

Changes in European Welfare State Regimes as a Response to Fertility Trends: Family Policy Perspective

Prof. Dr. Suzana Bornarova

University, Ss Cyril and Methodius-Skopje

Assoc. Prof. Dr. Natasha Bogoevska

University Ss Cyril and Methodius-Skopje

Ass. Prof. Dr Svetlana Trbojevik

University Ss Cyril and Methodius-Skopje

Abstract

Following 1945, that is the Second World War, Europe faced a huge demographic increase in the number of births, known as baby-boom. Encouraged by the improvement of the living conditions after the devastating war, the return of the optimism, opening of the employment opportunities and the renewal of the idea about the family, this demographic trend entailed the so-called familism tide. In the mid 1960-ies however, demographic indicators in almost all European countries began to change suddenly. Massive development of contraception, increased birth control and family planning, as well as higher employment of women and their integration in the labour market, took place. As a result of these trends, in the 1970-ties European countries faced a considerable drop in fertility rates. This trend reached its peak during 1970-1980-ties when a dramatic drop in fertility rates took place, known as baby-bust. As a consequence, almost everywhere in Europe, the fertility rate dropped below the level needed for simple population reproduction or below 2.1 children per woman. Several related trends also contributed to the change in the demographic picture of Europe, such as: dropping birthrates, shrinking of the population, delay in births (increase in the age of birth of the first child), increase in the number of one-child families, as well as growth in the number of couples without children (universality of births is no longer present – at least 1 child per family). Similar trends are evidenced in the countries of Central and Eastern Europe (CIE), with one considerable difference – they took place around a decade later compared to the developed European countries. One common characteristic which shaped the demographic changes in CIE countries was the fact that they occurred simultaneously with the radical changes of the societal system from socialism towards democracy in the 1990-ties. Due to this, demographic changes in CIE countries gain in weight, are furthermore under the influence of the transitional processes and thus differ considerably compared to those in the developed countries. The differences are heavily attributable to two sets of factors: a) different institutional settings, especially in the family policies related to employment of women and child raising; and b) different effects of these family policies upon fertility rates and participation of women in the labour market. Given the above demographic trends, welfare states in Europe, adjust accordingly, predominantly through the policies and measures of family policy as one of the social policy domains. Following a detailed statistical analysis of demographic indicators in Europe, this paper will produce an analysis of the family policy responses to demographic trends based on the Esping-Andersens' classification of welfare states: universal welfare states (Nordic countries); conservative welfare states (Continental European countries); liberal social states (Anglo-Saxon countries) and South-European social states (Mediterranean countries). A specific focus in the paper will be also given to the demographic trends and corresponding family policy developments in the Republic of Macedonia, as a country of South Europe. Cross-cutting issues in the analysis of the family policy models will be: the extent to which family policies are gender-neutral or gender-specific (are they women-friendly and do they promote active fatherhood?), measures for harmonization of work and family life (are women appropriately supported in performing their roles of mothers and active participants in the labour market at the same time) and the scope in which family policy is being designed to serve the purposes of population policy (how the concern and the interest of the state to increase fertility rates shapes family policy?).

Keywords: family, fertility, welfare states, family policy models.

Introduction

Demographic Changes in Europe

Following 1945, that is the Second World War, Europe faced a huge demographic increase in the number of births, known as *baby-boom*. Encouraged by the improvement of the living conditions after the devastating war, the return of the optimism, opening of the employment opportunities and the renewal of the idea about the family, this demographic trend entailed the so-called *familism tide*. In the mid 1960-ies however, demographic indicators in almost all European countries began to change suddenly. Massive development of contraception, increased birth control and family planning, as well as higher employment of women and their integration in the labour market, took place. As a result of these trends, in the 1970-ties European countries faced a considerable drop in fertility rates. This trend reached its peak during 1970-1980-ties when a dramatic drop in fertility rates took place, known as *baby-bust*. As a consequence, almost everywhere in Europe, the fertility rate dropped below the level needed for simple population reproduction or below 2.1 children per woman. Several related trends also contributed to the change in the demographic picture of Europe, such as: dropping birthrates, shrinking of the population, delay in births (increase in the age of birth of the first child), increase in the number of one-child families, as well as growth in the number of couples without children (universality of births is no longer present – at least 1 child per family) (Bornarova, 2014).

1.1. Trends in Fertility in the Developed European Countries

As a consequence of the fertility rate below the level required for population reproduction evidenced in the last few decades, and initiated in the 1960-tees and 1970-tees, European countries face a population decrease challenge due to the expectation that the low fertility may reduce the number of potential parents. It is assumed that if such low fertility rates are maintained for a longer period of time together with low mortality rates, they may have dramatic implications in terms of reducing the annual number of births and the number of population by half, in less than 5 decades (Kohler, Billari, Ortega, 2006).

Fertility below the reproduction levels is common in the world, with Europe being the world leader in this trend. From average total fertility rate of 2.17 in the period 1970-1975, total fertility rate in Europe decreased to 1.54 in the period 2005-2010 (UN, 2013). In 2015, the total fertility rate in the EU-28 was 1.58 live births per woman. The EU-28's fertility rate increased from a low of 1.46 in 2001 and 2002 to a relative high of 1.62 in 2010, subsequently followed by a slight decrease to 1.55 in 2013 before a modest rebound in 2014. The mean age of women at childbirth continued to rise between 2001 and 2015, from an average of 29.0 to 30.5 years. One partial explanation for the increase in the fertility rate is that it may have been related to a catching-up process: following the trend to give birth later in life (witnessed by the increase in the mean age of women at childbirth), the total fertility rate might have declined first, before a subsequent recovery. Among the EU Member States, France reported the highest fertility rate in 2015, with 1.96 live births per woman. By contrast, the lowest fertility rates in 2015 were recorded in Portugal (1.31 live births per woman), Poland and Cyprus (both 1.32 live births per woman), Greece and Spain (both 1.33 live births per woman). In most of the EU Member States, the total fertility rate declined considerably between 1980 and 2000–2003: by 2000, values had fallen below 1.30 in Bulgaria, the Czech Republic, Greece, Spain, Italy, Latvia, Slovenia and Slovakia. After reaching a low point between 2000 and 2003, the total fertility rate increased in most Member States and by 2015, all of them reported total fertility rates that were above 1.30.¹

In 2015, some of the countries with the highest total fertility rates also had a relatively high mean age of women at the birth of their first child. Four different groups of EU Member States can be broadly identified based on their position with respect to the EU-28 averages. The *first group* is composed of Denmark, Ireland, the Netherlands and Sweden, where both the total fertility rate and the mean age of women at the birth of their first child were above the EU-28 average. A *second group* is made up of most of the countries that joined the EU in 2004 or more recently: both their total fertility rates and mean ages of women at the birth of their first child were below the EU-28 averages, as was also the case in the Macedonia and Serbia. A *third group* composed of Germany, Greece, Spain, Italy, Cyprus, Luxembourg, Austria and Portugal, as well as Switzerland recorded a higher than average mean age of women at the birth of their first child but a lower total fertility rate than the EU-28 average. The *fourth group* was composed of the three Baltic Member States, Belgium, France, Romania, Finland and the United Kingdom, as well as Albania (2014 data for the mean age of women at birth of first child), Norway

¹ http://ec.europa.eu/eurostat/statistics-explained/index.php/Fertility_statistics

and Iceland; in each of these, the total fertility rate was higher than the EU-28 average but the mean age of women at the birth of their first child was below the EU-28 average.¹

1.2. Trends in Fertility in the Countries of Central and Eastern Europe

Similar trends are evidenced in the countries of Central and Eastern Europe (CIE), with one considerable difference – they took place around a decade later compared to the developed European countries. One common characteristic which shaped the demographic changes in CIE countries was the fact that they occurred simultaneously with the radical changes of the societal system from socialism towards democracy in the 1990-ties. Due to this, demographic changes in CIE countries gain in weight, are furthermore under the influence of the transitional processes and thus differ considerably compared to those in the developed countries. According to Neyer (2006) the differences are heavily attributable to two sets of factors: a) different institutional settings, especially in the family policies related to employment of women and child raising; and b) different effects of these family policies upon fertility rates and participation of women in the labour market.

In the period from 1990-2000 sudden and drastic fall in fertility in these countries was not only a temporary trend, but continued in the 21st century. In transitional countries the drop in fertility rates is attributed to several factors: socio-economic changes, urbanizations, impoverishment of population, emancipation of women and increased labour market participation of women. In 1990s total fertility rate is around the level required for population reproduction, that is around 2.1 in almost all CEE countries, except Slovenia, Croatia, Bosnia and Herzegovina where this rate was lower than 2.1. In 2000, total fertility rate is below 1.4 in almost all countries, except Albania, Macedonia, Serbia and Montenegro. These countries still evidence decrease in the total fertility rate, although they are traditionally high fertility countries (Philipov, 2003). Evidence of the rapid decrease in fertility rate and its maintenance on low levels is the data that in 2010 total fertility rate in CEE countries (1.4) is even lower than the EU27 average (1.59).

Mean age of women at first birth in these countries also considerably and suddenly increases. Women tended to have their first birth quite early during the communist era, on average between 22 and 24 years of age. With the beginning of the transition in the early 1990s women started to postpone childbearing and the mean age of women at first birth started to rise and did so throughout the remainder of the 1990s and the 2000s. The increase in the mean age of women at first birth was most pronounced in Central Europe but slow in Eastern Europe. For instance, in the Czech Republic it grew from age 22.5 in 1990 to 27.6 in 2010; in the Russian Federation increased from 22.7 only to 24.8 during the same period. In most countries the mean age of women at first birth growth slackened in the early 2010s (Frejka, Gieten-Basten, 2016).

It may be concluded that CEE countries basically undergo same demographic trends related to fertility as developed European countries. The only specific difference is that these trends in CEE countries take place considerably later, but with a higher intensity and within a shorter time period compared to the developed countries.

Given the above demographic trends, welfare states in Europe, adjust accordingly, predominantly through the policies and measures of family policy as one of the social policy domains. Modalities in which these changes take place will be elaborated further in this paper.

2. Models of Family Policy According to Types of Welfare States

Family policy is an integral part, more specifically a separate domain of social policy in every welfare state. Hence, the way in which family policies are created depends on the type of the welfare state in which those policies are designed. According to Fukuda (2003), there are great differences between countries in terms of family policies. This is mainly because family policies are not designed solely under the influence of economic and demographic factors, but they also depend on cultural traditions and norms that implicitly determine the type of relationship between parents and children in a society. Within the welfare state, family policy is a domain that is less precisely defined than, for example, health care or social security. This comes as a result of the fact that in some countries the family is seen as a private institution in which society must not

¹ - He was born on Wednesday, 22nd of September, 1842. He was of moderate conduct when he was young before coming to the throne. He was sworn as a sultan in the 31st of August, 1876 when he was 34 years old. He remained the sultan for about 33 years until the 14th of April, 1909. He adopted a balanced policy with the European states to avoid wars. He established a strong intelligence body to protect the Ottoman state from plots and treacheries schemed by the European states. He adopted the Islamic League Policy to unite the Islamic Nation. He died on the 10th of February, 1918. (Al-Jundi, 1987).

interfere, except in particular crisis situations. Therefore, in most countries, there is no separate family legislation, nor an administrative structure that would manage this area of social policy.

The professional literature notes attempts of creating typology of welfare states. One of the most famous typologies is of Esping-Andersen, where welfare states are grouped into four groups (categories): universal welfare states (Nordic countries), conservative welfare states (continental European countries), liberal welfare states (Anglo-Saxon countries) and southern European welfare states (Mediterranean countries). This typology is based on the principle of decomodification, more precisely, the extent to which the welfare state reduces the dependence of the worker from the market by guaranteeing his right to leave the labour market without seriously jeopardizing his survival. The decomodification goes hand in hand with defeminisation, that is, the extent to which the welfare state releases the family/household from the obligations of social protection.

According to feminists analysis of welfare states this classification is less reliable when taking into account family, family policies and commodification of a woman. Unlike the typology of Esping-Andersen who sees the family as a community, the feminist research distinguishes between two types of relationships from which is comprised: partnership and parenting. Hence, the classification of welfare states in terms of family policies, requires to focus on the way policies regulate partnership and parenting, on the availability of social services for care, and on gender aspects of the policies of the welfare state (Nesser, 2003).

Basically, the existing typologies of welfare states may indicate that women's role in the labour market, family policies or maternity benefits are not sufficiently taken into account. Therefore, special typologies of family policy have been developed which, as a starting point, have exactly the role of the woman, and above all her place in paid and unpaid work (Pulizz, 1999).

Gautier (2002) based on the analysis of the characteristics of the types of welfare states from the classification of Esping-Andersen, made the appropriate classification of states according to the model of family policy in them. The characteristics of these models will be analysed below.

2.1. Scandinavian model of family policy

Characteristics of the welfare state. Public policies in the Scandinavian countries (Denmark, Finland, Sweden, Norway) aim to cover the social and labour market risks and maintain a high standard of living for all. Social benefits are obtained on the basis of individual civil rights. The goal is social integration, equality and access to social rights by providing social security for all citizens. Comprehensive social services contribute to the defamilization of social protection (reducing the contribution of the family to social protection), that is, the Scandinavian (Nordic) model of a welfare state is characterized by high-quality public services, universal service, the dominant role of the state as a provider of social services and their availability to all.

Family policy in Scandinavian countries. Family policies in the Scandinavian countries are oriented towards facilitating maternal employment, releasing the mother from her caretaking work, as well as changing gender roles with regard to foster care and employment. Accommodation in public institutions for children of all age groups is widely available at very low prices. Parental leave is regulated to allow parents to take care of their children without deteriorating their living standards or jeopardising employment. On the whole, family support is based on providing more social services than cash benefits, although all Scandinavian countries have increased social transfers over the last decades (Esping-Andersen, 2002). This partially coincides with the change in public policies towards subsidizing family care for children. Although Finland and Norway have relaxed the orientation towards employment and gender equality in their family policies by introducing cash benefits for home care, they did not eliminated the right of parents and children for accommodation in a public care institution.

The main goal of family policies in the Nordic countries is redistribution of expenses for children among different population groups and increasing gender equality. Also, family policy is considered to be a central instrument for promotion of participation of women in the labour market and for adjusting the family with the working life. As a result of this, the participation of a woman with a children under the age of three on the labour market in the Nordic countries is among the highest in Europe (86% in Sweden, 84% in Denmark) (Forssen, 1998). The high percentage of women's labour market participation is enabled by a comprehensive day care system. In Finland, for example, at the request of parents, a child can be accommodated in day care even when both parents are unemployed. Therefore, the Nordic model is called a woman friendly model (Leira, 1993). In Norway, day care services are so important that regardless of whether the day care centers

or kindergartens are public or private, as long as they are approved by the government, they receive public subsidies (Hardso, Schone 2005).

In the Scandinavian countries, the movement of so-called state feminism influences significantly on family policy. Namely, public benefits for families with dual –breadwinner “dual-breadwinner model” (both men and women participate in the labour market) and for the protection of children is developed in a political context in which women's equality is valued. In doing so, family policies are not directed only at mothers, but also towards mothers and towards fathers, and efforts are being made to encourage men to take up most of housework, especially with regard to child care (Crompton, Lnnnette, 2005), which is done by introducing compulsory quotas for fathers or other benefits related to childcare as individual rights reserved only to them. By establishing conditions for combining double labour market participation with dual parenting, the Nordic countries made a significant shift from social security based on the market to social security based on the ideology of gender equality. These states understand unpaid family protection as an individual right that co-exists with the right to work, and not as an external factor that impedes the participation in the labour market (Bradshan, Khatland, 2006).

The Nordic countries largely depend on the public sector regarding help of parents to reconcile family and working life. Not only is the participation of women in the labour market encouraged, but also the redistribution of care-giving function in society and in the family (Korpi, 2000).

Precisely because of such family policy, the employment rate of women is very high, as there are numerous programs to support motherhood, flexible working practices, and work place safety measures after childbirth, as well as well-developed child care services from the earliest age (0-2 years) to school age, provided on a daily basis throughout the week. Also, through policies for activation of the labour market, women are encouraged to be employed before childbearing, in order to provide an inclusive labour market and to prevent social exclusion (Bovberg, 2005).

2.2. A conservative model of family policy

Characteristics of the welfare state. The continental European countries (Germany, the Netherlands, Ireland, France) angle their social policies to maintain the status of society and preserve traditional family forms. Social benefits correspond to type of work and duration of contributions into the social security system, and are also dependent on marriage. Conservative states are largely based on familism, that is, the family as a provider of social welfare. This corporate model is dominated by the provision of social and economic well-being by men. The public sector is more involved in providing social protection through income transfers than through a direct offer of social services. Services are mostly provided by non-governmental organizations and the church.

Family policy in conservative states. Regarding family policy, the mother-housewife ideology assumes that care for children and the elderly is the primary responsibility of the woman (Borzhorst, 1994). Family policies are focused on the needs of families with two parents and the woman and her role in the family. In this regime, the rate of participation of mothers with children under the age of 3 in the labour market varies from country to country (Germany 40%, France 60%). These are lower rates than in the Nordic countries. This is partly due to unsatisfactory day care programs that usually offer half-day care and are not developed for children under 3 years of age. For example, in Germany, day care is usually shortened, not for the whole day, and only single families have access to this service (Forssen, 1998). Public policies prioritize private before public care. The policies for combining work with care-giving engagement are not sufficiently developed. Family benefits are significant, but the benefits of child care are low and insufficient. Directly or indirectly, family policies in these countries are guided by the approach that women caregivers are supported by male breadwinners (Nesser, 2003). In these countries, the male earner model contributes to the existence of a strong cultural resistance to the feminization of a man's life which would be necessary for the development of policies that would contribute to greater gender equality (Bradshan, Khatland, 2006).

Continental European countries apply general measures for family support (Korpi, 2000). Harmonization of working and family life is only partially supported. Women's participation in the labour market is on medium or low level, and women usually choose to work part-time because their contribution to the family budget is of secondary importance (Borja, 2001). These states support the model of a mother caregiver/father breadwinner, where the main responsibility for care is given to the woman, while the career and status of the male breadwinner is protected through laws related to the labour market. Unlike the Scandinavian countries, in the Continental active fatherhood is not supported.

2.3. Liberal model of family policy

Characteristics of the welfare state. Liberal social states (USA, Australia, UK) support market-oriented individualism through minimum public social benefits and promotion of private and market patterns of social protection. Social benefits are usually based on income checks and reserved for the poorest. Social protection depends on the market and familism. The state plays a very small role as a provider of social services.

Family Policy in Liberal States. In the domain of family policy, there are no satisfactory measures to facilitate the conflict of women between work and childcare. Benefits related to motherhood (for example, maternity leave) and daily care for family members are minimal. Daily care in general is left to the private sector. Part of the day care services are subsidized and supervised by the state, but primarily for children under some form of public protection. On the other hand, despite the weaknesses and lack of public child care services, more than half of mothers with children under the age of 3 are employed, which shows that most of the child care functions are performed unofficially, usually through social and family networks of informal support (Forsyden, 1998).

In the liberal model family policy relies more on individual solutions that the family finds on the market than on state programs, where despite families at the top of income distribution, families with medium and low income have limited opportunities to combine paid work with a care-giving family function (Hartmann, Hegnigsch, Lovell, 2007).

Anglo-Saxon countries have a market-oriented model in which families depend on market resources or family relationships with regard to child care (Korpi, 2000). In these countries, the underdeveloped maternity leave and parental leave are compensated by a very flexible labor market. Flexible working practices in the private sector (flexible working time, part-time volunteer work, etc.) help women in easier integration on the labour market after childbearing (Bovberg, 2005). However, residual social protection and the absence of public childcare services marginalizes low-skilled workers and single-parent families (Jansaita, 2006). Basically, family policy encourages informal unpaid care for children and the elderly in the family and does not support active fatherhood (there are no parental leave opportunities for the father). In the absence of public family benefits, family policies are created by companies/employers resulting in the non-uniformity, inconsistency, and differences in access to these benefits.

2.4. South European model of family policy

Characteristics of the welfare state. Mediterranean social states (Italy, Portugal, Spain, Greece) are sometimes considered as part of the conservative welfare states, but because of their strong orientation towards familism they are treated as a separate group of social states. Due to the large role of the family in the provision of social protection, this model of a welfare state is also called a model of family care. Pluralism in the provision of social services by the state, but also by the non-governmental and private sectors is characteristic.

Family policy in South European countries. South-European countries are characterized by strong family-oriented values associated with a low degree of individualization and a lack of explicit family policies as evidenced by the limited number of social benefits for families. Public services for children are unsatisfactory, as are family allowances and the benefits of adjusting family and working life, so that families are left to themselves in meeting their needs. Families in these countries in comparison to other European countries are more generational, with greater share of young people living with their parents, the rates of extramarital couples are lower, and the number of children born out of wedlock, the rates of divorce and single families is lower, the intergenerational solidarity is stronger and dependence when it comes to providing care for children and the elderly for whom adult women have a traditional and moral obligation to care for (Flauler, 2000).

In such conditions, one cannot claim that the welfare state in south European countries is based solely on the model of one breadwinner, but rather on the entire family as the unit from which they provide income and resources, to which each member contributes. The figure of the husband as the provider of family existence is not central, but of the family and family solidarity and of the primary role of women (married women and mothers) in providing informal protection. According to Esping-Andersen (1999), this familism (familism) goes hand in hand with a passive and underdeveloped family policy. Thus, family policy in southern European countries implicitly fosters and reproduces the ideological assumption for the family as the main provider of social welfare in society.

Child care services are not very well developed. The public offer of care-giving services for children under 3 years old as well for older children (except in Italy) is insufficient, and the cost of child care is high. Parental leave is unpaid. Children's

allowances are not universally available and are very low (Esping-Andersen, 2002). And while around 33% of children under 3 years of age are covered in a private or public form of a pre-school institution in the developed Nordic countries or in the United Kingdom, in Greece, Italy, Spain this percentage is around 10% (Oberlin, 2008).

There are insufficient measures to support women's employment in these countries, hence maternity employees must rely on informal family assistance. Flexible working practices (Borja, 2001) are also missing, and are observed as a threat to the protected position male breadwinner.

2.5. The model of family policy in the post-communist countries of Central and Eastern Europe

Characteristics of the welfare state. The Professional literature increasingly introduces the notion and thus forms another model of social policy - characteristic of post-communist countries. These countries share common transitional experiences from state socialism to a market economy. Within this process, a transition from universal benefits and services toward completely different solutions has been made to meet social needs such as the market, civil society and the family, in addition to the state. Gradual inspection of income and targeting of social benefits is introduced. These countries have similar demographic, economic and social challenges from the transition, but the way they respond to these challenges differs depending on the social, political and cultural context. Because of these differences, this model is also called a hybrid model of a welfare state.

In essence, in constructing models welfare state, the CEE countries, are increasingly inspired by the pattern of international financial organizations such as the International Monetary Fund and the World Bank, rather than the European model (Manabu, 2005).

Family policy in post-communist countries. These countries are characterized by a non-coherent family policy, a lack of competent institutional structures and adequate financial resources. Family policy is often used to achieve pro-natal goals, and women mothers are discriminated against in the labour market (Kutsar, Ulukool, 2005).

Also, in the CEE countries, the much smaller involvement of fathers in childcare and the use of public provisions for parental leave for this purpose is characteristic. Family policy itself is based on supporting the mother's role in caring for members of the family "mothers as caregiver model" rather than active parenting of fathers.

According to Hobson and Fahlen (2009), CEE countries have the smallest opportunities to achieve a balance between family and work life due to the multiple factors: lower job protection, lack of policies designed to support the father in his family role as well as stronger norms according to which the role of a man is to secure the family's existence. As for mothers in these countries, they have the smallest opportunities to achieve this balance between working and family life.

In the transformation of the social system in the countries of this group, family politics leans towards the liberal model (opportunities for market satisfaction of the needs of childcare and the elderly are opened up), yet they retain much of the features of the Scandinavian model (primarily in relation of public benefits), while the dominant informal family protection makes this model much similar to the model of family care characteristic for the countries of South Europe.

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