FERTILITY AND SOCIAL POLICY
Jonathan Bradshaw¹ and Shalhevet Attar-Schwartz²

Summary

This chapter explores the relationship between fertility and social policy using secondary analysis of the European Social Survey and comparative analysis of the relationship between fertility and social policies, including overall spending on families with children, the level of the child benefit package, the outcomes of policies to reconcile work and family life and the costs of child care. Theoretical discussion of fertility might indicate that social policies could influence fertility. However the chapter points out that fertility is a very complex phenomenon, which has been changing rapidly. While the way we measure fertility and the indicators of social policy available are very crude. Also discerning whether there is cause and effect or the direction of the relationship between policy and fertility is fraught and more or less impossible in simple bivariate analysis. The evidence that social policy has a direct effect on fertility is pretty thin. There appears to be quite a strong relationship between fertility and female labour participation but it is argued that this is more likely to be a function of the emancipation of women than specific policies to reconcile work and family life. This is indicated by a much stronger relationship between the prevalence of lone parent families and fertility. Clearly some policies do affect fertility in small ways and there are examples in the Swedish and French chapters in this book. But governments should not expect that there is a magic policy wand that will turn round sub replacement fertility levels. In fact it might be freedom from policy that matters – human capital and personal control of life provides the required security for child rearing – not policy.

¹ Professor of Social Policy, University of York, UK.
INTRODUCTION

Some of the theories or conceptual frameworks that seek to explain fertility suggest that policy might have an impact. McDonald (2000) for example, has proposed four theoretical perspectives to explain fertility (decline), which also nicely cover the disciplinary perspectives of economics, sociology, psychology and feminism.

- Rational choice theory
- Post materialist values theory
- Risk aversion theory and
- Gender equity theory

Of these, three could be related to policy.

Rational choice theory argues that the direct and indirect costs of having children outweigh the economic (if any) and psychological benefits. The obvious policy link is that transfers via taxes and benefits and subsidised childcare services can mitigate those costs.

Risk aversion theory argues that those (women) who have babies carry a risk that they will lose their place in the labour market and/or be left holding the baby alone on the breakdown of a parenting relationship. The policy response would be parental leave and job protection for the employment risks, and effective child support and lone parent support for the relationship breakdown risks.
Gender equity theory argues that women will restrict the number of children they will have if their opportunities in education and the labour market are severely curtailed by having children. There is an obvious policy link here – policies that help women reconcile work and family life and that encourage men to take a more active part in the domestic sphere could influence fertility.

It is most difficult to see how post materialist values can be influenced by policy, or at least not immediately. The argument here is that people (women) have become more individualistic and less prepared to put up with the squalor involved in having babies. This is actually the least convincing of the four perspectives on fertility, because we know that women (and men) still want to have more babies than they actually achieve – it is not (just) values, there are constraints on our capacity to achieve our fertility preferences. Further the hypotheses that increased female independence is associated with low fertility, and the traditional breadwinner family is associated with high fertility, is not supported by comparisons of current fertility levels, nor by trends in fertility over the last 30 years or so. As we shall see in rich countries low fertility is now associated with traditional family forms and low female labour participation.

Complex behaviour and simple methods with crude variables

To explore the relationship between fertility and social policy is extremely difficult. The first problem is that the decision to become a parent is itself “one of the most complex lifetime judgements that individuals or couples are called upon to make” (Hobcraft and
Kiernan 1995). We have reason to believe that fertility is a function of (in alphabetical order) climate, culture, biology, environment, ecology, economics, gender relations, genetics, geography, history, physiology, religion, social structure, values - even before we get to social policy. Given this, fertility is probably just too complex a phenomenon to be explained by the simple bivariate comparative analysis of the kind attempted in this chapter.

There are really only two methods available for drawing inferences about the relationship between social policy and fertility: quasi experiments in one country or region, these are policy interventions, whether deliberate or not, with some before and after assessment of their impact; or comparative analysis of fertility and social policy between countries or regions. For an unusual example that combines both methods see Bonoli’s (2008) research on fertility and social policy in Swiss Cantons.

We come to this subject as students of comparative family policy, so there is not much in this chapter on fertility experiments. The conclusion on them has tended to be that if policy interventions have had an effect they needed to be either very expensive or very draconian, and any impact on fertility tended to be short-lived.

Another problem is that the dependent variable, the fertility rate, has been extremely unstable over the last 30 years (and longer); or rather they have changed in different countries at different times. This is certainly partly because patterns of marriage and parenthood, female labour supply, contraceptive technology, and so on, have all been changing very rapidly, dramatically and
recently. We have no settled history. In seeking to relate fertility to policy we have had to cope with a moving target. If we had undertaken an analysis of the relationship between fertility and policy before 1980 we would have concluded that there is a negative relationship (and nearly did in Bradshaw and Piachaud 1980) – fertility had declined in the countries with strong family policies and been maintained in countries with weak family policies. But as Castles (2002) has pointed out, after 1980 the picture was transformed – the Northern welfare states either stopped their decline or had some recovery, whereas the Southern and East Asian welfare states’ fertility plummeted. Now one might conclude that fertility was being maintained by strong family policies or that it makes no difference.

It may be argued that recently fertility rates have stabilised and that it is a better time to make the examination. But France has certainly recovered very rapidly recently and some other countries may be following including the UK, the Netherlands and Sweden (whose fertility rate has followed the pattern of a yoyo for decades. For an explanation see Chapter X. Figure 1 gives the latest total fertility rates for 39 countries. Among these countries only Mexico is above replacement rate. Apart from that there is a bunching of two “families” of countries: Northern European and Anglophone countries (except Canada) having fertility rates above 1.7 and southern European, central European (including Germany and Austria) and East Asian countries below 1.5. One problem now is that even if fertility rates are more stable, they have converged and there is not much variation to explain. Also national “natural”
fertility rates are being influenced (upwards) in some countries by the fertility of recent inward migrants.

So the dependent variable is very difficult to interpret – it is an insecure foundation as a dependent variable.
Analysis of micro social data

It is possible to use proxies for total fertility rate. Cohort indicators such as completed family size are more reliable but they tell us nothing about the recent fertility behaviour of still fecund cohorts. Age specific fertility rates help a bit but they also fluctuate. For this chapter we have tried to discover whether comparable survey data can help us find a better variable. We have taken the third wave of the European Social Survey and for sixteen countries produced three fertility related variables

- The number of children that each woman aged 16-45 has had.
- The percentage of women aged 16-45 who have ever given birth.
- Mothers age at first birth of 16-45 women.

There are problems with sampling errors (base number for Germany = 630 women) and each of these indicators has their strengths and weaknesses (all would be altered by high age specific fertility rates). We have taken only 16-45 year old women so as to focus on currently fertile women. Table 1 summarises these data in rank order of countries. There are some interesting changes in rank order – for example France has comparatively late first births, but a high proportion of women have children and they tend to have more children. In contrast Germany has first births at younger ages but fewer mothers have children and they have fewer.
Table 1: Analysis of the European Social Survey 2006; women aged 16-45

<table>
<thead>
<tr>
<th>Number of children</th>
<th>Whether had children</th>
<th>Mean age at first birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>Yes (%)</td>
</tr>
<tr>
<td>Spain</td>
<td>0.85</td>
<td>Spain</td>
</tr>
<tr>
<td>Germany</td>
<td>0.96</td>
<td>Finland</td>
</tr>
<tr>
<td>Estonia</td>
<td>0.98</td>
<td>Germany</td>
</tr>
<tr>
<td>Finland</td>
<td>1.00</td>
<td>Sweden</td>
</tr>
<tr>
<td>Poland</td>
<td>1.00</td>
<td>Poland</td>
</tr>
<tr>
<td>Portugal</td>
<td>1.02</td>
<td>Slovenia</td>
</tr>
<tr>
<td>Slovenia</td>
<td>1.03</td>
<td>Norway</td>
</tr>
<tr>
<td>Sweden</td>
<td>1.06</td>
<td>Estonia</td>
</tr>
<tr>
<td>Belgium</td>
<td>1.10</td>
<td>Switzerland</td>
</tr>
<tr>
<td>Switzerland</td>
<td>1.12</td>
<td>Slovakia</td>
</tr>
<tr>
<td>Bulgaria</td>
<td>1.13</td>
<td>Belgium</td>
</tr>
<tr>
<td>Slovakia</td>
<td>1.15</td>
<td>Denmark</td>
</tr>
<tr>
<td>Denmark</td>
<td>1.19</td>
<td>Portugal</td>
</tr>
<tr>
<td>UK</td>
<td>1.21</td>
<td>UK</td>
</tr>
<tr>
<td>Norway</td>
<td>1.27</td>
<td>France</td>
</tr>
<tr>
<td>France</td>
<td>1.29</td>
<td>Cyprus</td>
</tr>
<tr>
<td>Cyprus</td>
<td>1.51</td>
<td>Bulgaria</td>
</tr>
</tbody>
</table>

Note: Design weights applied.

We have run regressions on each of these indicators with the country as a dummy and controlling for age (except for mean age at first birth), marriage status, educational level, satisfaction with current living standards, ethnicity, and religious affiliation.

Age, marriage, and belonging to a religion have a positive relationship with the number of children achieved and years of education and living comfortably have a negative relationship. Having controlled for these, there are a number of countries where the number of children achieved is not significantly lower than the base (and highest) case (Cyprus) - including Denmark, France, the UK, Norway and Sweden. These may be countries where policy is boosting the number of children over what it might have been, given the characteristics of the mothers. In the other countries having controlled for these factors the number of children is still significantly less than Cyprus.
Age, marriage, living comfortably and years of education all increase the odds of having had a child. Having taken account of these factors there are countries where the odds of having had a child are significantly higher than Cyprus (the base case) – including France, the UK and Slovenia. Again those countries with higher odds of having children having controlled for other factors may be the result of social policy.

Living standards and educational level are positively related to later ages at birth. Belonging to an ethnic minority is associated with younger birth ages. Having controlled for these factors most countries still have significantly higher mean age at birth than the base case Cyprus. The policy significance of this is that despite having older mean ages at first birth some (but not all) of them are more likely to have had children and to have had more children. Only France and the UK have a significantly higher mean age at birth and higher odds of children and no lower numbers of children.
### Table 2: Regression analysis of fertility variables. Base case=Cyprus. Women aged 16-45

<table>
<thead>
<tr>
<th></th>
<th>Number of children (N = 6912)</th>
<th>Odds of having children (N = 6912)</th>
<th>Mean age at first birth (N= 3934)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Beta</td>
<td>EXP(B)</td>
<td>Beta</td>
</tr>
<tr>
<td>(Constant)</td>
<td>-1.65</td>
<td>17.248***</td>
<td></td>
</tr>
<tr>
<td>Belgium</td>
<td>-.048**</td>
<td>1.27</td>
<td>.104***</td>
</tr>
<tr>
<td>Bulgaria</td>
<td>-.077***</td>
<td>1.27</td>
<td>-.036</td>
</tr>
<tr>
<td>Switzerland</td>
<td>-.067***</td>
<td>0.62</td>
<td>.175***</td>
</tr>
<tr>
<td>Germany</td>
<td>-.113***</td>
<td>0.63</td>
<td>.125***</td>
</tr>
<tr>
<td>Denmark</td>
<td>-.029</td>
<td>1.58</td>
<td>.092**</td>
</tr>
<tr>
<td>Estonia</td>
<td>-.049***</td>
<td>1.38</td>
<td>-.014</td>
</tr>
<tr>
<td>Spain</td>
<td>-.100***</td>
<td>0.67</td>
<td>.159***</td>
</tr>
<tr>
<td>Finland</td>
<td>-.044**</td>
<td>1.10</td>
<td>.095***</td>
</tr>
<tr>
<td>France</td>
<td>-.014</td>
<td>1.75**</td>
<td>.138***</td>
</tr>
<tr>
<td>UK</td>
<td>-.027</td>
<td>1.89**</td>
<td>.106***</td>
</tr>
<tr>
<td>Norway</td>
<td>.009</td>
<td>1.65</td>
<td>.066**</td>
</tr>
<tr>
<td>Poland</td>
<td>-.063***</td>
<td>1.07</td>
<td>.001</td>
</tr>
<tr>
<td>Portugal</td>
<td>-.124***</td>
<td>0.76</td>
<td>.107***</td>
</tr>
<tr>
<td>Sweden</td>
<td>-.026</td>
<td>1.56</td>
<td>.094***</td>
</tr>
<tr>
<td>Slovenia</td>
<td>-.039*</td>
<td>1.81**</td>
<td>.025</td>
</tr>
<tr>
<td>Slovakia</td>
<td>-.047**</td>
<td>1.03</td>
<td>-.040</td>
</tr>
<tr>
<td>Age of respondent</td>
<td>.389***</td>
<td>1.16***</td>
<td>-----</td>
</tr>
<tr>
<td>Ever married (yes)</td>
<td>.356***</td>
<td>12.36***</td>
<td>.014</td>
</tr>
<tr>
<td>Living comfortably</td>
<td>-.029*</td>
<td>0.71***</td>
<td>.064***</td>
</tr>
<tr>
<td>Years of full-time education completed</td>
<td>-.152***</td>
<td>0.89***</td>
<td>.334***</td>
</tr>
<tr>
<td>Belonging to a religion (yes)</td>
<td>.026*</td>
<td>0.94</td>
<td>.033*</td>
</tr>
<tr>
<td>Minority ethnic group in country</td>
<td>.004</td>
<td>0.84</td>
<td>-.043*</td>
</tr>
<tr>
<td>Adjusted R Square</td>
<td>0.47</td>
<td>0.65</td>
<td>0.22</td>
</tr>
</tbody>
</table>

*p < .05, ** p < .01, ***p < .001 (design weights applied)

This kind of comparative analysis of micro-social data enables the exploration of factors associated with fertility having controlled for socio-demographic factors. When a country has higher or lower outcomes having controlled for these factors then it suggests that something might be different. But is does not tell us what might be different. It may not be policy, it may be culture or climate or pollution or any of the other possible factors discussed earlier. If it is policy we are left clueless about which policy. To end up with
France and the UK as countries with higher than expected numbers of children and more women having had children seems curious. France has over 100 years of pro-natalist policies and in the UK fertility has never been an explicit public concern or the focus of policy.

Policy

So we need to try to focus more on policy. However the explanatory (policy) variables are, if anything, even more problematic than the dependent fertility variable. There are a number of different problems.

First there is more than one relevant policy – certainly potentially relevant are child benefits, tax benefits, housing benefits, the costs of childcare, education and early education, and health - all these have an influence of the costs of a child. Then parental leave and parental benefits may matter. So may job security, carers’ leave, holiday entitlement. Then for lone mothers, child support policy, rights to be an unwaged carer, the generosity of in-work and out of work benefits may all be important. Then, arguably, the framework of law governing marriage and divorce law, paternity and maternity, repartnering, remarriage, fertility treatment, contraception and abortion may all play a part. Then the regulation of gender pay differentials and minimum pay may play a part.

Indeed the relevant policy is so varied and complicated that we can really only make sense of it in terms of packages. One way to manage packages is to use as our indicator of policy and indicator
of public policy effort on behalf of families with children. OECD has recently begun to publish data that takes account of spending on cash benefits, services and tax expenditures, which is a great improvement on what has gone before, though it is not very up-to-date – the latest data for 2003 is presented in Figure 2.

Figure 2: Family spending in cash, services and tax measures, in percentage of GDP, in 2003

![Figure 2: Family spending in cash, services and tax measures, in percentage of GDP, in 2003](http://www.oecd.org/dataoecd/55/58/38968865.xls)

Figure 3 shows the relationship between the fertility rates from Figure 1 and the proportion of GDP spent on families from Figure 2 (for those countries with both sets of data but excluding Mexico). The correlation coefficient is $r=0.56$ and it is significant (at the 0.01 level). Is it possible to conclude that family spending explains about 30 per cent of the variation in fertility? Not really. There are a number of big outliers - the USA and New Zealand have high fertility and low family spending. Even if it was argued that the US
and NZ fertility rates were “artificially” high because of their migrant, and in the case of NZ, Maori, populations, it would still be necessary to explain Hungary, Austria and Germany with very low fertility and high family spending. Further, of course, a significant association does not imply cause. Even if cause could be implied there are questions about the direction of cause and effect - is the spending influencing fertility or is the fertility influencing spending? Countries with high fertility rates will have more children and therefore need to be spending more. Or in countries with fewer families with children there may be less electoral pressure on politicians to improve spending on families.

Duensing (2006) has also pointed out that while family spending increased faster than the growth of GDP between 1980 and 2002 in all OECD countries except the Netherlands and the US but there was no relationship between changes in spending and changes in fertility.
The OECD and others (Bradshaw and Piachaud 1980, Bradshaw et al 1993, Bradshaw and Finch 2002, Bradshaw and Mayhew 2006 and Bradshaw 2006) have developed a method for comparing the generosity of the level of the child benefit package using standard model families, and data derived from this kind of work can be used to represent differences in the efforts that countries make to mitigate the costs of child rearing. These can be and have been (Bradshaw and Finch 2006) related to fertility levels. We develop this approach further below.
It is not without its problems to summarise the systems of financial support for families. Their level varies by income, family type and size and in some countries by the age of children. It varies considerably by what assumptions are made about housing, the number of earners and childcare needs. There are thus problems in producing a single summary indicator of the value of the child benefit package to set against fertility.

In figures 4a to c we have presented the results of an analysis of the most recent data from the OECD on the level of child benefit packages. This is our own analysis of the OECD tax benefit calculator\(^3\) for 2005. Figure 4a presents a summary of the value of the package for one earner couples and lone parents each with two children at three earnings levels. The percentage shown is the average of the percentage difference in the net income of the families with children, over childless couples on the same earnings in the case of couples, and over childless singles in the case of lone parents. It is a measure of the contribution of the state to the costs of child rearing.

\(^3\) [http://www.oecd.org/document/18/0,3343,en_2649_34637_39717906_1_1_1_1,00.htm](http://www.oecd.org/document/18/0,3343,en_2649_34637_39717906_1_1_1_1,00.htm)
Figure 4a: “Average” child benefit package 2005

Figure 4b shows (only for couples) how the value of the child benefit package varies with earnings. In all countries the package is of greater value at low earnings and some countries do not pay any child benefit package when earnings are high.

Figure 4b: Child benefit package for couples 2005

Figure 4c shows the same data for lone parents. The ranking of countries is rather different in these two charts, which is an
indication that countries are making rather different judgements of the relative needs of (low income) couples and lone parents or about whether they want to encourage them.

Figure 4c: Child benefit package for lone parents

We have used the data from Figure 4a in the following comparison of the relationship between fertility rates and the child benefit package. This produces a rather similar picture to overall spending on family benefits (not surprisingly given that the two independent indicators are highly correlated $r=0.66$). The correlation between fertility and the child benefit package is 0.51 and significant. But again the relationship is not particularly convincing and there are substantial outliers. New Zealand and
France seem to achieve undeserved fertility levels and the Czech Republic, Hungary and Germany do worse than they deserve.

Again there are the caveats about cause and effect, though the endogeneity problem is arguably not as great – the level of child benefit package is not a direct function of the number of children. Though the argument about political power remains.

Perhaps the major argument against this being a causal relationship is that it does not make sense. In all countries the state contributes so little to the cost of a child that it is hardly likely to determine fertility and the small differences between what different states contribute are hardly likely to explain the differences in fertility between states. It is just not conceivable that parents sit down and say to each “Gosh we can get $20 per week in Earned income Tax Credit, let’s have a(nother) baby!”. Or if they did they would be making a bad financial mistake.

**Figure 5: Fertility and the child benefit package**
What about the other social policies that may be influencing fertility. Here we become increasingly unstuck. More progress has been made in comparisons of the financial packages for children than in the development of indicators of the service and legal structure elements. Gornick and Myers (2003) produced an index of policies for reconciling work and family life and Finch (2006) has used radar charts and the “surface measure of overall performance” (SMOP) techniques to rank the extent to which gender is defamiliarised by parental leave for eight countries. She found that the more the policy support for dual earning /dual caring, the higher the completed fertility rate. However the relationship was rather dependent on Iceland, which is an extraordinary outlier with a completed family size for the 1965 cohort of just under 2.4. Sleebos (2003) produced a composite index of work/family
reconciliation, which produced an R square of 0.27 with the fertility rate. The synthesis report of the Babies and Bosses series (OECD 2007) concluded that

“all policies which enhance female labour force participation may also help to avoid very low fertility rates. The Babies and Bosses reviews (OECD 2007) found that systems which provide a continuum of support to families…. perform best in helping parents reconcile work and family life. Such an approach stimulates birth rates ……..”. P18.

They concluded that only the Nordic countries, Hungary and, to a lesser extent France and Quebec, provide such a coherent system of supports. Why then is Hungary’s fertility rate at 1.32 in 2005?

Given the difficulties of measuring the policies that reconcile work and family life we can produce some indicators of their outcomes –
In Figure 6 the female labour participation rate 2006 (OECD 2007 table 1.1) is correlated with fertility. This is the closest relationship so far (the R square is 0.4 though to get this we have excluded Mexico). In general those countries that have higher female participation rates have higher fertility levels. They may have higher female participation rates because of policies that enable women to reconcile work and family life. Thus those policies may enhance fertility. But France and Ireland are outliers with high fertility and lower female labour participation. Switzerland and Korea have lower fertility than their female labour participation would suggest. There are the usual caveats about cause and effect and endogeneity – in this case mothers may be employed to fund their larger families. Our guess is that the level of female
emancipation is an intervening variable – the greater the emancipation, the more women work, the more they work the more independent they are and the better off the family is and that is a securer base for child rearing. In that context policies reconciling work and family life are marginal.

Figure 6: Fertility and female labour participation

There is some justification for that line of argument in the next two charts. It might be expected that policies that enable lone parents to work might indicate that a country has developed strong policy measures to reconcile work and family life. However it can be seen in Figure 7 that there is no relationship between the lone parent employment rate and fertility, the correlation is $r=-0.32$ and it is not significant.
However (perhaps curiously) there is a very strong relationship between fertility and the prevalence of lone parent families. In Figure 8 – the more lone parents the higher the fertility (r=0.74). Of course it would be most unwise to conclude that policies, which undermine parental relationships and increase divorce, would increase fertility! In fact the opposite is probably true – divorce and relationship breakdown can be expected to interrupt fertility. What we suggest is going on here is that the prevalence of lone parents is a good indicator of female emancipation and liberty and fertility is associated with that.
Perhaps the most critical determinant of the ability to reconcile work and family life is childcare. Figure 9 compares fertility levels with the costs of childcare (based on OECD 2007 Chart 6.7). It can be seen that there is no relationship ($r=0.34$ not significant) – if anything the countries with higher childcare costs have higher fertility!
No one has attempted to combine the tax benefit package and the reconciling work and family life/parental leave packages into a single predictive family policy variable and there are no summary measures as far as we are aware on the other relevant family policies that enable us to relate them to fertility. This is one reason why Rijken (2006) used a kind of fuzzy-set qualitative analysis when she tried to explain fertility differences using economic, cultural and institutional factors. She had to conclude that

“This similarity in family policy however does not lead to the same clusters in fertility outcomes …..Therefore we conclude that cross-national variation in fertility rates can only be
explained by configurations of factors (and) that different configurations of factors can lead to a high fertility outcome”.

(p156.)

Another reason to be anxious about the impact of policy, or at least for approaching policy in a rather disaggregated way, is the evidence now emerging that it is the better educated and better off parents who are having the babies in the most advanced welfare states. Forssen and Ritakallio 2006 (Figure 9.1) found that the proportion of 36-46 year old women having no children was lower among the better educated in Denmark, Finland, Sweden and Belgium and that the better educated also tended to have achieved more children. However, they found that this was not yet the case in Germany, the UK, France, Greece, Ireland, Italy Portugal and Spain. There is also evidence from the same source that for the Nordic countries’

“favourable living conditions generally increase the likelihood of transition to parenthood” p176. Among “childless 18-40 year old women the ones, who had their first birth were more likely not to be living in poverty, to be home owners and to be living in spacious dwellings (not in flats of apartments) and this was true not just for the Nordic countries but also all the other countries studied (Germany, Netherlands, UK, Belgium, France, Greece, Ireland, Italy, Portugal and Spain)”

Similar results were found by Duensing (2006) modelling the number of children using LIS data.
What this might indicate is that it is not social policy that matters now, it is human capital, a sense of security, power in the market place - in fact, possibly that an independence from social policy is what matters to fertility.

CONCLUSION

The relationship between fertility and social policy is very difficult to analyse. Neither the current fertility indicators nor the variables available to measure social policy are very good. At a national level policies may have discernible effects. Some Governments clearly believe that they do, and adjust social policies in the hope that it will lead to increases in the fertility. However the evidence is weak and the observed effects are small. It is difficult to understand how government financial support for children could influence fertility given how little it is even in the most generous welfare states. Of course there are other very good reasons for providing financial support for families with children – to relieve child poverty (which has increased in most OECD countries in the last five years) or achieve greater parity of sacrifice.

If explicitly pro-natalist policies don’t work, what might? It is possible that a national ethos around children might be effective. The status of children is, for example, very different in France – there are policies that underwrite this – large families have heavily subsidised fares on public transport and free entry to museums. But these reflect a longstanding national consciousness - that children are a national resource and child bearing is not just a private matter. Ethos is a fuzzy, imprecise word, but it may be
more influential than specific policies, though policies may influence it.

The prospects are that fertility will not recover to replacement levels. Birth control technology is improving and still a proportion of the fertility we have is the result of unexpected, unwanted or chance pregnancies. Losing them by better contraception will lower fertility. The biology is probably not getting better – certainly the growth of obesity and sexually transmitted diseases like Chlamydia will have a downward pressure on fertility. Increased female labour participation increases the indirect costs of having children but the evidence suggests that eventually it may lead to higher levels of fertility, as does a more equitable distribution of domestic labour between men and women

REFERENCES


