovenia 97%). The range of the means is also quite narrow in the case of 'reading to the children': in the Czech Republic 74% of the population, in Slovenia 88% expect that this should be done by both partners. Similarly, as in the EU 15, the greatest differences can be found in the case of 'changing nappies'. In the Czech Republic only 38%, whereas in Slovenia 79% regard it as a non-gendered task. (Of course in the Czech Republic those who regard it as a gendered task think it should carried out by the mother.)

[2] This chapter goes back to the separate answers to the 11-item question.

Focusing on the countries, Slovenia's very modern beliefs can be underlined. It scores highest in every task for sharing. Slovenians do not think that any of the child rearing tasks are gender-specific. By contrast the Czech Republic scores 44% for sharing 'changing nappies', and less than half of the population in Hungary regard 'dressing the children' (38% and 42%) as non-gendered. (When not shared, of course, the mother is responsible for these child rearing tasks.)

The Baltic countries do not show a clear picture: the ratio for shared responsibility is usually between the highest and the lowest, but Lithuania deviates in the case of 'dressing the children'. Among the AC 10 countries Poland shows a quite modern pattern. The ratio of those thinking 'both are responsible' is usually higher than in the Czech Republic and Hungary. Cyprus and Malta have their own specific pattern. Certain tasks ('changing nappies', 'dressing the children') were found to have gender-specific answers, whereas in other tasks their beliefs seemed to be quite modern.

In summing up statements about the AC 10 countries an experimental consideration can be mentioned. How would the homogeneity of the former communist countries look if Slovenia were not included in the analysis? Slovenia is not only a statistical exception, but also a much more wealthy country than the others – the most modern society of those from the former Yugoslavia?[3] Homogeneity would increase remarkably and the range of the variation would be much narrower. Of course there would be no unity, but country differences would be weaker.

The three candidate countries, which until now have remained unexamined, differ from the EU 15 and AC 10 countries strongly – especially Turkey. There are some very clear gender-specific tasks, and there are not only female ones.

Sharing responsibility for changing nappies

Our understanding can be somewhat fine-tuned, if the different family tasks are considered separately. It is not useful to consider those activities where most people agree with the idea of shared responsibilities. Considering tasks where there are wide variations can give greater insight. This is why 'changing nappies' was chosen. The variation is particularly wide: in Denmark 88%, whereas in Bulgaria 27% of respondents believed that the job should done by 'both the mother and the father'.

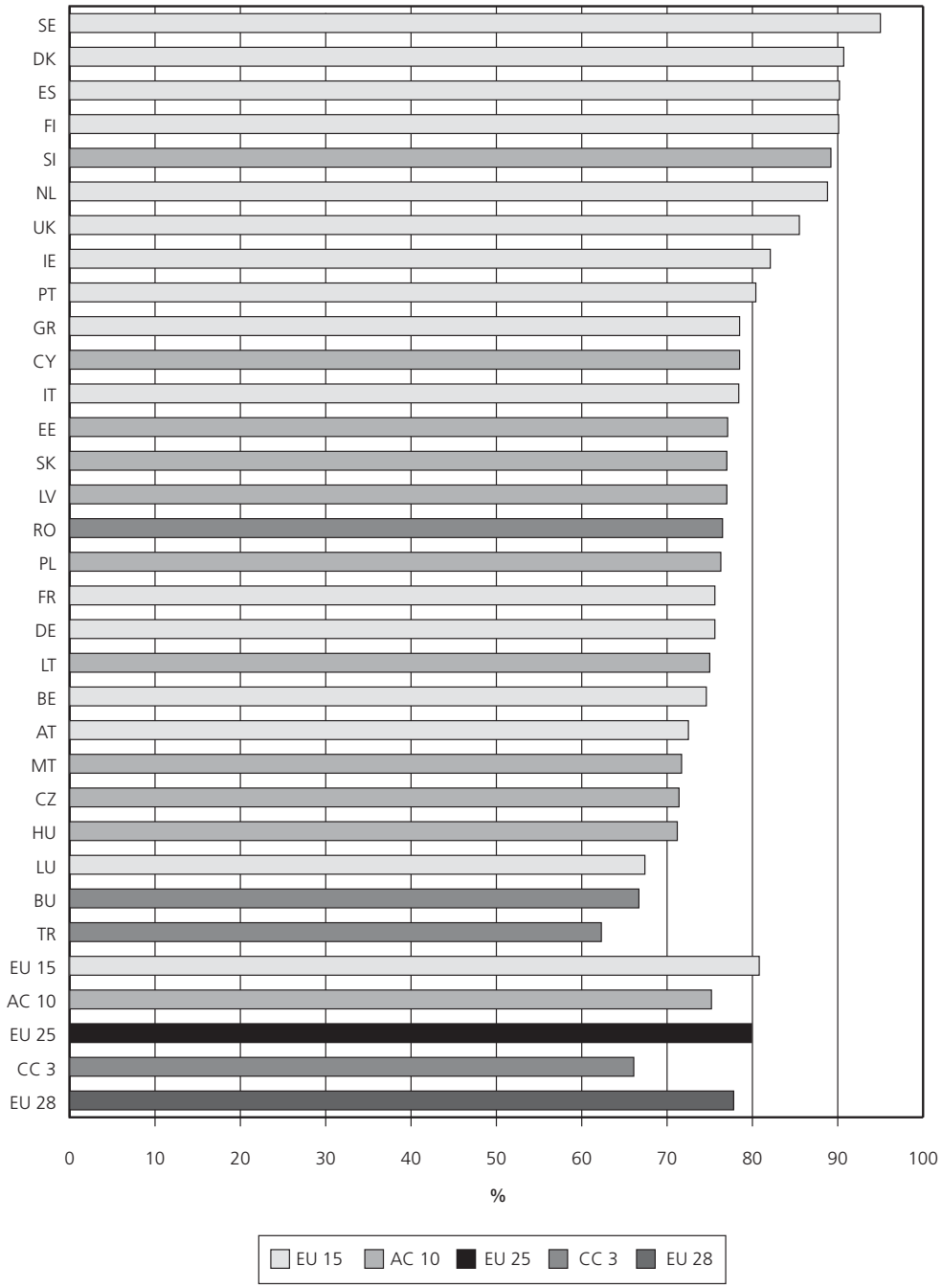
This is also interesting from another point of view: it was inevitably considered 'a woman's task' by those who did not regard it as a shared one. Going back some decades it is hard to believe that many people thought it should be done by the father as well. Of course innovations in this field could help bring about role change (cf. Gershuny, 1988), but this activity remains a very private form of caring. So it is interesting to see the differences across countries.

The country-specific distribution of belief in sharing gives a very similar picture to that found when using the summary index. There is a much bigger variance in the EU 15 countries than in the AC 10 countries. Belief in sharing is mostly found in the Nordic countries and in Holland, the United Kingdom and Ireland. At the other end of the scale lie Greece and Luxembourg. The continental

[3] Of course we should exclude Cyprus and Malta as well. We could consider including Romania and Bulgaria, but for this experiment only the seven remaining AC 10 countries are taken into account.

EU countries are in the middle, as are the acceding countries. The former Soviet Baltic countries have somewhat greater belief in sharing than the ex-communist central European countries. So accession will not increase the extent of the variation within the European Union.

Figure 24 Prevalence of belief in sharing changing nappies in 28 European countries



If socio-economic status is taken into consideration, slight influences are to be found. For this job gender seems to have a somewhat stronger influence: more women think that 'changing nappies' should be a shared task. Exceptions are Hungary, Malta and Slovenia, where there are no gender differences. It is possible to find differences between age groups as well: the younger the

respondent the stronger the acknowledgement of shared responsibilities. The exception is the youngest cohort: between 15 and 24 years old the spread of the belief in sharing is less than in the more 'affected' 25-39 year-old cohort.

There is no certain explanation for this (and the assumption is that new ideas spread more easily in the younger generations). But a likely reason for a weaker belief in sharing in the youngest cohort is that this particular task is remote from their everyday experience, so their answers are not as well grounded. This age-cohort phenomenon needs further analysis.

Level of education has the expected influence: the more educated someone is, the more inclined they are towards shared responsibilities. Country-specific differences can be found here as well: in certain countries the 'breaks' are sometimes stronger between the moderately and the more highly educated (Bulgaria, France, Germany), sometimes between the least and the moderately educated (Poland, Slovakia, Italy). These results correspond strongly with the age-specific ones, and the clear-cut influence of educational level is evident. So by considering one specific task the picture has been refined somewhat, without arriving at one that is really distinct.

Belief in gender-specific tasks

So far the country- and group-specific incidence of the idea that child rearing should be shared has been under investigation. However, in the case of some activities (changing nappies, dressing the children, putting them to bed) and in some countries, the idea of gender-specific responsibilities is also present. It is clear that the incidence of the idea of 'both-together' is low in some countries and activities. There is no need, to list these here; it is enough to describe how distinct gender-specific ideas exist for the different aspects of child rearing.[4]

An index was constructed with values between 0 and 1, where 0 means that a specific activity should carried out by the father, and 1 by the mother. The value 0.5 means that views are evenly divided between those who believe that the father is responsible, and those who think that the mother is responsible. It is quite an artificial point, but a good reference, because the length from this middle-point gives an idea of how unambiguous is the belief in maternal or paternal responsibility.[5]

For the computation the data was weighted by population size. The results represent the total European population, and the three European groups. There was no point in constructing an index for every country and every single task, because if there were gendered ideas present these had nearly the same pattern in all countries. The analysis would have been more complicated without getting a closer insight into the topics.

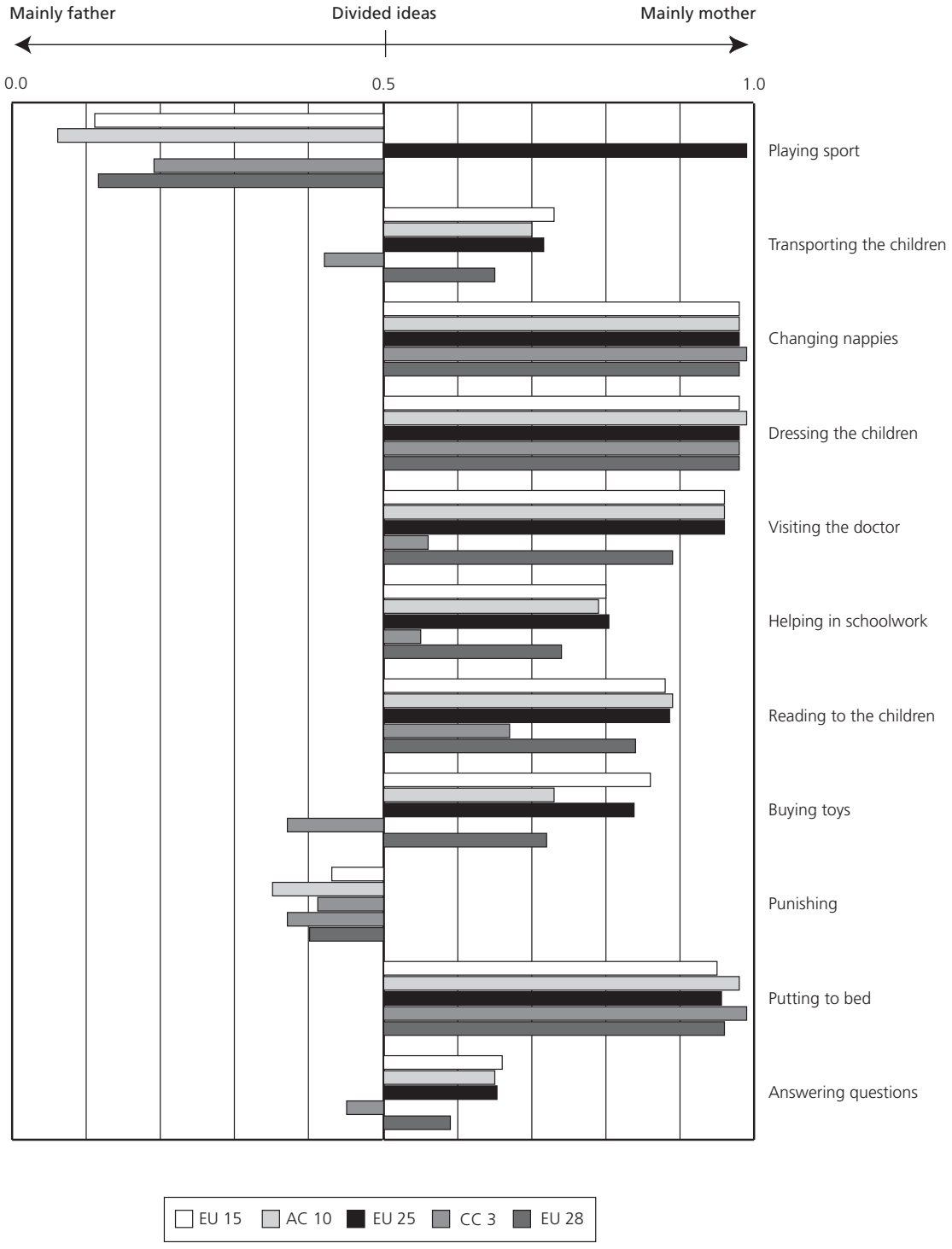
The other methodological option, reducing the numbers, which would mean adding every activity into one index, would have hidden the differences between activities. In this analysis, the countries are divided into three groups: the European Union countries (EU 15), the ten acceding countries

[4] Only gendered answers (e.g. 'mainly the mother', or 'mainly the father') are considered here.

[5] Counting the index we divided the number of answers indicating 'mothers activities' into the numbers expressing gendered beliefs for every activity.

(AC 10), and the three candidate countries (CC 3). The grand mean for the EU25 and for all 28 European countries in the survey is also mentioned.

Figure 25 The type of gendered ideas about child rearing and their intensity in Europe



The figures show quite unambiguously that, in the case of gendered beliefs, it is mainly mothers that are regarded as responsible for the different child rearing tasks (Figure 25, below). For the whole of Europe, this is the case for nine of the eleven tasks, leaving two for fathers (when they are not regarded as shared). But there are differences as to how unambiguous the gender-specific ideas are. 'Changing nappies', 'dressing the children', 'putting the children to bed' and 'visiting the doctor' seem clearly to be maternal tasks, but 'buying toys', 'answering important questions' or 'helping with schoolwork' are not so strongly skewed. In the last cases gender-specific notions are much more divided: most people think it is a mother's job, but a significant minority believe that this is the father's responsibility. As to the two activities where fathers are mainly regarded as responsible, 'playing sport with the children' is clearly a paternal task, but 'punishing' is very close to the reference-point where gendered ideas are divided between mothers and fathers.

Of course it should always be borne in mind that only 15 per cent of the population think that 'answering important questions' and 'punishing' should be gendered, whereas 44 per cent think this about 'changing nappies'. If those activities are categorised which a quarter of the European population think should be 'gendered', then one out of five is a male activity ('playing sport'). The gender divide is clear here, but it is not exclusive to one sex. (The argument over which activities are chores and which are pleasures will not be attempted here, because every activity can have elements of both, depending on the context (c.f. Pahl, 1984).

Looking at the differences between country groups, in most cases the intensity of gendered ideas (the length of the bars) between the EU 15 and the AC 10 is very similar. But the deviation of the CC 3 is remarkable. Three activities have a contrasting (male) gendered character ('transporting children', 'punishing children' and 'answering important questions'). That means that in the CC 3 countries five of the eleven activities are thought to be mainly a father's responsibility. On the other hand beliefs in the CC 3 countries are quite divided (shown by the very small deviation from the 0.5 reference point). This indicates that a substantial portion of the population have differing gendered ideas.

Nevertheless it can generally be concluded that where gender-specific ideas about child rearing are found, mothers are usually expected take responsibility.

Conclusions

In conclusion it should be stressed that the belief that child rearing is a shared responsibility of the mother and the father is the prevalent one in Europe. Much more than half the population in all countries affirm this view. In some countries, especially the Nordic ones, the overall level is about 90 per cent. On the other hand, where there *are* gender-specific views on child rearing, then the mothers are expected to be responsible. We can conclude from these results that ideas about sharing do not amount to strong barriers to the implementation of equal opportunity policies but rather are supportive of such policies.

Considerable differences between the European countries could be identified and these differences correspond strongly to the existence or otherwise of welfare state regimes. In countries where in-kind, universal and employment-related programmes are widespread, there is a much more widespread belief in sharing.

The acceding countries show lower variance on sharing ideals than do the EU 15 countries. After joining they will not increase the heterogeneity of the Union in that regard. On the other hand, with accession, the general extent of the idea 'both and shared' will be lower than before. Accession will 'strengthen' the country groups where the idea of sharing child rearing responsibilities is lower. For those areas of child rearing that are gendered it is mostly the females who are expected to be responsible. However, it is also possible to find some child-related tasks that are mainly ascribed to males.

Family policy in Europe 7

The formulation of public policy is a long process. Sometimes the emergence of a new social problem, at other times the growing importance of a particular body, could contribute to the debate and put new programmes on the agenda. New social policies are seldom simple translations of new theories, but they always incorporate elements of basic social scientific approaches. They are the result of different points of view and interests being taken into account; they then undergo a number of practical tests.

As a last step, they should be legitimised by the population or by their representatives. This can also contribute to the effectiveness of a social programme. Public programmes could be more effective if they met people's needs and preferences. So understanding people's attitudes towards public policy issues belongs to the search for the best policies. That is the aim of this chapter, to understand the basic pattern of attitudes towards family- and child-related public policy in different European countries.

A number of issues are important to the formulation of child- and family-related public policies. At least three of these are crucial to understanding such policies' aims, possible directions and probable workings. Gender relations, inequality developments and the emergence of new patterns of family formation ('low fertility') are the kinds of subject that must be understood when formulating new family policies.

Most widely known and extensively discussed is the persistence of gender differences: inequality of male and female wages, different levels of political participation and gender-biased division of labour. The increase in female employment, with the expansion of the service sector, has not solved the problem of 'equal wages for equal work'. Even if it had, there would remain the issues of hierarchy and occupational status.

Another aspect of gender inequality is this: that the increase in female employment has not led to a parallel decline in women's home duties. We cannot say there have been no changes (Gershuny, 1988), but overwhelmingly women are still responsible for the jobs at home even at a time of high female employment (the 'double burden'). So women (and sometimes men) struggle with the reconciliation of work and family, aiming to reach a manageable, if never ideal, work-family balance. Family policies cannot help taking this situation into account, as evidenced in several proposals and plans in the EU (van Stigt et al, 2000).

The sharp increase in female employment plays a central role in discussion of a 'second demographic transition'. Lesthaeghe and van de Kaa have underlined the spread of new forms of partnership (mainly cohabitation), the decrease in marriages and their fragility (high levels of divorce). Furthermore the decrease in childbearing, and the increase in births outside marriage and to lone-parent families, are central to these changes (Lesthaeghe, van de Kaa, 1987).

In addition to the growth of female employment, value shifts – towards a greater emphasis on the individual and on self-realisation – also play a central role. All the period fertility rates in Europe are currently below replacement level (below 2.1 children per woman). In most countries they are closer to one child than two. Surprisingly there is remarkable variation across Europe. The figure is quite high in France and Ireland and very low in Italy and Spain (see above). The literature on Italy and Spain refers not only to low fertility but to 'lowest low fertility'. The transformation of the

former communist countries has not contributed to a European reversal. On the contrary the former communist countries have undergone (and are still undergoing) a sharp decline in fertility. The total fertility rate in almost all countries is around 1.3.

As is generally the case, it has taken some time for this process to enter public awareness. It is clear now that, unless it reverses, the trend will have important consequences: the ageing of society and a decline in Europe's population. Whether public policy can seriously address this subject is hotly debated by the experts. This is because childbearing is a very private issue, and because the experts are divided over the results of public policy so far, and what effect it could have in the future.

Besides the ageing of Europe and its possible negative economic consequences, there is a tension between people's aspirations and their options that could justify a more active public policy in the area of the family. This tension suggests a need to introduce new measures.

The emergence of new types of inequality and a surprising generational change in recent decades (varying in depth from country to country) have also drawn attention to family policy. The risk of child poverty in developed countries has grown recently (Bredshaw et al, 2002), especially in the former socialist countries (UNICEF, 2001, Spéder, 2002, Spéder, 2003). It is quite clear that growing up poor has long-lasting consequence for individuals (their well-being and social position) as well as for their society (McLanahan, Garfinkel, 1996). More public attention should be given to this situation in the future.

The public and the politicians are now aware of the problems. But it is clear that they cannot all be dealt with by basic family programmes. Different types of measure address different social problems and the same interventions will not always be the most effective in every country. The aim of this chapter is to describe the attitudes of the public to possible measures, and to try to identify reasons for differing attitudes.

Family-related survey data

The Eurobarometer/candidate country data contain information from the general public. It consists of composite items, asking respondents which measures in support of family life they think the government should give priority to. The listed measures are sometimes directly and at other times indirectly related to family policy. The respondents could choose three from the items below:[6]

- parental leave;
- childcare arrangements;
- benefits while bringing up a child (child allowance);
- benefits during parental leave following childbirth;
- flexible working hours;
- availability of suitable accommodation;

[6] The wording of the question was: 'In order to improve life for families with children, which three of the following should the government make top priority?'

- lowering the cost of education;
- tax advantages for families with children;
- reducing unemployment;
- availability and affordability of methods of contraception.

In the next section the respondents' answers are analysed by country. European-weighted data cannot reasonably be used as the answers are really strongly associated with different national welfare regimes. A European perspective can be reached keeping the countries separate. This analysis should give a picture of the most sought-after child-related measures in different societies.

Main findings

Before going into details, the limits of the analysis should be clear: in the absence of detailed information for each country about actual provision by governments in the area of child-related social programmes, the responses have to be interpreted with great caution. Having kindergarten-places for every child aged 3-5 does not seem to be too urgent, nor a well elaborated parental leave system. Nevertheless, the answers give some indication of what the public sees as the main gaps in provision in these areas – whether they are mainly monetary (child support, maternity support), or institutional (nursery schools, unemployment). So they are worth examining on that basis.

This means that two important and potentially interesting directions cannot be followed. First the different welfare system operating in different countries cannot be taken into account, as this would require detailed country-specific descriptions of the available programmes. Secondly this study will not try to understand group-specific differentials, because there is insufficient information available about them. The assumption should not be made that the same social strata behave in the same way under different welfare regimes.[7] So both these directions would be misleading, given the range of possibilities offered by the available data. On the other hand the results from 28 countries provide an opportunity to understand general, country-specific attitudes toward child-related social policies. This is the approach taken here and an attempt will be made to identify differences between countries, and between groups of countries.

Table 15 lists the three most supported policy measures in each of the 28 countries. The extent of that support is given in parentheses. Before trying to identify some pattern, a very important feature of the distributions should be underlined. In one group of countries we find the measures clearly ranked. There are significant differences between the percentage of the population ranking particular measures first, second and third. This is the case with Malta, Denmark, the Czech Republic and Estonia. In other countries within this group (e.g. Poland, Sweden) only one measure stands out clearly from the others.

In the other distinct group there are no outstanding, clearly supported measures (e.g. Belgium, Holland, Slovenia, Lithuania). Whereas in the first group we can speak of clear-cut support for particular policy directions, in the second group people are divided or prefer a mix of policies.

[7] So countries could not be conflated in order to analyse the beliefs of social groups across borders.

Table 15 People's preferences about child-related policy measures in 28 European countries (the three most-supported policy measures, the ratio of mentions in parentheses; three measures could be mentioned)

Countries	first	second most mentioned	third
BG	Level of parental leave (61)	Child allowance (56)	Against unemployment (49)
CY	Child allowance (53)	Cost of education (44)	Level of parental leave (44)
CZ	Level of parental leave (59)	Child allowance (52)	Accommodation (41)
EE	Child allowance (69)	Level of parental leave (57)	Tax reliefs (37)
HU	Child allowance (55)	Level of parental leave (45)	Cost of education (40)
LV	Child allowance (69)	Level of parental leave (56)	Cost of education (44)
LT	Against unemployment (48)	Child allowance (44)	Tax reliefs (40)
MT	Available childcare (63)	Against unemployment (55)	Flexible working (40)
PL	Against unemployment (57)	Cost of education (44)	Level of parental leave (42)
RO	Child allowance(53)	Level of parental leave (42)	Cost of education (42)
SK	Child allowance(60)	Level of parental leave (40)	Against unemployment (38)
SI	Cost of education (40)	Level of parental leave (38)	Tax reliefs (36)
TR	Accommodation (69)	Level of par. leave (47)	Tax reliefs (47)
BE	Against unemployment (44)	Flexible working (42)	Child allowance (32)
DK	Flexible working (67)	Available childcare (45)	Duration parental leave (37)
DE	Tax reliefs (48)	Against unemployment (43)	Available childcare (36)
EL	Against unemployment (48)	Tax reliefs (39)	Child allowance (32)
IT	Against unemployment (47)	Flexible working (38)	Child allowance (33)
ES	Against unemployment (57)	Cost of education (46)	Accommodation (42)
FR	Against unemployment (51)	Flexible working (43)	Cost of education (43)
IE	Against unemployment (37)	Accommodation (36)	Tax reliefs (35)
LU	Flexible working (43)	Against unemployment (39)	Accommodation (30)
NL	Flexible working (49)	Available childcare (46)	Cost of education (45)
PT	Cost of education (51)	Child allowance(43)	Against unemployment (41)
UK	Available childcare (45)	Flexible working (38)	Against unemployment (36)
FI	Available childcare (52)	Tax reliefs (47)	Against unemployment (43)
SE	Available childcare (64)	Against unemployment (42)	Flexible working (40) Duration parental leave (37)
AT	Duration parental leave (41)	Accommodation (34)	Available childcare (33)

Question: 'In order to improve life for families with children, which three of the following should the government make top priority?'
Sources: EB 50.1., CC Eurobarometer 2002

Two tables offer some understanding of different attitudes. The first, Table 17, shows which programmes are most supported. This is a summary of Table 16, but the countries are brought together in the three groups relating to enlargement. This table also shows the three most popular measures for families with children. So it shows the most positive attitudes. The next table, Table 18, shows the other extreme: which measures are least chosen, and which three are least chosen in the 28 European countries. Results are shown in the country groups referred to above.

'Reducing unemployment' is the most popular measure. It has the greatest support in 8 of the 28 countries (Table 17). 'Flexible working hours', also closely linked to labour market policy, is the

most popular measure in three countries. The two together, the 'labour market' package, are the most supported in 11 of the 28 countries.

'Child allowance' ranked in second place, as the most important in 5 of the 28 countries (Table 17). In third place is 'availability of childcare' (4 out of 28). Before going into the country groups, it is worth analysing the distribution of the three most supported measures, because sometimes the second is not much less popular than the first (see Table 15).

Table 16 People's preferences about child-related policy measures in 28 European countries (the ratio of the supported policy measures; three measures could be mentioned)

Policy measures	Duration of parental leave	Availability of childcare	Child allow-ance	Level of parental leave	Flexible working conditions	Suitable accommoda-tion	Cost of education	Tax reliefs	Fight against unem-ployment
BG	29	20	56	61	9	23	25	19	49
CY	33	24	53	44	18	6	50	41	21
CZ	23	20	52	59	11	41	21	35	24
EE	15	14	69	57	8	22	32	37	35
HU	11	22	55	45	15	37	40	39	31
LV	19	12	69	56	5	12	44	29	37
LT	19	28	44	38	8	33	37	40	48
MT	30	63	25	16	40	20	15	25	55
PL	23	21	37	42	7	13	44	40	57
RO	23	27	53	42	10	22	42	34	32
SK	24	18	60	40	8	40	30	33	38
SI	34	27	35	38	10	28	40	36	31
TR	19	28	22	47	30	69	8	47	14
BE	25	31	32	17	42	15	31	26	44
DK	37	45	5	19	67	33	14	24	20
DE	8	36	31	16	35	35	29	48	43
EL	10	29	37	22	22	30	41	39	48
IT	23	16	33	20	36	25	30	28	47
ES	14	14	37	17	22	42	46	21	57
FR	31	26	34	13	43	21	38	24	51
IE	25	34	33	11	32	36	34	35	37
LU	29	26	29	9	43	30	21	25	39
NL	30	46	13	4	49	28	45	16	22
PT	16	24	43	20	25	20	51	20	41
UK	24	45	28	12	38	27	28	24	36
FI	17	52	27	9	31	40	17	47	43
SE	40	64	29	3	40	16	15	37	42
AT	41	33	31	26	31	34	24	27	29

'Reducing unemployment' is found among the top three most popular measures in 17 out of 28 countries (Table 17). For 'flexible working hours' the figures are 9 out of 28. 'Child allowance' is the second most supported measure, featuring in the first three in 13 of the 28 countries. In this table two measures increase their standing: 'level of parental leave' and the 'cost of education'.

There is strong support for these measures in 11 and 10 out of 28. There was little change in the level of support for 'duration of parental leave' and 'help for suitable accommodation'.

Interestingly we also find some of these measures among the least popular (Table 17). 'Flexible working hours' in eight out of 28 countries, 'level of parental leave' in seven and 'duration of parental leave' in six. How is it that quite often the same measures are the most popular and the least popular in different countries? The assessments of differences between country groups can help in understanding this paradox.

Table 17 People's preferences about child-related policy measures in different country-groups (the number of countries where a special policy measure is the most supported, or the three mostly supported)

Policy measures	Most supported				The three most supported			
	EU 15	AC 10	CC 3+	All	EU 15	AC 10	CC 3+	All
Fight against unemployment	6	2	0	8	12	4	1	17
Flexible working hours	3	0	0	3	8	1	0	9
Level of child allowance	0	4	1	5	4	7	2	13
Level of parental leave	0	1	1	2	0	8	3	11
Duration of parental leave	1	0	0	1	3	0	0	3
Availability of childcare arrangements	3	1	0	4	7	1	0	8
Suitable accommodation	0	0	1	1	3	2	1	6
Cost of education	1	1	0	2	4	5	1	10
Tax advantageous	1	0	0	1	4	3	1	8

Question: 'In order to improve life for families with children, which three of the following should the government make top priority?'

Sources: EB 50.1., CC Eurobarometer 2002

A more precise picture can be reached by comparing the country group answers: especially EU 15 with AC 10. The ranking of policy measures in the EU 15 and in the AC 10 is quite different (Tables 17 and 18). In the 15 European Union countries three measures do very well as the single most supported ones: 'reducing unemployment' (6 countries), 'flexible working hours' (3) and 'childcare arrangements' (3). Looking at the top three priorities, these same measures are included in 12, eight and seven countries. Summarising the EU 15 countries: regulatory (the 'labour market package') and in-kind measures ('childcare') receive the highest priority.

The priorities in the acceding countries are quite different. In four out of ten countries the 'level of child allowance' is the most supported measure, and in two countries it is 'reducing unemployment'. Two other measures are top in one country. Looking at the three most important measures, we see that in eight countries the 'level of parental leave' is among them; and the 'level of child allowance' is only in second place. In third place is the 'cost of education' ahead of 'reducing unemployment' (in second place among the single most popular measures). It is clear from this analysis that in the acceding countries monetary programmes aiming to reduce the financial burden of childbirth and child rearing have unambiguous support.

If we look at the least supported programmes, we find that those supported in the EU 15 (e.g. 'flexible work schedule') are very unpopular in the AC 10. And the other way round: very popular

measures in the AC 10 ('level of parental leave') are not so popular in the EU 15 (see Figure 23). So in the EU 15 and in the AC 10 countries there are different attitudes towards family measures. There are many reasons for this, but they are not testable using this data set. Certainly the different level of economic performance, especially economic decline compounded by the increase of inequality, could contribute to the difference, along with the heritage of the welfare/redistributive state and general attitudes toward the state.

It may be useful to look at the possible influence and/or relationship with some macro-social variables. The differences outlined above could be shown with the correlation between the degree of support for each measure and some important macro-social indicators (Table 22). From the macro-indicators available four were selected: GDP per capita (PPP), indicating countries' wealth; the 'level of employment' and the 'unemployment ratio' for the labour market situation; and the Total Fertility Rate (TFR), showing actual childbearing activity in a country. Causal models cannot be built, but it should be possible to see if there is any correlation between attitudes toward policy measures and important macro-indicators.

All the policy measures were analysed, but Table 19 shows only those that have a significant relationship with any of the macro-indicators. The ones that emerge are exactly those that were strongly supported in several countries.[8]

GDP per head: 'flexible working hours' and 'availability of childcare' are very popular in the richer countries with a high GDP. By contrast low GDP countries need a higher 'level of child allowance' and a higher 'level of parental leave'.

Level of employment: in countries with a high level of employment there is clear support for 'flexible working hours' and 'availability of childcare arrangements'. But there is a negative correlation with 'level of parental leave'. In countries with high employment flexible working conditions and good childcare arrangements make it easier to reconcile work and family life. The level of parental leave is not important in these cases.

Unemployment: logically high unemployment (restricted earnings) should be associated with monetary programmes, and lower unemployment with flexible working hours and childcare arrangements. 'Reducing unemployment' does of course correlate with the unemployment rate, but not with GDP or employment rate. It should be expected that in the case of unemployment 'flexibility', and 'childcare arrangement' are not issues, but levels of different benefits *would* make a difference to the unemployed.

Total Fertility Rate: we know that in recent years the relationship between the TFR and other macroeconomic indicators has changed and become fragile (Englehard et al, 2002). But is there any difference in its relationship with support for policy measures? There is some correlation between the TFR and the policy measures. In cases of relatively high TFR there is support for 'flexible working hours' and, to some extent, 'childcare arrangements'. It would be misleading to assume causality: that the level of the TFR influences the policy orientations. But the relationship should be stated. It is also worth mentioning that the 'level of child allowance' measure is more popular in lower TFR countries.

[8] Low support for other measures could be the result of country-specific circumstances.

Table 18 People's 'dispreferences' about child-related policy measures in different country-groups (the number of countries where a special policy measure is the least supported, or the three least supported)

Policy measures	The least supported				The three least supported			
	EU 15	AC 10	CC 3	All	EU 15	AC 10	CC 3	All
Fight against unemployment	0	0	0	0	0	1	1	2
Flexible working hours	0	6	2	8	1	9	2	12
Level of child allowance	1	0	0	1	3	1	0	4
Level of parental leave	7	0	0	7	14	2	0	16
Duration of parental leave	4	2	0	6	9	4	2	15
Availability of childcare arrangements	2	1	0	3	2	8	2	11
Suitable accommodation	1	1	0	2	2	3	1	6
Cost of education	1	1	1	3	6	2	1	9
Tax advantages	0	0	0	0	5	0	1	6

Question: 'In order to improve life for families with children, which three of the following should the government make top priority?'

Sources: EB 50.1., CC Eurobarometer 2002.

Table 19 Bivariate Pearson's Correlation between country-specific support of the policy measures and some macro-indicators of the countries

	Country-specific macro-indicators			
Policy measures	GDP per head (PPP)	Level of employment	Unemploy-ment rate	TFR
Fight against unemployment	ns	ns	.48	ns
Flexible working hours	.82	.49	-.64	.56
Availability of childcare arrangements	.48	.51	-.53	.44*
Level of child allowance	-.67	ns	.56	-.54
Level of parental leave	-.88	-.49	.51	ns
Cost of education	ns	ns	ns	-40*

All association mentioned significant at the 0.01 level, * is significant at the .05 level

Question: 'In order to improve life for families with children, which three of the following should the government make top priority?'

Sources: EB 50.1., CC Eurobarometer 2002

Once more no causality can be assumed, nor can any model be built. The data is not suitable. But the correlations show that support for policy directions is not arbitrary. The logical correlations support the presumption that with different levels of affluence and employment, people form different ideas about the components of an effective child-related public policy.

Conclusions

In conclusion, it seems clear from the data and the analysis that very different policy measures are supported in different countries. That is probably a response to different combinations of welfare programme in different countries, but it also reflects general economic developments and people's evaluation of their circumstances and surroundings.

Two groups of countries can be identified – the EU 15 and the ten acceding countries – where there is support for different family-, gender- and child-related policy measures. That seems to suggest that there is no uniformly supported measure that could be taken to adjust to European trends in low fertility, to combat child poverty, to enable better reconciliation of family and work and to increase the well-being of families. People in different countries and groups of countries expect their governments to act in different ways. Any European-wide effort has to take this into account if it is to command popular support.

Bibliography

Alter, G., 'Theories of fertility decline: a non-specialist's guide to the current debate', in Gillis, J.R., Tilly, L.A. and Levine, D. (eds.), *The European experience of declining fertility: a quiet revolution 1850-1970,* Oxford, Blackwell Publishers,1992.

Becker, G.S., *A treatise on the family,* Cambridge (Mass), Harvard University Press, 1981.

Bettio, F. and Villa, P., 'A Mediterranean perspective on the breakdown of the relationship between participation and fertility', *Cambridge Journal of Economics,* Vol. 22, 1998, pp. 137-171.

Birg, H., 'Auswirkungen und Kosten der Zuwanderung nach Deutschland', *Gutachten im Auftrag des Bayerischen Staatsministeriums des Innern,* Bielefeld, Institut für Bevölkerungsforschung und Sozialpolitik (mimeo), 2001.

Bongaarts, J., 'Fertility and reproductive preferences in post-transitional societies', *Population and Development Review,* Vol. 27, 2001.

Bongaarts, J. and Bulatao R.A. (eds.), *Beyond six billion: forecasting the world's population,* Washington D.C., National Academy Press, 2000.

Bradbury, B., Jenkins, S. P. and Micklewright, J., 'The dynamics of child poverty in seven industrialised nations', in *The dynamics of child poverty in industrialised countries,* Cambridge University Press, 2001, pp. 92-134.

Brewster, K.L. and Rindfuss, R.R., 'Fertility and women's employment in industrialized nations', *Annual Review of Sociology,* 2000, Vol. 26, pp. 271-96.

Castles, F.G., *Comparative public policy: patterns of post-war transformation,* Cheltenham (UK), Edward Elgar, 1998.

Chesnais, J-C., 'Determinants of below-replacement fertility', *Population Bulletin of the United Nations,* Special Issue Nos. 40/41, 1999.

Cleland, J. and Wilson C., 'Demand theories of the fertility transition: an iconoclastic view', *Population Studies,* Vol. 41, 1987.

Council of Europe, *Recent demographic developments in Europe 2000,* Strasbourg, Council of Europe, 2000.

den Dulk, L., van Doorne-Huskies, A. and Schippers J., Work-family arrangements in the context of welfare states, in *Work-family arrangements in Europe*, Amsterdam, Thela-Thesis, 2000, pp. 1-19.

Easterlin, R.A., 'The economics and sociology of fertility: a synthesis', in Tilly C. (ed.), *Historical studies of changing fertility,* Princeton, Princeton University Press, 1978.

Esping-Andersen, G., *The three worlds of welfare capitalism,* Cambridge, Polity Press, 1990.

European Economy, 'Public Finances in EMU – 2001', *Reports and Studies 2001,* No. 3, 2001.

Eurostat, *European social statistics: demography,* Luxembourg, Office for Official Publications of the European Communities, 2002.

Fahey, T., 'Trends in Irish fertility rates in comparative perspective', *Economic and Social Review,* Vol. 32, 2, 2001.

Freedman, R., Freedman, D.S. and Thornton A., 'Changes in fertility expectations and preferences between 1962 and 1977: their relation to final parity', *Demography*, Vol. 17, 1, 1980.

Gauthier, A.H. and Hatzius, J., 'Family benefits and fertility: an econometric analysis', *Population Studies,* No. 51, 1997, pp. 295-306.

Gershuny, J., *Changing time, the social economics of post-industrial societies,* University of Bath, 1988.

Goldstein, J., Lutz, W. and Testa, M. R., 'The emergence of sub-replacement family size ideals in Europe', *European Demographic Research Papers 2003,* No. 2, Vienna Institute of Demography in collaboration with the European Observatory on the Social Situation, Demography and the Family.

Golini, A. 'Levels and trends of fertility in Italy: are they desirable or sustainable?', *Population Bulletin of the United Nations,* Special Issue Nos. 40/41, 1999.

Kautto, M., Fritzel, J., Hvinden, B., Kvist,J. and Uusitalo, H., 'Introduction: how distinct are the Nordic welfare states?' in *Nordic welfare states in a European context,* London, Routledge, 2001, pp.1-17.

Lesthaeghe, R., 'The second demographic transition – an interpretation', in Mason K. O. and Jensen, A.-M. (eds.), *Gender and family change in industrial societies,* Oxford, Clarendon Press, 1995, pp. 17-62.

Lesthaeghe, R. and Surkyn, J., 'Cultural dynamics and economic theories of fertility change', *Population and Development Review,* Vol. 14, 1, 1988.

Lesthaeghe, R. and Moors, G., 'Recent trends in fertility and household formation in the industrialized world', *Review of Population and Social Policy,* No.9, 2000, pp. 121-170.

Macura, M., Mochizuki, S.Y. and Garcia, J.L., *Europe's fertility and partnership: selected developments during the last ten years.* Paper presented at the FFS Flagship Conference (unpublished), 2000.

McDonald, P., The 'tool-box' of public policies to impact on fertility – a global view. Paper presented at the seminar, 'Low fertility, families and public policies', European Observatory on Family Matters, Seville, Spain, 15-16 September 2000, (2000a). http://europa.eu.int/comm/employment_social/eoss/publications_en.html.

McDonald, P., 'Gender equity in theories of fertility', *Population and Development Review,* Vol. 26, 3, 2000b.

McLanahan, S. and Garfinkel, I., *Growing up with a single parent: what hurts, what helps,* Cambridge (Mass), Harvard University Press, 1994.

Mason, K.O., 'Explaining fertility transitions', Demography, Vol. 34, 4, 1997.

National Center for Health Statistics, *National Vital Statistics Report,* Vol. 48, 3 (March), Hyatsville, MD, National Center for Health Statistics, 2000. (www.cdc.gov/nchs)

New Chronos, Eurostat 'New Chronos' database web-site: theme 3 (population), domain: demography, table: fertility indicators, 2001. http://europe.eu.int/newcronos/access

OECD, *Maintaining prosperity in an ageing society,* 1998.

OECD, *Reforms for an ageing society,* Paris, Organisation for Economic Cooperation and Development, 2000.

OECD, *Ageing and income: financial resources and retirement in 9 OECD countries,* 2001.

Pahl, R., *Divisions of labour,* Oxford, Basil Blackwell, 1984.

Pearse, D., 'Changes in fertility and family size in Europe', *Population Trends*, No. 95, London, Office for National Statistics, 1999.

Robinson, W.C., 'The economic theory of fertility over three decades', *Population Studies,* No. 51, 1, 1997.

Schoen, R., Ashtone, N.M., Kim, Y.J., Nathanson, C. A. and Fields J. M., 'Do fertility intentions affect fertility behaviour?', *Journal of Marriage and the Family,* No. 61, 1999, pp. 790-799.

Spéder, Zs., *A szegénység változó arcai.* [The changing faces of poverty], Budapest, ARTT-Századvég, 2002, p. 263.

Spéder, Zs., 'Fertility behaviour in a period of economic pressures and growing opportunities – Hungary, the 1990s', in Kotowska, I. E. and Józwiak, J. (eds.), *Population of Central and Eastern Europe: challenges and opportunities,* Statistical Publishing Establishment, Warsaw, 2003.

Thomson, E. and Brandreth Y., 'Measuring fertility demand', *Demography,* Vol. 32, 1, 1995.

Thomson, E., 'Couple childbearing desires, intentions, and births', *Demography,* Vol. 34, 3, 1997, pp. 343-354.

UNICEF, 'A decade of transition', *Regional Monitoring Report,* No.8, 2001.

United Nations, *World population prospects: the 1998 revision,* Vol. III, Analytical Report, New York, United Nations, 2000.

United Nations Population Division, 'Future expectations for below-replacement fertility', *Population Bulletin of the United Nations,* Special Issue Nos. 40/41, 1999.

Van Sigt, J., van Doorne-Huskies, A. and Schippers, J., 'European regulations and initiatives on work-family balances', in den Dulk et al (eds.), *Work-family arrangements in Europe,* Amsterdam, Thela-Thesis, 2000, pp. 151-166.

World Bank, *Averting the old age crisis: policies to protect the old and promote growth,* Oxford, Oxford University Press, 1994.

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This report presents the views and experiences of the citizens of the new Europe regarding fertility and family issues. It includes 28 European countries in its scope, both the acceding and candidate countries as well as the current Member States of the EU, and is based on data from European Commission Eurobarometer surveys. In the light of current policy concerns around falling birth rates, with the consequent risk of a decreased workforce in the future, the report examines to what extent current family size corresponds to people's original aspirations and what impact this has on individual quality of life. It looks at factors influencing fertility trends across all countries such as women's higher educational levels and their participation in the labour force, different welfare models and shared responsibility between men and women for childcare and household tasks.

The European Foundation for the Improvement of Living and Working Conditions is a tripartite EU body, whose role is to provide key actors in social policymaking with findings, knowledge and advice drawn from comparative research. The Foundation was established in 1975 by Council Regulation EEC No. 1365/75 of 26 May 1975.

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