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**United Nations Expert Group Meeting on
Policy Responses to Low Fertility**

New York, 2-3 November 2015

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Department of Economic and Social Affairs
Population Division

United Nations Expert Group Meeting on Policy Responses to Low Fertility

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Report of the Meeting



United Nations
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The Department of Economic and Social Affairs of the United Nations Secretariat is a vital interface between global policies in the economic, social and environmental spheres and national action. The Department works in three main interlinked areas: (i) it compiles, generates and analyses a wide range of economic, social and environmental data and information on which States Members of the United Nations draw to review common problems and take stock of policy options; (ii) it facilitates the negotiations of Member States in many intergovernmental bodies on joint courses of action to address ongoing or emerging global challenges; and (iii) it advises interested Governments on the

theme of the session (

countries such as Singapore and China, experts

expensive property market, together with an unstable job market, was thought to impact fertility decisions, although it seemed not to influence decisions about the first birth as much as higher-order births.

Leave policies

Based on the findings from 18 case studies presented, the experts concluded that maternity, paternity and parental leave paid at a high level of wage replacement and for moderate durations appeared to have a positive influence on fertility behaviour. It was observed that excessively long parental leave entitlements could result in human capital deterioration, and thus could be ineffective in removing the forced choice between having a career and childbearing. In France, for example, women taking parental leave had a reduced salary after returning to work, amounting to roughly 10 per cent for every year of leave, a penalty that persisted over time. The experts observed that parental leave entitlements that were for short durations or poorly paid, as in Australia and Singapore, for example, tended to be similarly ineffective because they did not provide the necessary income security.

Childcare services

The experts noted that the availability

choice, participants also noted the increase in childlessness and the use of assisted reproductive technologies.

Immigration

The experts observed that many low-fertility countries, especially in Europe and Northern America, had immigration flows coming from higher fertility countries. Migrant women tended to have slightly higher fertility than their native-born counterparts. In the short run, higher fertility among migrants boosted period fertility rates both because the age distribution of migrants was concentrated around the peak childbearing ages and because some migrants waited to have children until they had settled in the destination country. Over time, the fertility behaviour of migrants who arrived as children and that of children born to immigrants tended to converge to the average of the destination country. The experts concluded that the overall effect of immigration on the fertility level of the destination country tended to be small.

Diversity within societies

The discussion highlighted the significance of diversity within societies for fertility behaviour. Within countries, fertility patterns varied according to ethnicity, as well as level of education and other socio-economic factors, which were reflected in diverse age patterns of childbearing across different sub-groups of the population. Experts stressed that taking diversity into account provided information about possible underlying causes of declining fertility, and underscored the need for nuanced national policy packages to address low fertility and its consequences.

Policy stability

Several experts emphasized that policy stability could affect fertility decisions. The fluctuation of policies with election cycles or in situations of dramatic political transition impaired the trust families had in policy when making fertility decisions. In Hungary, for instance, family policy became a battleground within the modern capitalist period, which began in 1989, as elected governments alternated the family policy agenda about every four years. This created uncertainty among Hungarians regarding the long-term stability of family benefits.

CONCLUSIONS

The expert group concluded that fertility changes occurred within, and were mediated by, the institutional context of a country, involving both formal policies and informal norms associated with cultural and socio-political structures and history. There was neither a single pathway to very low fertility nor one policy or policy package that led to near replacement-level fertility. The case studies presented at the meeting showed that, in countries experiencing low fertility, factors that facilitated entry into adult roles, such as finishing school, obtaining a job, and establishing an independent household tended to be associated with earlier and higher fertility. In addition, any factors that reduced the incompatibility of parental roles with work roles also tended to support earlier and higher fertility.

The meeting highlighted the importance of policy responses in promoting family-friendly employment environments, gender equity, childcare and leave benefits for parents, flexible education systems, availability of housing for young families and government subsidies for raising children. It also emphasized the importance of a human rights-based approach to fertility

RECOMMENDATIONS

The key recommendations that emerged from this expert group meeting include:

There is no

fertility behaviour and demographic outcomes, and to apply research findings in the study of social movements and cultural change. To monitor change in this area, experts suggested developing a measure of a - incorporating qualitative as well as quantitative measures.

It is important to identify

11:00 – 11:15 Break

11:15 – 12:45 Session III: Responses to low fertility and population ageing

Moderator: *Renata Kaczmarek*,

ANNEX 2: DISCUSSION QUESTIONS

Session III: Responses to low fertility and population aging

What have been the main concerns about low fertility and population ageing in your country (region)?

What specific measures have been adopted by the government(s) in your country (region) to address the consequences of low fertility? (immigration, age at retirement, reformed pension system, more women in labour force, etc.)

Can you comment on the effectiveness of these policy measures? Why what conditions have made them effective (ineffective)?

Session IV: Policy options in countries with very low fertility

What factors have contributed to very low level(s) of fertility in your country (region)? (Include institutions and policies that may have inadvertently affected fertility.)

What specific measures has (have) the government(s) in your country (region) adopted to facilitate childbearing or, if any, to specifically to increase the level of fertility? (leave policies, financial support or tax benefits, child care, flexible work arrangements, etc.).

Have they been effective? Which ones? Why what conditions have made them effective (ineffective)? Will they work in other countries or settings with very low fertility?

Session V: Policy lessons from countries with near-replacement fertility

Are there public policies and/or institutional conditions that have led to fertility near replacement level in your country?

Has the government(s) in your country (region) taken concrete policy measures to facilitate childbearing? What specific measures have been adopted? (leave policies, financial support or tax benefits, child care, flexible work arrangements, etc.)

Have they been effective? Why what conditions have made them effective (ineffective)? Will they work in other countries you know?

Session VI: Policy options for countries approaching low fertility

What lessons can countries approaching below-replacement fertility learn from those countries that have had below-replacement fertility?

Can effective policy approaches to facilitate childbearing in one country be applied in other countries, and how?

ANNEX 3: LIST OF PARTICIPANTS

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